State of Michigan

CHILD AND FAMILY SERVICES PLAN

2010-2014

2011 Annual Progress and Services Report

Submitted June 2011
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INTRODUCTION

The State of Michigan, Department of Human Services (DHS), is the agency recognized by the Department of Health and Human Services (DHHS), Administration for Children and Families (ACF) as responsible for administering federal child welfare programs under titles IV-B, IV-E and XX of the Social Security Act. The state’s child welfare program is state-supervised and administered. The DHS mission includes a commitment to ensure that children and youth served by our public systems are safe; to promote, improve and sustain an improved quality of life; and to have permanent and stable family lives.

The DHS Children’s Services Administration is responsible for planning, directing and coordinating statewide child welfare programs, including services provided by DHS offices and services provided by private agency providers. Michigan has 83 counties served by 109 local DHS offices; nine are designated by DHS as “urban,” four in Wayne County and one each in Oakland, Macomb, Kent, Genesee and Ingham counties. These offices have a separate child welfare director.

DHS Mission
DHS assists children, families and vulnerable adults to be safe, stable and self-supporting.

DHS Vision
DHS will:
- Reduce poverty.
- Help all children have a great start in life.
- Help our clients achieve their full potential.

Michigan’s Child Welfare Mission
The State of Michigan is committed to ensuring that economic, health and social services are available and accessible to vulnerable families, children and youth.

Services are designed to:
- Strengthen families and help parents create safe, nurturing environments for their children.
- Reduce child maltreatment, abandonment, neglect, preventable illness, delinquency, homelessness and other risks to a child’s development and well-being.
- Strengthen economic security, promote strong nurturing parenting and improve access to health care and safe, secure housing.

Child Welfare Demographics and Caseloads
As of March 31, 2011, DHS was responsible for the care and supervision of 14,706 foster children, which includes children supervised by private agencies under contract with DHS. In FY
2010, there were 121,405 CPS complaints made to DHS. Of these, DHS assigned 78,893 for an investigation (65 percent). Substantiated CPS cases numbered 21,401; 26 percent of the cases were assigned for investigation.

DHS contracts with 58 private agencies at 85 sites that provide case management services to children in out-of-home care. DHS has 50 adoption contracts operating at 58 sites. Six agencies are contracted to provide supervised independent living services. Many of these agencies provide multiple services.

In Michigan as of September 30, 2010:
- Twenty-eight percent of the foster care caseload is in Wayne County.
- Fifty-nine percent is in the six urban counties including Wayne.
- Seventy-six percent is in the “Big 14,” which also includes Berrien, Calhoun, Jackson, Kalamazoo, Muskegon, Saginaw, St. Clair and Washtenaw counties, in addition to the urban counties.
- Twenty-four percent is in the remainder of the state.

Child Welfare Reform
DHS continues its significant child welfare reform efforts. These efforts include the continuation of the consent decree that DHS entered into with Children’s Rights, Inc. because of the Dwayne B. v. Granholm, et. al. lawsuit. The consent decree builds upon reform efforts already under way and improves safety for children while providing stronger support for those who care for them. DHS is also implementing recommendations from the Child Welfare Improvement Task Force. The change priority recommendations from the task force are highlighted in the Annual Progress and Services Report (APSR) and the Child and Family Services Review (CFSR) Program Improvement Plan.

RACE EQUITY

To address over-representation of children of color in the child welfare system, DHS is committed to maintaining children safely in their homes. However, when children must be removed, they should be placed in an environment that supports their physical, emotional and cultural needs.

In the 2006 Michigan Disproportionality Report about race issues, recommendations were issued to focus Michigan’s efforts toward addressing this concern.

Findings and Recommendations
Review the impact of all policies, programs and procedures on families and children of color

Status: DHS is creating a CPS centralized intake unit through a combination of staff and systems that will receive and manage all calls alleging child maltreatment. Intake staff will receive the
same training and will be expected to make decisions consistently. The centralized intake unit will be implemented statewide by April 2012.

DHS is working to improve the placement process including placing siblings together in their neighborhoods to aid parental visits and maintain important relationships. Staff is encouraged to look at all viable relative placement and foster care options prior to placing children in residential settings.

DHS is ensuring that children in relative placement experience the same level of safety in placement and receive a full array of services and financial support when compared to children placed in foster homes. DHS implemented a guardianship assistance program and is focusing on licensing relative placements. The guardianship program is a permanency option for children who would otherwise remain in foster care, providing financial assistance to the individuals providing permanence for foster children who are in situations in which reunification and adoption are not viable options.

Ensure culturally proficient practice

Status: DHS is establishing a contract selection process that:
- Assesses agencies’ willingness to serve a diverse population.
- Reports on outcomes by race.
- Develops innovative culturally appropriate services.

Other DHS efforts to address disproportionality:

Wayne County: In FY 2010, Wayne County DHS built culturally appropriate services for African American children and families in the child welfare system by collaborating with:
- Juvenile Division of the Third Judicial Circuit Court.
- Wayne County Department of Children and Family Services/Juvenile Justice Division.
- Black Family Development, Inc.

In December 2010, Wayne County DHS hosted a two-day visit with the Black Administrators in Child Welfare to identify themes among service providers and human service agencies serving African American dual wards that would guide future work. That visit produced a set of proposed protocols for the primary service agencies. The group also clarified who the dual wards are within the county. Therefore, the group was aware that the service population, while only around 100 cases, it still represents vulnerable young adults who could benefit from a joint framework for service delivery.

St. Clair County: DHS established a work group and identified these strategies to reduce the number of children of color:
- Develop a seamless system for dual ward children and youth through collaboration with child welfare, juvenile justice, mental health, health and education systems.
• Reduce high-risk behaviors.
• Increase permanency.
• Increase positive youth development.

Collaboration was identified as a priority to reduce duplicate efforts and system inconsistencies and decrease staff confusion of policy, procedures, roles and responsibility.

**Ingham County:** DHS is working with community leaders to improve policies and practices that will assure all youth in Ingham County have successful outcomes in education, health, employment and economic development.

This initiative began because of the identified disparate treatment of African American males in Ingham County, but has evolved into a partnership with Community Mental Health in an effort focused on reducing overall numbers in foster care. The CMH Impact program provides intensive family preservation services to severely emotionally disabled children and their families; Ingham County DHS has successfully reduced the ongoing foster care caseload by 33% since 2008.

Ingham County also participates on an ongoing panel studying the medical needs of people of color. Another collaborative effort the county participates in is chaired by the Ingham County Commission and is studying health care needs of males in foster care.

**Engage families as partners**

**Status:** DHS continues to engage parents in decision-making processes. The implementation of MiTEAM, Michigan’s engagement model, which stands for teaming, engaging, assessing and mentoring, will improve family engagement.

DHS hired permanency resource managers to ensure the permanency needs of children are addressed and to coordinate statewide planning.

DHS increased efforts to achieve timely reunification. Counties receive a bi-monthly report identifying the children who have been in foster care for 200 to 300 days with reunification as the permanency goal. The Permanency Resource Manager focuses on creating innovative strategies to find safe placements for children.

**Address families’ basic needs and focus resources on the most vulnerable families**

**Status:** DHS has developed training to address poverty, attended by over 700 child welfare workers, to:

• Give better understanding of how poverty and neglect differ and help staff recognize the difference between determining a family’s situation and needs.
• Explore the difference between generational and situational poverty and how people in each situation view the world.
• Provide helpful tools for determining the best services or resources to assist a family.
Building community support for reducing disproportionality

**Status:** In collaboration with the State Court Administrative Office, DHS held a conference last October for child welfare professionals, judges, lawyers, CPS and foster care workers and educators to provide information and encourage discussion in a solution-focused manner that encouraged problem-solving while:

- Introducing participants to disproportionality and its history.
- Addressing racism and its effects on our society.
- Highlighting what is being done nationally through the courts and other Michigan stakeholders to measure and reduce disproportionality.
- Assessing the interest of participants to become involved locally with disproportionality reduction efforts.

After the conference, a committee began working to analyze data to guide decisions to address disproportionality and assist with the implementation process. A proposal was submitted to Casey Family Programs in May 2010 for grants and funding for training.

Monitor DHS’ progress in reducing disproportionality

**Status:** DHS and the State Court Administrative Office finalized a data sharing agreement for child welfare information to determine where disproportionality exists and to measure the effectiveness of interventions.

A committee of public and private child welfare professionals will analyze disproportionality data, policies, procedures and practices to reduce the over-representation of children of color.

The State Court Administrative Office sought funding from Casey Family Programs to support this work and to initiate a pilot program in Saginaw County. Grant funds were received and a committee is being formed with DHS and national foundations to collect and analyze data that will help guide decisions. Training will be provided to both the state and Saginaw County. Each member will be trained in Casey Family Programs’ “Knowing Who You Are” and the People’s Institute “Undoing Racism” training.

Training and workforce development

**Status:** The State Court Administrative Office, DHS and Michigan’s tribes jointly planned and held five regional Indian Child Welfare Act trainings that required each county to identify a team of key stakeholders to serve as local experts on the Indian Child Welfare Act. These teams consisted of the following representatives:

- State court judge.
- Local DHS manager.
- Indian Outreach worker.
- Lawyer-guardian ad litem.
- Tribal representative(s) for counties having Tribal Social Services.

More than 2,000 workers have been trained in:
Family Preservation - Self-Awareness: This training widens trainees’ views of other cultures and increases their sensitivity and helps participants examine how their own cultural background influences their view of different cultures.

Self-Awareness/Cultural Diversity: The training helps participants define diversity and understand the benefits to families. Participants explore their personal attitudes, hidden feelings and assumptions that affect interactions and learn how to address their biases while respecting families.

Poverty in Child Welfare: This training gives trainees a better understanding of how poverty and neglect differ according to policy and how to recognize this when determining a family’s situation and their needs. The training provides helpful tools to determine which services or resources best assist a family, and how to locate them.

Indian Child Welfare Act: This training provides foster care, CPS and adoption specialists with an overview of the history, laws, policy and operational requirements of the act and provides resources that can help workers comply when working with American Indian families and children.

Knowing Who You Are: This training explores racial and ethnic identity to help youth in foster care achieve a positive and healthy sense of racial and ethnic identity.

Cultural Diversity: This training is offered to child welfare workers in urban counties to create an atmosphere of acknowledgement and acceptance while working with participants to define and examine the benefits of diversity.

COLLABORATION WITH THE COURT IN DEVELOPING THE CFSR PROGRAM IMPROVEMENT PLAN

In 2010, the State Court Administrative Office’s Court Improvement Program convened an advisory group of local judges, a state Supreme Court justice and attorneys representing children and parents. Their recommendations were included in the 2009 report and the CFSR Program Improvement Plan.

The focus of collaboration for 2011 and 2012 includes:

- Establish a joint court/DHS task force to increase the frequency and quality of parent-child visitation.
- Train court personnel to work collaboratively with DHS to ensure parent/child visitation promotes timely family reunification.
- Revise the judicial bench cards so courts address parent/child visitation during court hearings.
- Continue and expand Permanency Forums as a state practice to improve timeliness in achieving permanency.
- Establish practices that improve timeliness in parent rights termination processes including compliance with requirement for documentation of “compelling reasons”
when a petition to terminate parental rights is not filed for children in care for 15 of 22 months.

- Increase foster parent notification of court hearings and participation in the hearings.

DHS will work with the Court Improvement Program to develop and implement the strategies.

**CASELOAD REDUCTION**

Central to good social work practice is manageable caseloads and the necessary resources to ensure children return to, or are placed into, a permanent home. The counties have reduced their caseloads through extensive hiring and redistribution of caseloads. DHS also collaborated with the private providers to create funding mechanisms that will allow agencies to bring their foster care and adoption worker caseloads in line with the reduced staffing ratios.

**Goal:** DHS has set the caseload reduction goals in line with the consent decree.  
**Status:** DHS hired 743 workers in an effort to meet the caseload reduction standards set forth in the consent decree. The mass hiring was due to a large number of retirements at the end of FY 2010 and our efforts to improve the caseload ratios. Currently, many of the newly hired workers are in training and DHS anticipates our caseload ratios will decrease in FY 2011.

DHS assessed caseload ratios in October 2010 that revealed the following data on compliance:

- **CPS Investigations:**
  - 33.4 percent urban counties were in compliance of 13:1.
  - 42.0 percent outstate counties were in compliance of 13:1.
  - 31.9 percent statewide average.

- **CPS Ongoing:**
  - 37.1 percent urban counties were in compliance of 25:1.
  - 32.7 percent outstate counties were in compliance of 25:1.
  - 34.6 percent statewide average.

- **Foster Care:**
  - 75.0 percent urban counties were in compliance of 20:1.
  - 54.3 percent outstate counties were in compliance of 20:1.
  - 92.0 percent private agencies were in compliance of 20:1.
  - 76.1 percent statewide average.

DHS will continue to monitor the caseloads of its local offices and private agencies on a regular basis.
COORDINATED SERVICE DELIVERY

Michigan’s child welfare system is developed at the state level and delivered through more than 100 county offices and contract agencies to ensure consistency in service delivery.

DHS administers the federal Temporary Assistance for Needy Families, Child Care and Development Block Grant, Supplemental Nutrition Assistance Program, Low-income Home and Energy Assistance Program and the title IV-D child support program. DHS also determines eligibility and provides case management for Medicaid through Michigan Department of Community Health as the state agency. Finally, DHS administers the Disability Determination Service for title II and XVI funds. Service descriptions for all DHS programs delivered through these federal resources may be found here: http://www.michigan.gov/documents/dhs/DHS_Program_List_207362_7.pdf

Michigan counties serve families through resources that include:
- Providing cards and pamphlets describing the availability of and contact information for community resources.
- Using the United Way’s 211 Call Center, which is available in all counties.
- Using web-based resources for coordinated assistance applications and resource listings.

DHS Bureau of Community Action and Economic Opportunity provides support and oversight to Michigan’s 29 community action agencies that develop community partnerships, involve low-income clients in their operations and coordinate an array of services within their communities. They serve approximately 489,000 low-income individuals each year with services including Head Start, housing assistance, weatherization, senior services, income tax preparation, food, transportation, employment assistance and economic development.

According to U.S. Census data, almost one in every five Michigan children lives in poverty. The rate is nearly one in two for African American children and more than one in three for Hispanic children. DHS innovative strategies that meet the rising demand for services include:
- The Michigan Combined Application Project provides a streamlined application process for food assistance for citizens who receive SSI benefits.
- The Home Heating Tax Credit assists low-income families with the heating costs.
- Collaboration between private utilities and charitable groups that assist certain low-income persons to avoid utility shutoffs during the winter months.
- The Center for Civil Justice serves low-income persons in 14 central Michigan counties, providing legal and technical assistance to advocacy organizations through systemic advocacy strategies.
- The online Helping Hand Web portal weaves together the various threads of Michigan’s safety net. It provides a single source of information and resources for people who might otherwise fall through the cracks. Available at www.michigan.gov/helpinghand.
FAMILY RESOURCE CENTERS

Family Resource Centers were initiated in 2003 in 20 sites around the state. They are placed in elementary and middle schools to coordinate services according to goals developed and shared by the family, school, community and other agencies. These centers serve as a one-stop shop for family services located in or near a neighborhood school. There are 53 operating statewide whose goals are to:

- Create a user-friendly service model for families using state and local human services.
- Increase efficiency of state and local services by pooling resources.
- Increase academic performance and parental involvement.
- Help schools achieve annual yearly progress standards under the federal No Child Left Behind legislation.

DHS staff working in centers provide families with cash assistance, food, clothing, shelter and prevention services, Medicaid eligibility determinations, emergency assistance for utility shut-off, eviction and other housing issues, access to community-based mental health services, therapy and other services in agreement with local partners and school-based parent-involvement programs. Evaluations of schools with Family Resource Centers indicate the schools have improved standardized test scores, reduced absenteeism, and are much more likely than priority schools without Family Resource Centers to meet annual progress standards.

Partner agencies that locate services in Family Resource Centers report significantly improved outcomes for children and families due to the increased accessibility of services. Local evaluations of Family Resource Centers’ impact indicate the involvement is positive across a spectrum of school factors including attendance and parental involvement.


COORDINATION BETWEEN THE TITLE IV-E AND THE TITLE IV-D PROGRAMS

DHS and the Office of Child Support collaborated to develop a process that enables foster care and CPS staff the ability to obtain paternity information from the Department of Community Health’s Central Paternity Registry, an online central repository for information from affidavits of parentage and notices of orders of filiation filed in Michigan.
COORDINATION WITH FOSTERING CONNECTIONS TO SUCCESS AND INCREASING ADOPTION ACT OF 2008

Michigan’s title IV-E State Plan amendment, submitted in December 2010, demonstrated compliance with all of the required provisions of the Fostering Connections Act. DHS finalized policies for the 90-day transitional plans for youth transitioning from foster care as well as policy and procedures relative to juvenile guardianships.

Technical Assistance Provided to Counties and Local and Regional Entities
A guardianship-specific policy manual was created and is available to all children’s services staff. The manual includes instructions to staff on determining eligibility for title IV-E subsidized guardianships. DHS is still finalizing the possible extension of foster care and adoption assistance to older youth. DHS is in the process of developing a SACWIS compliant system to provide better data for all Fostering Connections requirements.

TITLE IV-E COMPLIANCE: FUNDING UNIT

DHS Federal Compliance Division manages the title IV-E state plan, title IV-B state plan, the federal Child and Family Services Plan and the Annual Progress and Services Report, along with the federal CFSR review and program improvement plan.

In June 2010, DHS and staff from Region V and the Administration for Children and Families Children’s Bureau conducted an eligibility review of Michigan’s title IV-E foster care program. On June 22, 2010, the Children’s Bureau Regional Office notified Michigan that the state was out of substantial compliance with the federal eligibility requirements for the period under review. Michigan DHS was able to provide documentation to the Administration for Children and Families that two of the four new error cases had been corrected. The remaining error cases included four identified during the on-site plus two additional error cases.

DHS appealed the two identified error cases based on our implementation of the fair hearings regulations. On January 14, 2011, the Department of Health and Human Services, Departmental Appeals Board, through decision number 2360, reversed the disallowance on the two disputed cases and concluded Michigan was in substantial conformance. On February 17, 2011, DHS received correspondence from the Administration for Children and Families confirming the results of the ruling. The Administration for Children and Families verified Michigan would not be required to complete a Program Improvement Plan.

Technical Assistance Provided to Counties and Local and Regional Entities
The Michigan legislature continued funding to support the 80 child welfare funding specialist positions in local offices whose responsibilities are to assure foster care funding determinations
and redeterminations are completed correctly and to encourage relative providers to become licensed providers. Staff supports the field regarding eligibility, funding, legal and payment issues for children in foster care and juvenile justice programs.

Federal compliance staff trained 226 DHS staff and supervisors new to the child welfare funding specialist positions since April 2008. Because of issues noted within the recently completed title IV-E review, the division developed a refresher training package for current child welfare funding specialist staff and their supervisors. Federal compliance staff trained more than 72 DHS staff and supervisors. The refresher training included:

- Training on AFDC requirements of living with/removal from a specified relative and deprivation factors.
- Accuracy of payments – identification and execution of necessary reconciliation and recoupment.
- Ongoing case reading activities – replacement of the current case reading instrument with one that is aligned more directly with the federal title IV-E case reading instrument.

Local offices submit monthly reports to the division that record and provide information on the funding specialist activities. A database tracks the information received from these reports and staff are exploring making the database available to local office staff for direct data entry.

Staff provides technical assistance to local DHS and court staff on appropriate title IV-E eligibility. The internal DHS Title IV-E Review Committee continues to review inquiries from courts and local DHS offices weekly. Federal Compliance and State Court Administrative Office staff meet in person monthly and communicate frequently by email and telephone to ensure consistency with the judicial requirements of title IV-E. Additional technical assistance is offered to the six urban field offices to assure title IV-E program compliance. As a quality assurance practice, analysts conduct monthly visits in those counties for consultation and title IV-E case reading. All counties have direct access to the analysts for any questions regarding funding and payments for foster care and juvenile justice.

DHS continues to provide direct support and consultation for the Wayne County title IV-E agreement. DHS assures coordination between DHS and Wayne County to assure the contract is being administered with adequate controls and quality assurance.

**Consultation with Tribes on Title IV-E Agreements**
Federal compliance staff developed contract language for title IV-E agreements with Michigan tribes. The division is working with the Keweenaw Bay Indian Community as they work to implement their title IV-E Tribal Plan with the Children’s Bureau. DHS will continue to provide an array of services to facilitate this program.
MICHIGAN COURT IMPROVEMENT PROGRAM

The Michigan State Court Administrative Office’s Child Welfare Services Division administers Michigan’s Court Improvement Program and receives three federal grants for data collection and analysis, training and the main grant.

The Child Welfare Services Division:
- Serves as Michigan trial courts’ central resource for issues that involve child protection, foster care and adoption.
- Provides guidance and technical support to family division courts, attorneys and DHS.
- Coordinates judicial liaison contacts with the legislative branch.

Child Welfare Services operates the program through a statewide, cross-disciplinary task force aimed at improving child protective proceedings to achieve safety, permanency and well-being for foster care children. The program allows Michigan to implement reforms and track state compliance with laws, national standards and program improvement plans.

During 2010, Michigan’s Court Improvement Program staff focused on the following:
  Status: Completed.
- Preparing courts for, and assisting DHS with, the 2010 federal title IV-E eligibility audit.
  Status: Completed.
- Initiating a pilot program with Michigan’s largest court, Wayne County Circuit Court, to improve relations between the court and DHS.
  Status: In process, project is in its second year.
- Engaging attorneys who represent parents in child protection proceedings.
  Status: Ongoing.
- Increasing program visibility and interaction with Michigan’s tribes.
  Status: Ongoing.

Court Improvement Program - Main Grant
The Court Improvement Program funds a statewide task force that meets quarterly and has 65 members. The task force uses Michigan’s 2005 Reassessment Report to guide activities.

Quality Representation Committee: Improve Legal Representation for Children and Parents
This committee meets monthly to finalize recommendations to courts on establishing training and higher expectations for attorneys in child welfare proceedings and court follow up if expectations are not met. Two documents are being developed which address the expectations that will be incorporated into the attorney appointment protocol and a sample contract for courts and appointed attorneys.
Status: Completed.
The committee also has drafted two court rule recommended changes: jury trial periods and the appointment of counsel in child welfare cases.

**Status:** Under consideration by the Michigan Supreme Court. The committee drafted a proposed statutory change that would give parents and their attorneys the same access to documents as the L-GAL assigned to that case. DHS found a legislative sponsor for this proposal and it was introduced in the House of Representatives in January 2011.

**Policy Committee: Overnight Removal Issues**
The Policy Committee discussed issues related to emergency removals of children from their homes when the courts are closed. Michigan statutes and court rules provide only minimal guidance, which results in disparate practices and uncertainty at the county level. A state senator introduced legislation based on the Court Improvement Program recommendation on September 29, 2010 and it has been reintroduced in the 2011 legislative session.

**Status:** In process.

**Requirement that Courts Obtain a Child’s Input**
The Policy Committee advised courts of the federal and state requirements to obtain the child’s views during permanency planning hearings. On November 5, 2009, a statewide conference provided an overview of national policies addressing children’s participation in court proceedings and its benefits. The Policy Committee will design new policies, best practices and protocols for child and youth involvement in dependency hearings, and draft additional statutory change.

**Status:** In process.

**Non-Respondent Parent Issues**
The Policy Committee analyzed issues concerning non-respondent parents in abuse/neglect cases to determine if statutory changes are necessary to ensure parental rights are protected. The Policy Committee temporarily merged with the CFSR Committee to focus in providing expertise and assistance on the Program Improvement Plan and hopes to refocus on non-respondent parents’ issues in 2011.

**Status:** In process.

**Central Registry Issues**
The Policy Committee evaluated current central registry statute. Draft legislation is being finalized for recommendation to the Michigan legislature in 2011. Additionally, the subcommittee helped re-draft the Perpetrator’s Notice of Action and Rights that is sent to every person that DHS lists on Central Registry.

**Status:** In process.

Separately, the group also vetted various draft proposals by the Permanency Options Work group. Another draft was considered at the May 11, 2011 meeting.
Quality and Depth of Hearing Committee
The committee reviewed each child protective hearing process, developed best practice tips and recommendations and focused on whether:

- Court oversight advanced the child’s permanency.
- Individuals appearing at the hearing were encouraged to participate effectively.
- Jurists, lawyers and caseworkers had sufficient training to complete their tasks.

The statewide task force reviewed the committee’s final report at its January 2011 meeting and will publish the recommendations and provide statewide training once they are final. The committee will work collaboratively to develop the curriculum and to train child welfare professionals and jurists on the recommendations.

**Status:** In process. Child Welfare Services is editing and anticipates publication by July 2011.

Child and Family Services Review (CFSR) Committee
Michigan’s CFSR onsite review found Michigan not in substantial conformity with the seven outcome factors and four of the seven systemic factors that relate most directly to the courts. In April 2010, staff convened a statewide advisory group, because of a request from DHS’ Federal Compliance Division, which reviewed the CFSR final report and provided recommendations to DHS regarding:

- How the court system should address areas of non-conformance.
- How DHS could modify its operations to achieve substantial conformity with the federal requirements.

The advisory group submitted a report to DHS with recommendations bulleted on page 11 that were included in the approved Program Improvement Plan.

**Status:** Ongoing. DHS will work with the Court Improvement Program to develop and implement related strategies.

In addition, during November 2010 Child Welfare Services sponsored a statewide conference on improving parent-child visitation to help address another area of non-conformity identified by the CFSR.

**Status:** Completed.

Tribal Court Relations Committee
The Tribal Court Relations Committee drafted a Michigan Indian Family Preservation Act that would serve as Michigan’s companion legislation implementing the federal Indian Child Welfare Act. The committee met five times between Sept 30, 2010 and April 1, 2011 and finalized the document to be recommended to the Michigan legislature.

**Status:** In process.
The next project for the Tribal Court Relations Committee is to create a Tribal-State/Bench-Bar Forum that will facilitate communication between judges and lawyers practicing in both tribal and state courts.

**Status:** In process.

**Court Improvement Program - Data Collection and Analysis Grant**

In 2009, the project produced 11 data reports available to only three pilot counties. During 2010, the number of reports increased to more than 30 and the counties with access quadrupled. The new reports include next-court-hearing-date information for caseworkers, and the court-ward data required by the *Dwayne B. v. Granholm, et. al.* consent decree.

Child Welfare Services began administering the state’s Absent Without Legal Permission case management system, evaluating the system and reports it generates, making improvements and updates where necessary.

**Status:** Ongoing.

**Court Improvement Program - Training Grant**

Child Welfare Services administers many child welfare training programs with funds from the Training Grant and special-purpose grants from the Governor’s Task Force on Child Abuse and Neglect. In 2010, Child Welfare Services staff administered or co-sponsored 31 trainings around the state on topics such as:

- The Indian Child Welfare Act.
- Removal prevention and timely reunification.
- Legal representations of parents and children.
- Youth in Transition.
- Legal updates.
- Educational issues.
- Role of visitation in timely reunification.

Child Welfare Services continues to offer initial orientation training for new family division judges and referees. The 2010 training schedule can be found at:


**Status:** Ongoing.

The Child Welfare Services training website offers online training registration, course materials and other resources, live webcasts, and access to archived webcasts. From January through mid-November 2010, there were 900 viewings of archived trainings and webcasts. DHS caseworkers may satisfy continuing education requirements by viewing archived and/or live trainings. In December 2010, the DHS Child Welfare Training Institute offered to endorse the archived trainings to their field workers and will distribute information about trainings.

**Status:** Ongoing.
Additional Court Improvement Program Committees/Work Groups

Case Service Plan Work Group
Both the federal CFSR report and the annual report by SCAO’s Foster Care Review Board concluded that poorly devised and written case plans are a systemic barrier to achieving timely permanency for children in foster care, particularly in reunifying families. Based on recommendations from the Foster Care Review Board’s report, Court Improvement Program staff established a work group to develop:

- Simplified but more useful Initial and Updated Services Plans and the Parent-Agency Treatment Plan/Permanent Ward Service Agreements.
  **Status:** In process.
- Standardized permanency progress report that courts can prepare more efficiently by using the information provided in the initial and updated service plans.
  **Status:** In process.

Educational Work Group
In early 2010, Child Welfare Services established a work group to address the issues of children in foster care facing numerous educational challenges and who have a disproportionately high dropout rate. The work group focused its attention on Detroit public schools due to the number of foster children enrolled in that district. The goals established by the work group are relevant to any K-12 public school district that educates foster children. The goals are as follows:

- Ensure the continuity of a child’s educational experience by keeping the child in a familiar school and neighborhood when consistent with the child’s best interest.
- Develop a system to track the number of earned academic credits for foster children who transfer, drop out or enroll late.
- Develop a tool to identify children in out-of-home placements who display the early signs of academic failure.
- Ensure that foster youth are prepared and encouraged to pursue educational opportunities beyond high school.
- Provide learning opportunities to help school systems understand the special needs of foster children.
- Empower children in out-of-home placements to help design their own educational plans.

During an initial joint meeting held in July 2010, the Detroit schools’ representatives were receptive to the partnership.

**Status:** Ongoing.

Permanency Options Work Group
The Permanency Options Work Group meets approximately four times per year and considered these issues in 2010:

- Decentralizing the consent process for uncontested adoptions. Previously, one DHS administrator was the only individual who could approve adoptions. Decentralization is
aimed to expedite the adoption process. Legislation was signed by the governor on May 23, 2011.

**Status:** Completed.
- Allowing the court to reinstate parental rights under certain conditions.
  **Status:** In process, the bill is currently being re-drafted.
- Extending foster care to age 21.
  **Status:** In process, the bill is currently being re-drafted.
- Coordinating probate court guardianships with DHS abuse/neglect investigations. DHS instituted a new policy to require their workers to complete abuse/neglect investigations even when a guardianship has been ordered.
  **Status:** Completed.

Additional issues that the Permanency Options Work Group may consider in 2011 include:
- Creating an open adoption process for older foster youth reluctant to consent to their adoption.
  **Status:** Pending.
- Requiring courts to keep an abuse/neglect case open until the adoption is finalized. Currently, some courts close the case after placing the child for adoption but before the final order of adoption is entered.
  **Status:** In process.

**Adoption Oversight Committee**
Court Improvement Program staff serve on the statewide Adoption Oversight Committee to recommend improved adoption practices and procedures, to identify barriers to adoption, and to increase collaboration between state and private stakeholders. They developed an Adoption Legal Packet that includes all the documents required by statute, court rule and DHS policy when petitioning the court for an adoption. The packet will create uniformity throughout the state court system to improve finalization periods and provide consistency for caseworkers who serve multiple counties. After final approval by DHS and the courts, the packet will be distributed.

**Status:** Ongoing.

**State Child Fatality Review Team**
Staff joined the State Child Fatality Review Team, in November 2007, which reviews cases where a child died and CPS either had prior or current involvement with the family.

**Status:** Ongoing.

**State Court Administrative Office Child Fatality Review Committee**
The committee immediately reviews deaths that may have resulted from abuse or neglect while a child was under court jurisdiction. The committee reviewed two cases in 2010.

**Status:** Ongoing. The court and DHS are developing an interagency agreement to allow the committee access to the DHS Office of the Family Advocate report.
Special Projects

New Jurist Training
Child Welfare Services initiated new judges training in 2009 to provide new judges with the information and tools they will need to preside over child protective proceedings. During 2010, the training was expanded to include new family court referees. The training covers IV-E and Adoption and Safe Families Act requirements, the CFSR review, data collection/sharing, resources, and relevant issues.

Status: Ongoing.

Adoption/Permanency Forums
In 2010, Child Welfare Services held two adoption/permanency forums that encourage expedited permanency for children who have remained in foster care longer than one year. The forums include the 24 Michigan counties that have 85 percent of the state’s foster care caseload. The 2010 forums have inspired strong local partnerships and a competitive spirit among the participating counties. Four forums are planned in 2011.

Status: Ongoing.

Infant Mental Health Court
National experts helped Genesee, Midland and Wayne counties’ “court teams” and special dockets that help maltreated infants birth up to age three to improve parent-child interaction and achieve permanence with no recurrence of abuse or neglect. These court dockets are known as “Baby Courts.” The Wayne County Baby Court began receiving referrals in November 2010. Staff will continue to offer assistance to all of the Baby Court programs.

Status: Ongoing.

Absent Without Legal Permission
Child Welfare Services oversees a tracking system for children in foster care who run away from their placement. This is the one statewide child welfare data sharing system in Michigan all courts and caseworkers access that tracks whether:

- The child’s information has been entered into the Law Enforcement Information Network.
- An Amber Alert was necessary and issued.
- The lawyer-guardian ad litem was notified that the child ran.

The system allows both the court and DHS to input and retrieve the same data. Caseworkers use the system data to prepare their reports for court hearings that are well-received, easy to read, and include relevant details about the children and efforts to locate them. Courts accept these reports if signed by a DHS manager as evidence of the “locate” efforts.

Status: Ongoing.
Collaboration on 2010 Title IV-E Federal Review
Michigan underwent a federal title IV-E eligibility review in June 2010 and Court Improvement Program staff coordinated assistance from local courts preparing the IV-E files that were reviewed. Staff was present during the on-site review to provide assistance. The federal reviewers later cited the level of collaboration between the court and DHS as a strength. 

**Status:** Completed.

Staff provide title IV-E technical assistance to courts and DHS county offices and made IV-E presentations at two statewide conferences and three trainings for DHS staff on findings that courts must make in each case, how DHS determines eligibility for title IV-E funding, trends found during the federal review process, and local issues. 

**Status:** Ongoing.

Staff work closely with DHS to develop Michigan’s title IV-E Program Improvement Plan and training program to ensure that DHS staff and the courts receive the same accurate information. 

**Status:** Completed.

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**EDUCATIONAL COLLABORATION**

**The Michigan Model for Health®**
The *Michigan Model for Health®* is a comprehensive K-12 health education curriculum that gives school-aged children (ages 5-19 years) age-appropriate lessons on social and emotional health, nutrition and physical activity, alcohol, tobacco and other drugs, personal health and wellness, safety and HIV. The *Michigan Model for Health®* was implemented in 1985 to coordinate school-age children’s information and skills on health and disease prevention. It has been replicated in 39 states.

**Early Childhood Investment Corporation**
The Early Child Investment Corporation is the state’s focal point for information and investment in early childhood programs and activities. It funds and provides training and consultation to community leaders to improve the health, development and learning of young children. The Early Child Investment Corporation helps provide:

- The Start Project and Great Start Collaborative serving every community in the state.
- 70 Great Start Parent Coalitions that provide education and information about investing in young children.
- Nine regional resource centers that anchor Michigan’s Great Start Child Care Quality Project.
- CONNECT, Michigan’s online early learning resource for key information about quality childcare and child development including licensed childcare provider search.
Governor Rick Snyder announced his intent to create the Office of Great Start – Early Childhood to coordinate early childhood programs and resources. This reorganization will:

- Create a new office by combining the Office of Child Development and Care with the Office of Early Childhood Education and Family Services.
- Place the Michigan Office of Great Start – Early Childhood at the Department of Education with existing programs such as Great Start School Readiness, Great Parents/Great Start, Preschool Special Education, Child Care Licensing, Head Start State Collaboration, Child Care and Development Program and Early On.

Accomplishments in FY 2010 include:

- $1 million in grants to early childhood projects in 32 Great Start Collaboratives.
- $928,233 in Reimagine Early Years grants to 11 school districts to foster innovative educational reform.
- $3 million in grants to the Great Start Collaborative to establish local matching funds.
- Nearly 20,000 unlicensed Michigan childcare providers, including grandparents, neighbors and other relatives assisting low-income parents completed first aid/CPR training in FY 2010.

**DOMESTIC VIOLENCE SHELTER AND SUPPORT SERVICES**

The goals of Michigan Domestic Violence Prevention and Treatment Board funded services:

- Contract for:
  - Emergency shelter and related services for victims of domestic violence and their children.
  - Comprehensive sexual assault services for victims of sexual assault, their family members and significant others.
  - Transitional supportive housing and support services.
- Educate on the prevention and treatment of domestic and sexual violence.
- Improve the response to the crimes of domestic and sexual violence.
- Ensure safety, confidentiality and justice are provided to victims of domestic and sexual violence.

To achieve these goals, the enabling legislation mandates the board:

- Develop operating standards for victim service programs.
- Provide technical assistance to providers.
- Conduct research to prevent and treat domestic violence.
- Help state police set up a reporting system for law enforcement agencies.
- Carry out education to the public and professionals.
- Advocate for policies and procedures that improve treatment.
- Advise the legislature and governor.
Comprehensive domestic violence services are provided under contracts with 44 non-profit domestic violence programs that offer:

- Emergency shelter.
- Emergency intervention (24-hour crisis lines and emergency response services).
- Supportive counseling (individual and group).
- Community education and prevention services.
- Personal advocacy with health care, criminal justice systems, housing location and financial assistance.
- Support services such as transportation, childcare and children’s services.

In FY 2010, the following services were provided:

- 244,495 shelter nights.
- 82,803 hours of individual counseling.
- 10,459 hours of group counseling.
- 79,132 crisis calls.

The FY 2010 federal STOP Violence Against Women grant for provided $4.35 million to local projects to improve victim services and the criminal justice response, address domestic violence, sexual assault and stalking throughout the state including specialized sexual assault nurse examiner programs, develop statewide policies, protocols and training.

In FY 2010:

- 5,592 clients were provided civil legal advocacy.
- 3,428 clients were provided criminal justice advocacy.
- 3,122 clients received personal protection orders.
- 4,687 clients were provided with victim witness notification services.

The board funds 23 non-profit sexual assault programs under the Sexual Assault Comprehensive Services programs to provide comprehensive services to sexual assault survivors. In FY 2010, the following services were provided:

- 15,151 hours of individual counseling.
- 2,449 hours of group counseling.
- 9,884 crisis calls.
- 1,058 forensic nurse examinations completed.

The board funds 17 non-profit Domestic Violence Transitional Supportive Housing programs that provide safe transitional supportive housing for up to 24 months. In FY 2010, the following services were provided:

- 205,578 nights of housing.
- 3,662 hours of individual counseling.
- 865 hours of group counseling.
The Recovery Act STOP Violence Against Women grant provided over $4 million to 44 non-profit programs to provide services to victims and support community efforts to strengthen law enforcement, prosecution and court responses to violence against women. Communities hire and retain personnel that respond to crimes and support strategies to promote economic growth, while improving responses to domestic violence, dating violence, sexual assault and stalking.

The Recovery Act Transitional Housing Assistance Program will provide $2 million from May 2010 to June 2012 to support six programs that provide one or all of:

- Transitional housing including operating expenses of newly developed or existing transitional housing.
- Short-term housing assistance including rent or utility assistance with security deposits and other costs incidental to relocation.
- Support services to enable individuals to secure permanent housing who are fleeing domestic violence, sexual assault or stalking.

**COORDINATION WITH TRIBES: OFFICE OF NATIVE AMERICAN AFFAIRS**

DHS delivers services to Michigan’s 130,000 Native Americans. The Office of Native American Affairs is the policy office that coordinates with Michigan’s tribes through:

- Policy and program development.
- Resource coordination.
- Advocacy.
- Training and technical assistance.
- Implementation of applicable state and federal laws pertaining to Native Americans and tribal consultation.

For more information, please see the Native American Affairs Business Plan at: [www.michigan.gov/americanindians](http://www.michigan.gov/americanindians).

In addition, Native American Affairs coordinates statewide consultation through:

- Urban Indian Partnership: A collaborative body of urban Native American organizations and DHS staff focused on 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 education directors and DHS staff working to ensure Zero to Three services, Great Start and pathways to success for young children and adults.
Regional Indian Outreach Worker meetings: Forum to provide professional development.
The State Court Administrative Office Court Improvement Program Statewide Task Force advocating on behalf of tribal families.

Indian Child Welfare Act Compliance
DHS provides culturally appropriate services to Native American families through increased involvement of Native American tribes, communities and agencies to develop and enhance community-based services to children and families and through funding and support of:

- Quarterly Tribal State Partnership meetings with representatives from Michigan’s 12 federally recognized tribes, tribal organizations and local DHS and central office staff.
- Administering, supporting and developing new grant/contract opportunities for tribal communities.
- Strengthening the DHS Indian Outreach Worker program through the development of Indian outreach services case reviews to target best practices and service barriers. The Native American Affairs Business Plan outlines the plan to strengthen the program.
- Publishing culturally competent human service materials that reflect the unique status of Native American people and laws that protect their sovereignty. Contracting for Families First of Michigan family preservation programs that serve seven of ten reservation communities. Tribal representatives participated in the bid rating process.
- Continuing review and revision of Indian Child Welfare policy to strengthen and achieve compliance with federal rules and regulations.
- Strengthened the state courts’ application of Indian Child Welfare Act through collaboration with tribal court, attorneys and social services; state court administration; DHS legal division; and Native American Affairs toward development and codification of the Michigan Indian Child Welfare Act.
- Negotiated tribal-state agreements including title IV-E and IV-D agreements. Michigan assists the tribe(s) to access title IV-E administrative funding, Chafee Foster Care Independence Program, training, and data collection resources.
- Development of CFSR, Program Improvement Plan goals regarding Indian Child Welfare.
- Conducting stakeholder surveys to ensure quality assurance of Native American Affairs division and policy.
• Conducting public awareness events to sensitize consumers and vendors to issues and successes of American Indian peoples in Michigan and improve cultural awareness and competence.

Michigan Native American child welfare data FY 2010:
• DHS supervised 217 foster care cases.
• DHS served 45 children eligible for adoption.
• DHS had 35 youth eligible for Youth in Transition services.
• DHS had 86 licensed foster homes.
• DHS served 37 juvenile justice cases.

Tribal Consultation
Michigan improved government-to-government relations with Michigan’s federally recognized tribes through tribal consultation agreements that engage tribes in Indian Child Welfare Act mandates and its application in DHS policies and service. The Native American Affairs director shares research and best-practice resources with tribes from Region V.

Native American Affairs and Tribal Collaborative Partnerships in 2010:
• Michigan Tribal Social Service Directors’ Coalition (Native American child welfare).
• Tribal health directors (emergency preparedness).
• Tribal childcare directors (childcare and Early Head Start/Head Start).
• Tribal chairpersons (tribal consultation).
• Tribal attorneys and judges (Native American child welfare and tribal court relations).
• Urban Native American organization directors (Native American child welfare and contract services).
• Native American placement agency director (Native American child welfare).
• State historic tribes (Native American child welfare).
• Indian Outreach Workers and supervisors (Indian Outreach Services).
• Federal Native American program coordinators/consultants (Native American child welfare).

Required contact lists are attached to this report.

Tribal Consultation Plan Update
Michigan’s five-year update for tribal consultation in the 2011 Annual Progress and Services Report or Title IV-B plan is attached as a separate document. The Title IV-B plan was created collaboratively with Tribal members at the April 2011 Tribal State Partnership meeting. The exchange of tribal/DHS IV-B plans did not occur at the July meeting as planned, as not all tribes participated. The Title IV-B plan will be sent to and requested of individual Michigan tribes in September 2011. The DHS IV-B Plan is available for review on the DHS public website.
The Children’s Trust Fund serves as Michigan’s only source of permanent funding for the statewide prevention of child abuse and neglect. Established by the Michigan legislature as an autonomous agency by Public Act 250 of 1982, Children’s Trust Fund does not receive state general funds for operations. It is designated by the governor to serve as the state lead agency to receive and administer the federal Community-Based Child Abuse Prevention grant.

**DHS Collaboration with the Children’s Trust Fund**

The Children’s Trust Fund is administratively located within the DHS Children’s Services Administration to assure prevention programs focus on the key issues the state is facing in serving our child welfare population. DHS provides staff, budgetary oversight and programmatic integration with the Children’s Trust Fund through the DHS strategic plan.

- **Prevention Program Pilots:** A cornerstone of the DHS mission is to prevent abuse and neglect. A key initiative by the DHS/Children’s Trust Fund collaborative relationship is the Prevention Programming Pilot initiative. The pilot addresses the need for timely, appropriate and high quality referral options for families investigated for allegations of child abuse or neglect, but are either unsubstantiated or are substantiated at the low to moderate risk level as assessed through CPS SWSS risk assessment (Categories III or IV). Services are available for families with no contact with CPS but have three or more risk factors that would warrant intervention through this project. DHS has assigned programmatic and administrative responsibility of this initiative to the Children’s Trust Fund. DHS has detailed a contract manager to the Children’s Trust Fund to administer the initiative under the supervision of the Children’s Trust Fund Director. The Children’s Trust Fund contributes programmatic expertise and technical assistance.

- **Strengthening Families/Protective Factors Training for Child Welfare Staff:** The Children’s Trust Fund secured a grant to develop a training curriculum to train CPS and foster care workers on the evidence based conceptual framework of Strengthening Families through use of the Protective Factors. The Children’s Trust Fund contracted with two content experts to develop the curriculum. In the coming year, the Children’s Trust Fund will work with DHS to integrate the training into our professional development programs, both for new workers and as a continuing education choice.

- **Child Abuse and Neglect Training:** The Children’s Trust Fund is sponsoring approximately 150 slots at the annual child abuse and neglect conference. The conference brings together prevention services providers and advocates with DHS and private agency child welfare workers. As with the past two years, the Children’s Trust Fund has again taken leadership responsibility for planning a “prevention track” in the conference both for participants with a prevention work focus as well as for child welfare workers.
• **Researching Strategies to Leverage Prevention Funding:** The Children’s Trust Fund will research and develop strategies for matching and leveraging funding streams with a goal of more fully funding child abuse and neglect prevention services. Expanding funding for preventive services is a key initiative for DHS.

To serve Michigan’s families and protect Michigan’s children, Children’s Trust Fund works with an extensive network of local prevention organizations. It funds direct service programs and local child abuse and neglect prevention councils (hereafter referred to as “local councils”). It funded 21 direct service grants that served 22 of Michigan’s 83 counties. The Children’s Trust Fund also funded 70 local councils that served 80 counties. It supports community-based prevention programs through:

- Training and technical assistance.
- Evaluation assistance.
- Parent leadership.
- A Child Abuse Prevention Month campaign.

**Service Description**

The Children’s Trust Fund provides funding to statewide prevention programs to help strengthen Michigan’s families and prevent abuse and neglect and provides leadership to its statewide network and other prevention initiatives.

**Local Councils**

Local councils entered their first year of a new three-year grant cycle. For a complete list of local councils, see Children’s Trust Fund Attachment 1. Most local councils serve a single county but several northern Michigan councils serve two or three counties. In FY 2010, the Children’s Trust Fund provided funding to the following councils:

- Tier I – 23 received $5,000.
- Tier II – 27 received $10,000.
- Tier III – 20 received $20,000.
- Multi-county – received $1,000 for each additional county serviced.

By statute, local councils’ primary purpose is to develop a collaborative community prevention program. Local councils conduct (or participate in) needs assessments and increase public awareness of child abuse prevention. They provide non-direct services including:

- Information and referrals.
- Public awareness campaigns.
- Child Abuse Prevention Month activities.
- Prevention leadership on local committees.
- Local resource directories.
- Educational workshops and in-service training on shaken baby syndrome, safe sleep, body safety, parent education, and mandated reporting).
FY 2010 local council activities include:
- Information booths and fairs (371).
- Baby pantries (645).
- Mandated reporter trainings (190).
- Education services and activities (4,222 - parent education workshops, shaken baby prevention sessions and sexual abuse prevention programs).

Direct Services
Direct service grants fund prevention programs and services to promote strong, nurturing families and to prevent child abuse and neglect. They provide services to families who do not have an active CPS case. In FY 2010, the Children’s Trust Fund funded 21 direct service grants:
- Parent education/family support programs (7).
- Home visitation programs (6).
- Positive youth development programs (2).
- Teen parenting programs (2).
- Fatherhood programs (2).
- Individual family support program (1).
- Home-based counseling program (1).
See Children’s Trust Fund Attachment 2 for a more detailed summary of direct service programs.

Direct service programs provided services to 3,623 adults and 3,936 children. The type of direct services provided and number of services in FY 2010 are as follows:

<table>
<thead>
<tr>
<th>Type of Service Provided</th>
<th>Number of Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Visits</td>
<td>5,154</td>
</tr>
<tr>
<td>Parenting Classes</td>
<td>861</td>
</tr>
<tr>
<td>Support Groups</td>
<td>341</td>
</tr>
<tr>
<td>Group Counseling</td>
<td>247</td>
</tr>
<tr>
<td>One-on-One Counseling</td>
<td>2,051</td>
</tr>
<tr>
<td>Screening</td>
<td>523</td>
</tr>
<tr>
<td>Child Care</td>
<td>1,676</td>
</tr>
<tr>
<td>Respite Care</td>
<td>32</td>
</tr>
<tr>
<td>Transportation</td>
<td>2,840</td>
</tr>
<tr>
<td>Type of Service Provided</td>
<td>Number of Services</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>Referrals</td>
<td>1,504</td>
</tr>
<tr>
<td>Resource Coordination</td>
<td>8,306</td>
</tr>
<tr>
<td>Workshops (e.g., Parent Meetings)</td>
<td>3,488</td>
</tr>
<tr>
<td>Prenatal</td>
<td>19</td>
</tr>
</tbody>
</table>

**Circle of Parents**
The Children’s Trust Fund is lead agency for the Circle of Parents® initiative that provides parent involvement, leadership and support to create shared leadership and strong parenting skills to an existing or new community support group for all parents, but especially for those at risk for abuse or neglect. Circle of Parents® increased from 18 to 22 program sites with multiple groups operating at most sites. Five hundred twenty-nine parents/caregivers and 565 children participated in the program, up from 302 parents/caregivers and 259 children in 2009.

In FY 2010, the Children’s Trust Fund strengthened prevention services in Michigan by:
- Administered the second year of a grant to the Michigan State University Department of Advertising, Public Relations and Retailing.
- Planned a joint conference in November 2009 featuring the Children’s Trust Fund annual training and the MSU conference “Consumer Culture and the Ethical Treatment of Children: Theory, Research and Fair Practice.”
- Served as the acting state lead for Strengthening Families in Michigan and identified steps to become an affiliate of the national Strengthening Families network. Provided Strengthening Families presentations and workshops. Worked with state and local partners to explore ways to support and expand the initiative in Michigan.
- Served on the Great Start Systems Team, which has representation from all family-serving state agencies and is coordinated by the Early Childhood Investment Corporation.
- Served on the Home Visiting Work Group, an interdepartmental team that coordinates Michigan’s response to the federal Maternal, Infant and Early Childhood Home Visiting Program.
- Offered the first “Parents Partnering for Change” leadership training to parents and caregivers in CTF-funded programs.
- Established local council regional meetings that provided sharing and collaborating opportunities for local councils.

**Expanding and Strengthening Services**
The Children’s Trust Fund continues to integrate best practices into its work and that of its grantees. It worked with grantees to strengthen evidence-based and evidence-informed
programs and practices and reporting program outcomes. Progress on specific FY 2010 goals and objectives includes:

**Goal:** Assist local councils in sustainability, capacity building and best practice efforts.

**Status:** Completed. The Children’s Trust Fund hosts monthly local council work group conference calls to share ideas and information on best practices, grant requirements, statewide prevention initiatives and strengthen practices and programs.

**Goal:** Councils will develop stronger partnerships with local initiatives.

**Status:** Completed. A November 2009 survey reported:

- 95.8% of respondents said that their local council coordinates services with local agencies or organizations.
- 87% coordinate with their local Great Start Collaborative and their community collaborative, followed by United Way (52.2 percent) and faith-based organizations (30.4%).
- Some councils reported they collaborate with other organizations including local law enforcement and DHS.

To support the collaborative work of councils, the Children’s Trust Fund offered a workshop entitled “Great Start Collaboratives and Parent Coalitions: Strengthening Communities, Fostering Leaders” and the local council coordinator provided training in spring 2010 to educate local councils about their collaborative role in the direct service grant-making process.

**Goal:** The Children’s Trust Fund will continue to fund 72 local councils at the current level.

**Status:** Partially completed. Funding to local councils was maintained at current funding levels and the Wayne local council serving metro Detroit was increased from $5,000 to $20,000 per year. Two local councils did not receive funding in FY 2010 because of incomplete applications. The two councils are being funded in 2011.

**Goal:** The Children’s Trust Fund will bring Lenawee County, the only county currently without a prevention council, into the CTF-funded network.

**Status:** Partially completed. The Children’s Trust Fund provided extensive technical assistance to Lenawee County, which will join the network as a Tier I council and receive funding in FY 2011.

**Goal:** Provide leadership for Child Abuse Prevention Month by implementing a coordinated statewide initiative.

**Status:** Completed. The Children’s Trust Fund held Prevention Awareness Day at the State Capitol in March 2010 as a kick-off to Child Abuse Prevention Month, where 125 participants planted a pinwheel garden to show support of prevention programs in Michigan.
Goal: The Children’s Trust Fund will provide adequate resources to councils for Child Abuse Prevention Month.
Status: Completed. The Children’s Trust Fund supported the “Pinwheels for Prevention” Prevent Child Abuse America campaign at the state and local level and provided pinwheels to local councils and they were used on Prevention Awareness Day. They also produced a toolkit specific to Michigan and advised councils how to carry out the campaign through the toolkit. Thirty councils held pinwheel events in their communities. Twenty-seven councils (a 39 percent response rate) responded to a survey distributed after the event and 100 percent of respondents found the toolkit useful.

Goal: Incorporate continuous quality improvement principles through a peer review process.
Status: Completed. The best practices work group met seven times in FY 2010. Comprised of 12 local council representatives, its goal is to help local councils strengthen best practices, evidence-based and evidence-informed programming. In FY 2010, the group focused on:
- Peer review.
- Strengthening families/protective factors.
- Prevention definitions.
- Evidence-based and evidence-informed programs and practices for councils.
- Creation of an evidence-based and evidence-informed matrix.

Goal: Pilot a local council peer review process.
Status: In process. After researching models, the best practices work group held an all-day, in-person meeting in September 2010, to create a peer review pilot. Our FRIENDS training and technical assistance coordinator, Alicia Luckie, called in for the meeting and worked with the Children’s Trust Fund staff prior to the meeting. At the meeting, the best practices work group and the Children’s Trust Fund staff created a “Peer Sharing Pilot” which identified the peer review structure, content, training needs, timeframe, etc. Fourteen local councils are implementing the pilot.

Goal: Provide training, public awareness, and education resources/activities to support the work of CTF and our prevention partners. MSU Children’s Central will develop and operate a conference on consumer culture and its effects on children.
Status: Completed. In FY 2010, the Children’s Trust Fund collaborated with MSU to hold a conference, “Consumer Culture and the Ethical Treatment of Children: Theory, Research, and Fair Practice” in November 2009 with 170 attenders of whom 140 were directly associated with the Fund.

Goal: MSU’s Children’s Central will contribute to the development of a special issue of the Journal of Advertising in 2010.
Status: Completed. The fourth quarter issue of the Journal of Advertising was dedicated to research involving marketing and media effects on children. The Children’s Trust Fund executive director Michael Foley wrote a forward acknowledging advancing knowledge about individual and institutional child abuse and neglect.
Goal: MSU advertising faculty and students will participate with the Children’s Trust Fund in the development of a public awareness and/or marketing campaign.

Status: In process. In spring 2010, the Snyder-Lantz Children’s Trust Fund internship program created four teams of students to work under two national leaders to create a national “brand manifesto” for child abuse prevention. It provided direction for the third year of the grant to Michigan State University in FY 2011.

Goal: Strengthen parent leadership in the Children’s Trust Fund-funded programs. The Children’s Trust Fund will increase the parent leadership line item in the budget from $10,000 in FY 2009 to $20,000 in FY 2010.

Status: Completed.

Goal: Explore options for implementing stronger parent leadership, including training.

Status: Completed. The Children’s Trust Fund, the Parent Leadership in State Government Advisory Board and the funds grantees hosted “Parents Partnering for Change” leadership in July 2010 and received excellent evaluations. One hundred percent of participants “strongly agreed” with the statements “I will use the knowledge learned from the training” and “I am going to share what I have learned today with others.”

Services to be provided in FY 2012
The services for FY 2012 will be the same major program areas funded or administered by the Children’s Trust Fund in FY 2011 except for MSU’s grant that ends September 30, 2011.

Local Councils
Councils will support prevention services and activities in their communities to either the general population or at-risk populations in the counties served by the council. By summer 2011, 73 councils will be serving all of Michigan’s 83 counties.

Direct Services
Direct service grants will fund prevention programs as detailed earlier in this section and $300,000 will be awarded to new direct service grants in FY 2012. For both local councils and direct service grants, the estimated number of individuals and families served can vary based on annual activities and services.

Collaboration
The Children’s Trust Fund is the state chapter of Prevent Child Abuse, a change from previous years when the fund served as a co-chapter with Children’s Charter of the Courts of Michigan. The Children’s Trust Fund also administered the Michigan Citizen Review Panel for Prevention and its statewide network of prevention partners continued which include:

- Policymakers.
- State and local government agencies.
- Nonprofit organizations.
• Parents and providers.
• Prevention advocates.
• Corporations.
• Schools.

In FY 2010, the Children’s Trust Fund continued its partnership with MSU and strengthened its relationship with the Parent Leadership in State Government initiative. The Children’s Trust Fund partnered with the Departments of Human Services, Community Health and Education through interagency agreements and informal collaboration. Staff served on a work group responding to the federal Maternal, Infant and Early Childhood Home Visiting Program.

The Children’s Trust Fund affiliations, memberships and participation include:
• Circle of Parents.®
• Citizen Review Panel for Prevention.
• Early Childhood Investment Corporation.
• Michigan Coalition for Children and Families.
• National Alliance of Children’s Trust and Prevention Funds.
• Parent Leadership in State Government Advisory Board.
• Parenting Awareness Michigan.
• Prevent Child Abuse America.
• Prevention Network.
• Signature Auction Event Advisory Committee.
• University of Michigan Child Abuse and Neglect Conference.

The Children’s Trust Fund also encourages its local council and service grantees to work with their local multi-purpose collaborative bodies and Great Start Collaborative, particularly on the Strengthening Families initiative.

Local Partnerships
Local councils are a community’s prevention voice addressing specific community needs. The Children’s Trust Fund local council collaborated with other family-serving organizations within their communities including:
• The new local council three-year work plans were created based on defined community needs. Councils were encouraged to seek input from their community collaborations and other family-serving organizations to determine those needs.
• A session entitled “Great Start Collaboratives and Parent Coalitions: Strengthening Communities, Fostering Leaders” was offered at the FY 2010 annual training.
• During regional meetings, local councils were introduced to peer review principles, including the value of engaging the greater community in this process.
The Children’s Trust Fund hosted a monthly local council work group to increase collaboration with local councils on best practices, grant requirements, evaluation, programs, and technical assistance and training needs.

**Parent Leadership Collaboration**
The Children’s Trust Fund served on the interagency Parent Leadership in State Government Advisory Board. In FY 2010, the Children’s Trust Fund established parent leadership training in funded programs and served on the Early Childhood Investment Corporation’s Parenting Leadership Advisory Committee.

**Collaborations and Partnerships**
The Children’s Trust Fund works with many other individuals and organizations to strengthen our prevention work. For example, policymakers and the business community support our efforts through the Signature Auction Event Advisory Committee and the event itself. Our program work is strengthened through our affiliations with Prevent Child Abuse America and the National Alliance of Children’s Trust and Prevention Funds. The Children’s Trust Fund executive director regularly participates in network calls and joined the National Alliance board of directors in FY 2010. Staff also works with Prevent Child Abuse America on our Child Abuse Prevention Month and Pinwheels for Prevention endeavors.

**Technical Assistance Provided to Counties and Local and Regional Entities**

**Program Support**
The Children’s Trust Fund conducted or sponsored a number of training, technical assistance, evaluation activities and other supports including:

- Local council regional meetings (seven statewide).
- Electronic grants administration and management system trainings.
- Protective Factors Survey training.
- RFP technical assistance session.
- Annual satisfaction survey.
- Technical assistance for electronic grants administration and management system, data collection, evaluation, sustainability and other issues.
- The Children’s Trust Fund listserv was created.
- Survey Monkey use was continued.
- GoToMeeting use was continued to enhance its training and needs assessment capacity.
- The Children’s Trust Fund *News Briefs* and website was continued.

**Local Council Regional Meetings**
The local council coordinator held seven regional meetings across the state in the summer of 2010 focused on council sharing, electronic grants administration and management system technical assistance, an overview and discussion of peer sharing, and exploration of regional fundraising opportunities. In total, 69 local council representatives attended these meetings. Overall satisfaction with the training ranged from 4.73 - 4.94 on a scale of 1 to 5.
Protective Factors Training
Previously the Children’s Trust Fund offered a Protective Factors Survey training workshop that helped new direct service grantees with the Protective Factors Survey, which was a required evaluation tool for new FY 2010 direct service grants. As follow-up, the Children’s Trust Fund held two technical assistance sessions to discuss the survey in more detail with grantees and to identify CTF-specific practices for their use.

The Children’s Trust Fund continued its efforts to increase the consistency and reliability of reported data. The Children’s Trust Fund provided electronic grants administration and management system training sessions for each direct service grantee and local council. In 2010, staff worked with a small group of local council and direct service representatives to review the program register report in the electronic grants system and made additional changes based on feedback. These new EGrAMS improvements resulted in more accurate and consistent data collection practices among grantees.

One-on-One Training and Technical Assistance
The Children’s Trust Fund provided individual training and technical assistance to grantees in FY 2010. The local council coordinator provided over 50 individual sessions including assistance with electronic grants administration and management system, board development and financial sustainability.

Circle of Parents® Training
The Children’s Trust Fund held one workshop and two trainings for 65 prospective Circle of Parents® facilitators, parent leaders and interested community members. Attendees learned how to develop, implement and evaluate the Circle of Parents® model. They were also provided with an overview of the protective factors including:
- The importance of creating “parental balance” and father-friendly programs.
- The art of group facilitation.
- How to develop parent leadership.
- How to apply leadership skills to advocacy issues.

The average evaluation response for the question “The training met my expectations” was 4.8 out of a possible 5.0. In FY 2010, the Michigan National Guard family liaisons expressed an interest in Circle of Parents® and training program staff to implement sites for the military family population. This opportunity will be explored further in 2011.

News Briefs
In FY 2010, the Children’s Trust Fund News Briefs were mailed each month to 350 stakeholders sharing information on:
- Events and work group meetings.
- Board appointments.
- Resources and research related to prevention and child welfare.
- Grant requirements and deadlines.
- Grantee events.
- Success stories.
- Funding opportunities.
- Training.
- Technical assistance.

**Children’s Trust Fund Website**
The Children’s Trust Fund staff made the website more useful for grantees and the public by adding:

- The Local Council Resource Library with Board Development Resources and Volunteer Development Resources.
- A “Research” section to host research data such as Kids Count and other online studies.
- A direct link to the FRIENDS Protective Factors Survey under the Grant Administration area.

In FY 2010, there were 16,470 visits to the website (an average of 45 per day).

Other training, technical and evaluation assistance in FY 2010:

- In June 2010, trainings were held for local councils to clarify their role in the direct service application and endorsement process; the training was attended by 28.
- The Children’s Trust Fund implemented use of the “CTFPARTNERS” listserv in April 2010. It has allowed staff and as our local council and direct service grantees to post information about training and technical assistance.
- For the fifth consecutive year, the Children’s Trust Fund distributed a satisfaction and needs survey to all local councils and direct service grantees.

**Anticipated request for technical assistance from the ACF Training and Technical Assistance network as the Children’s Trust Fund implements current or new federal requirements.**
The Children’s Trust Fund requested training/technical assistance from the National Resource Center for the annual conference in October 2011. Alicia Luckie will assist grantees with evidence-based and evidence-informed programming, and program evaluation. In the summer/fall of 2011, the Children’s Trust Fund will be reviewing the peer sharing pilot process that is currently being conducted by 14 local councils. They may also ask for assistance in reviewing the Protective Factors Survey data as submitted by the Children’s Trust Fund direct service grantees.

**Research, Evaluation, Management Information and Quality Assurance Systems**
The Children’s Trust Fund is moving toward greater use of evidence-based/evidence-informed programs, program evaluation and outcome accountability. In FY 2012, the Children’s Trust Fund will train and monitor electronic grants administration and management system and other reporting requirements.
Program Evaluation
In fall 2010, the six new direct service grants completed the first cycle of the Protective Factors Survey with their clients. The results of the PFS from these six grantees are currently being analyzed and will be included in the Children’s Trust Fund’s report in June 2011.

Direct service and local council grantees provide program reports via electronic grants administration and management system. The reports capture data via:

- An activity report on objectives, activities, expected outcomes, measurement tools, and actual outcomes and/or evaluation results.
- A program register that includes data on populations served and services provided.
- An expenditure report that details quarterly expenditures, cash and in-kind matches.

The Children’s Trust Fund will continue to provide electronic grants administration and management system/data collection training and technical assistance to support evaluation. As part of continuous quality improvement process, the Children’s Trust Fund has identified ways to make electronic grants administration and management system reporting more accurate and user-friendly. They will continue to make adjustments and improvements to the system. Activities and outcomes related to Research, Evaluation, Management Information and Quality Assurance Systems are described below.

Goal: Move toward greater implementation of evidence-based and evidence-informed programs and practices. The Children’s Trust Fund will form a best practices work group to examine evidence-based/evidence-informed programs and other local council activities.
Status: Completed.

Goal: The Children’s Trust Fund will form a direct services work group.
Status: Completed. The group met six times during this reporting period on grant requirements, program reporting, parent leadership and peer review.

Goal: The Children’s Trust Fund will take the Program Assessment Rating Tool evidence-based/evidence-informed program information when making direct service grant awards.
Status: Completed. All direct service applicants were required to submit information on their proposed program’s Program Assessment Rating Tool level.

Goal: The Children’s Trust Fund will educate grantees and other community partners about the federal Program Assessment Rating Tool and evidence-based/evidence-informed programs via training and technical assistance opportunities.
Status: Completed. Prevention programs interested in applying for the Children’s Trust Fund direct service funding in FY 2010 had the option of attending an in-person training, which included a discussion of Program Assessment Rating Tool. In addition, the online grant application included instructions to determine a program’s Program Assessment Rating Tool level and a link to additional information on the FRIENDS website.
Goal: Move toward greater implementation of outcomes-based evaluation. Grantees will receive training from the Children’s Trust Fund to implement the Protective Factors Survey.

Status: Completed. A November 2009 workshop was provided on the survey that covered risk and protective factors, developing and administering the survey, and using its database. The Children’s Trust Fund also hosted webinar training in September 2009. As follow-up to this training, they held two technical assistance sessions in October to discuss the survey in more detail with direct service grantees and to identify Children’s Trust Fund-specific practices.

Goal: Meet the federal reporting requirements for Program Assessment Rating Tool. The Children’s Trust Fund will provide data on the amount of Community-Based Child Abuse Prevention funding used to support evidence-based/evidence-informed programs.

Status: Completed. The Children’s Trust Fund provided the required information on Program Assessment Rating Tool in its FY 2010 Community-Based Child Abuse Prevention grant application.

Goal: The Children’s Trust Fund will educate new direct service grantees about evidence-based/evidence-informed programs and Program Assessment Rating Tool requirements.

Status: Completed. Information was provided at the direct service RFP training prior to the submission of new direct service grant applications.

Goal: All new direct service grants will have a logic model and will minimally meet the “Emerging” Program Assessment Rating Tool level as defined by Community-Based Child Abuse Prevention.

Status: Completed. A logic model or conceptual framework is a required component of the “Emerging” PART level. All new grants approved by the Children’s Trust Fund board of directors for funding in FY 2010 met this objective.

Goal: The Children’s Trust Fund will determine infrastructure costs associated with supporting evidence-based and evidence-informed programs and practices.

Status: Completed. This information was submitted to the Administration for Children and Families via the FY 2010 Children’s Bureau Child Abuse Prevention grant.

THE DHS PREVENTION PILOT PROJECT

In FY 2010, DHS initiated prevention pilot projects in Wayne, Genesee, Kent and Oakland counties to prevent the abuse and neglect of children ages birth through 18 years of age, strengthen families and prevent children from entering the child welfare system.

The pilots give priority to families with CPS Category III and IV cases and those that have three or more risk factors, but who may not have yet come to the attention of CPS. The goal is to
provide families with comprehensive, appropriate and timely services to address the challenges in their lives, avoid subsequent contact with CPS and foster care, and prevent out of home placements.

In May 2010, DHS awarded 11 contracts to the following agencies and service areas:

- Lutheran Social Services of Michigan (northeast Detroit, Osborn area).
- Spaulding for Children (northeast Detroit, Osborn area).
- ACCESS (southwest Detroit and Dearborn area).
- Spectrum Child and Family Services (southwest Detroit and Dearborn area).
- Orchards Children's Services (Flint area).
- Ennis Center for Children (Flint area).
- Spectrum Child and Family Services (Flint area).
- Wedgewood Christian Services (Grand Rapids area).
- Child and Family Resource Council (Grand Rapids area).
- Oakland County Health Division (Pontiac area).
- Child Abuse and Neglect Council of Oakland County d/b/a Care House (Pontiac area).

Service delivery requires:

- A child abuse and neglect prevention home visitation model that is evidence-based, evidence-informed and/or proven effective.
- Voluntary parental/caretaker enrollment and participation.
- Focus on enhancing the social, emotional and physical development of children by building the knowledge, skills and confidence of parent(s)/caretaker(s) to improve parenting skills and promote child well-being.
- Service providers must be available during non-traditional hours to accommodate client needs.
- Home visitation must take place at least weekly for duration of not less than one hour.
- Development of family service plans must include goals as identified by the family and the caseworker that are reasonable and attainable. Plans must include a family case conference and may include persons chosen by the family.
- Classes and support groups for families as needed that may include parenting skills building, life skills development or self-improvement.
- Service providers and families must complete an individualized family assessment and develop a safety plan based on the assessment.

In addition, the services must:

- Include individual and/or group parenting skills training focused on positive parent-child interactions.
- Involve collaborative goal setting between the parent(s)/caretaker(s) and service provider(s).
- Include links to other community supports such as substance abuse treatment, domestic violence counseling, homelessness prevention, mental health counseling and legal assistance.
DHS analyzes and evaluates outcomes through the DHS Data Collection Form, the Parenting Stress Index, the Protective Factors Survey and the Parent Satisfaction Survey. Outcome evaluation is collaborative with the Children's Trust Fund, the Michigan Public Health Institute and the contractors who also use independent evaluators such as Michigan State University.

The Protective Factors Survey is used with caregivers receiving child abuse prevention services. The instrument measures:
- Family functioning/resiliency.
- Social/emotional support.
- Concrete support.
- Attachment and knowledge of parenting/child development.

The Parenting Stress Index identifies parenting and family characteristics that fail to promote normal development and functioning in children with behavioral and emotional problems and parents who are at-risk for dysfunctional parenting.

COMMUNITY-BASED SERVICES

The DHS service delivery strategy is to involve families and their natural supports to help keep families together. The services and programs provided under the community-based services umbrella incorporate the federal Child and Family Service Review standards. Strong Families/Safe Children, Michigan’s title IV-B(2) program, Child Protection Community Partners and the Child Safety and Permanency Plan are three examples of intensive, community-based programs designed to keep children safely in their family home. This model includes collaborative planning and decision-making by key stakeholders and providers who make up multi-purpose collaborative bodies. Services commonly provided through the programs include:
- Parent aide.
- Parenting education.
- Supportive visitation.
- Family support or step-down services.
- Wraparound.
- Families Together/Building Solutions.

Families First of Michigan and the Family Reunification Program are evidence-based models and are entering their 23rd year as a key component of the DHS child welfare continuum. These programs reduce abuse and neglect and help reunify children who are in foster care with their families more quickly.
Goal (ongoing): DHS will review the outcomes associated with these services and determine what changes, if any, will be made to ensure they are flexible enough to meet the needs of children and families.

Goal (ongoing): DHS will more closely target services to specific client needs; the services will be evidence-based and will ensure cultural competence as a part of the provision.

Title IV-B(2) Promoting Safe and Stable Families
Strong Families/Safe Children is Michigan’s statewide implementation of the federal title IV-B (2) program. DHS is the designated state fiduciary for these funds and provides program support. Michigan allocates the funds annually to 83 counties for community-based collaborative planning and delivery of:

- Family preservation services.
- Family support services.
- Time-limited reunification services.
- Adoption promotion and support services.

Program Design and Decision-Making Process
The program requires that the local collaborative groups participate in the local community services planning process. They include representation from:

- Michigan Department of Community Health.
- Michigan Department of Education.
- Department of Human Services.
- Public and private service organizations.
- Courts.
- Parents.
- Consumers.
- Other child welfare stakeholders.

Federal legislation and state program standards direct that services be designed to:

- Keep children safe in their home and prevent the unnecessary separation of families (when appropriate).
- Prevent child maltreatment.
- Promote family strength and stability.
- Return children in foster care to their families in a safe and timely manner.
- Promote and support more adoptions from the foster care system and help families maintain permanency.

SF/SC program goals: Child safety, permanency, improved family functioning.
The desired outcomes from services funded by SF/SC are positive changes for children and families. The specific client service goals and objectives are determined locally, and each local service outcome/objective must target child safety, permanency, or improved family
functioning. Local outcome data is reported annually by each of the DHS county-based offices in conjunction with their community collaborative. Outcome data from all the individual community reports is compiled for analysis and summary.

**SF/SC program aggregate goal measures:**

At a minimum

- 75% of all reported local service outcomes will be achieved.
- 75% of local service outcomes targeting Child Safety will be achieved.
- 75% of local service outcomes targeting Permanency will be achieved.
- 75% of local service outcomes targeting Improved Family Functioning will be achieved.

**FY 2010 aggregate data as reported by communities:**

- 81.9% of all reported local service outcomes achieved.
- 82.7% of local service outcomes targeting Child Safety achieved.
- 76.6% of local service outcomes targeting Permanency achieved.
- 85.4% of local service outcomes targeting Improved Family Functioning achieved.

**Family Preservation/Placement Prevention Services**

Services to help families at risk or in crisis, that:

- Alleviate concerns that may lead to out-of-home placement of children.
- Maintain the safety of children in their own homes when appropriate.
- Provide follow-up care to families to whom a child has been returned from placement.
- Support families preparing to reunite or adopt.
- Assist families in obtaining services and supports to address their needs in a culturally sensitive manner.

The services include:

- Parent aide or homemaker services.
- Parenting education.
- Wraparound coordination.
- Crisis counseling.

Services are targeted to parents or primary caregivers with minor children with an open foster care, juvenile justice or CPS Category I, II or III case.

**Time-limited reunification services**

Services provided to a child removed from home and placed in foster care and to the parents or primary caregiver to facilitate the reunification of the child safely and appropriately within the 15-month period beginning the date the child entered foster care:

- Individual, group and family counseling.
- Substance abuse treatment services.
- Mental health services.
• Assistance to address domestic violence.
• Therapeutic services for families.
• Transportation to and/or from these services.

They may also include:
• Wraparound coordination.
• Supportive visitation.
• Services to address substance abuse, domestic violence and mental health.

Services are targeted to parents or primary caregivers of minor children in out-of-home placement with family reunification as the goal.

**Adoption promotion and support services**
Services that encourage more adoptions from the foster care system include pre- and post-adoptive services that expedite the adoption process and support adoptive families. These services may include:
• Adoptive family counseling/post adoption services.
• Relative caregiver support services.
• Foster and adoptive parent recruitment and support services.

Services are targeted to prospective adoptive/adoptive parents of minor children adopted through the DHS foster care system.

**Family support services**
Services that promote the safety and well-being of at-risk children and families and are designed to:
• Increase family stability.
• Increase parenting confidence.
• Provide a safe, stable and supportive family environment.
• Strengthen relationships and promote healthy marriages.
• Enhance child development.

The services may include:
• Family advocate or family mentoring services.
• Healthy families program.
• Parenting/life skills.
• Home-based family support services.

Family support services are provided to parents or primary caregivers responsible for the care and supervision of minor children with:
• An open foster care, juvenile justice or CPS Category I, II or III case.
• A DHS case closed in the past 18 months.
• A CPS investigation in the past 18 months.
• Three or more rejected CPS complaints.

**Percentages**
The CFS 101 estimates for FY 2012, submitted with this report indicate that Michigan will continue to work toward a minimum of 20 percent in each of the four service categories, with a maximum 10 percent for administrative costs.

Federal reporting percentages for FY 2010 were:
• Family preservation placement prevention services, 20 percent.
• Family support, 26 percent.
• Time-limited reunification, 26 percent.
• Adoption promotion and support services, 25 percent.
• Administrative costs, 3 percent.

For FY 2011, no modification is anticipated.

**Goal:** DHS will provide examples of evidence-based program models to local communities for inclusion in their local services array.

**Goal:** DHS will provide technical assistance to providers and local offices related to Strong Families/Safe Children program requirements.

**Status:** These goals are ongoing DHS activities to local offices and community partners.

**Technical Assistance Provided to Counties and Local and Regional Entities**

**Goal:** DHS will provide technical assistance to providers and local offices related to Strong Families/Safe Children program requirements.

**Status:** These goals continue through FY 2012.

**Child Protection Community Partners (not title IV-B(2) funded)**
This collaborative funding effort requires DHS and community partners to plan and provide services to children of families at low to moderate risk of child abuse or neglect. The funding:
• Supports prevention and early intervention programs.
• Reduces the number of re-referrals for substantiated abuse and/or neglect.
• Improves the safety and well-being of children.
• Improves family functioning.

**Client Eligibility Criteria**
Families investigated by CPS in the previous 18 months where one of the following is true:
There was a preponderance of evidence of child abuse or neglect and a low to moderate risk of future harm to the child is indicated (CPS Category III; community services needed).
There was not a preponderance of evidence of child abuse or neglect, but future risk of harm to the child is indicated (CPS Category IV; community services recommended).

**Services purchased with these funds may include:**
- Parenting education.
- Parent aide services.
- Wraparound coordination
- Counseling.
- Prevention case management.

**Goal:** DHS will continue to provide locally determined prevention and early intervention services targeted to at-risk families.  
**Status:** This goal continues through FY 2012.

**Child Safety and Permanency Plan (not title IV-B(2) funded)**
Funding is targeted to children who are at imminent risk of removal for abuse and/or neglect, and to move children in out-of-home placement to permanence. Services can be used to reduce the length of time a child is in out-of-home placement through the provision of services to his or her birth family.

**Client Eligibility Criteria**
- Families with an open CPS Category I, II or III case.
- Families with children in DHS supervised out-of-home placement.
- DHS adoptive families needing services to prevent disruption or dissolution.
- Families with an open DHS prevention case.

**Goals and Objectives**
- Keep children safe in their home and prevent the unnecessary separation of families.
- Return children in care to their families in a safe and timely manner.
- Provide safe permanency alternatives for children when reunification is not possible.

**Examples of services include:**
- Counseling.
- Parenting classes.
- Parent aide.
- Wraparound coordination.
- Flexible funds to meet identified needs.
- Families Together Building Solutions.

**Goal:** DHS will continue to provide locally determined core family preservation and reunification services, targeted to eligible families.  
**Status:** This goal continues through FY 2012.
Families First of Michigan (not title IV-B(2) funded)
Families First is an intensive home-based intervention providing support to CPS, foster care, adoption and juvenile justice programs and also accepts referrals from domestic violence shelters and Native American tribes in select areas. Examples of intervention services may include:

- Parenting skill modeling.
- Budgeting,
- Housekeeping.
- Counseling.
- Advocacy.
- Connecting families with community resources.

Child Welfare Training Institute staff provides training to contractors that perform the service.

Client Eligibility Criteria
Eligible families have at least one child at imminent risk of placement in out-of-home care. Agencies that provide services to tribal children and families must ensure cultural competence in program intervention. Similarly, designated domestic violence shelter programs for families may also make referrals with at least one child at risk of homelessness due to domestic violence.

Goals and Objectives:
- Keep children safe in their own home and prevent foster care placement.
- Return children to their families in a safe and timely manner.
- Provide enhanced safety for children in the home.
- Defuse the potential for violence within the family.

Program Utilization/Effectiveness
Goal: In the coming years, DHS will increase the success rate of the program beyond 88 percent of families retaining custody one year after intervention without further abuse or neglect.
Status: The program served 3,848 families in FY 2010 and 89 percent of families served continued to have their children in their home 12 months after the intervention ended. DHS plans to maintain this success during FY 2012.

Family Reunification Program (not title IV-B(2) funded)
The Family Reunification Program provides an array of intensive, in-home services that enable children and families to reunify within 12 months of their removal from the home. It is available in 26 counties that serve nearly 85 percent of Michigan’s child welfare population. Service delivery averages four hours per week for four-to-six months with 24/7 availability. Services may begin as early as 30 days prior to the expected return home.
Client Eligibility Criteria
The Family Reunification Program is available to families who have a child in out-of-home placement due to abuse or neglect. Out-of-home placement includes but is not limited to:

- Residential treatment.
- Family foster care.
- Group family foster care.
- Relative placement.
- Psychiatric hospitalization.

Program Utilization
The Family Reunification Program served 984 families in FY 2010.

Goal: Assess expansion into additional service areas.

Status: In FY 2011, the Family Reunification Program was expanded to three additional counties.

PERMANENCY: FOSTER CARE

The foster care program serves children judicially ordered into the care and supervision of DHS and who are temporary court wards or permanent state wards. The goal of foster care is to provide a safe and stable home and family until they can be safely returned to their birth parents, adopted or placed in another permanent living arrangement.

The safety and support of children remains a focus for Michigan. Achievement of an appropriate permanency goal within the Adoption and Safe Families Act timeframes is the desired outcome. The foster care program provides case management services to children placed out-of-home and to their families.

Michigan identifies needs, provides services and engages families in the case planning process and collaborates with families through family team meetings and Concurrent Permanency Planning to enhance engagement and achieve timely permanency. Michigan CFSR outcomes are the goals and objectives for its foster care program.

Safety
DHS policy directs staff to assess circumstances within a potential resource family prior to placing a child in an unrelated foster or relative home. The caseworker must evaluate the family’s ability to meet the child’s needs and the extra demands of another placement. During the previous fiscal year, DHS limited to three the number of children who can be placed in an unrelated foster home or relative home. A process for requesting and granting exceptions on a case-by-case basis is available. During FY 2010, 583 exceptions were approved; 345 kept siblings together. Numerical data for FY 2011 is not available at this time, and will be reported in the
2012 Annual Progress and Services Report. Exceptions have been approved at approximately the same rate at FY 2010 so far.

Michigan uses daily-automated central registry clearances for “named caregivers” that immediately reports if a caregiver has been identified as a perpetrator of abuse or neglect. An automated process performs monthly criminal history checks where “named caregivers” are cleared for arrests and criminal convictions. Manual criminal history and central registry checks for all other adult household members must be completed quarterly by the local DHS office and documented in the case service plan.

**Technical Assistance Provided to Counties and Local and Regional Entities**

During FY 2010, Michigan established a Maltreatment in Care Committee to review information on children who experience an incident of abuse or neglect in care. A work group recommends solutions to prevent maltreatment of children in foster care to identify what supports must be provided for families in order to provide exceptional care for children.

**Permanency**

Community involvement and partnership with the courts, universities, private providers and child welfare advocates is essential to reducing the number of children awaiting reunification, adoption, guardianship or permanent placement with a fit and willing relative. Action steps:

- A data management unit to provide essential statistical information to all 83 counties on children in the foster care system.
- Monthly permanency reports to counties to increase the effectiveness of their case management efforts.
- Local plans that address barriers to permanency for children in their custody.
- Specialized permanency positions to focus on children who have been in foster care for long periods.

DHS is implementing family team meetings, formerly Permanency Planning Conferences, a family-centered and team-guided decision making approach to guide decisions concerning a child’s safety, placement and permanency that include parents, relatives, foster parents, youth, child welfare staff and other members the family identifies that support or influence their lives. During the family meeting, information is shared by caregivers to identify paternal or maternal relatives and absent parents. A trained facilitator manages meetings in the Big 14 counties.

Concurrent, rather than sequential, permanency planning is family-centered, child-focused and community based to, first, maintain children safely in their own homes. When this is not a safe and stable option, the goal is to transition from the uncertainty of foster care to the security of a permanent family. Concurrent Permanency Planning holds equal promise for expediting family reunification or another permanency goal through structured, focused and respectful involvement of parents, family and team members early in the planning process.
Technical Assistance Provided to Counties and Local and Regional Entities

Progress: The new Michigan case management practice model is known as MiTEAM and will focus caseworkers on teaming, engagement, assessment and mentoring when working with a family from CPS intervention to permanency. Michigan has established a steering committee to implement MiTEAM. Trained facilitators will begin MiTEAM in the Big 14 counties where family team meetings are implemented. This transition plan will ensure that family engagement will not be interrupted. MiTEAM will allow families, caregivers, certification workers, attorneys and caseworkers to request team meetings when they have the most impact. The strategies outlined in the Program Improvement Plan review effectiveness thorough quality assurance case reads.

Michigan reunification alerts are available to field staff for review at any time. The caseworker and supervisor use the tool to initiate a family team meeting to discuss case planning, strengths and barriers to reunification. Structured Decision-Making policy has been revised to require and strengthen notification to relatives, sibling placement and visitation plan, assess educational needs and services provided, address medical, dental and mental health services and permanency goal approval.

Policy Revisions
Foster care policies that were implemented in FY 2010 to support stability of a child in placement and facilitate timely permanency include:

- Supervisors and caseworkers must have monthly case consultation on all cases.
- Limitations on the number of children in a foster home including a combination of foster placements and the caregiver’s own children.
- A diligent relative search and notification must be made within 30 days of a child’s placement in foster care.
- Relatives must be licensed or approved to forego licensure.
- Limitations were made on the use of emergency and shelter placements.
- A child’s placement must be within 75 miles of a child’s removal home.
- Limitations were made on the separation of siblings. If siblings are not placed together, the caseworker must outline the sibling visitation plan in the treatment plan with quarterly reassessment on ways to reunite the siblings.

Relative Search and Placement
Michigan strengthened its relative search policy to help caseworkers provide timely and appropriate notice to family members to involve them in the child’s care and placement. Engaging families in family team meetings encourages relatives to become involved early in the case planning process. Michigan is helping relative caregivers become licensed caregivers. The Bureau of Children and Adult Licensing grants variances for non-safety standards, when possible, to overcome barriers relatives may encounter.
Licensure of Relatives
Foster care workers must advise relative caregivers of the advantages of becoming a licensed foster care provider and provide the relative with the DHS-972, Relative Agreement for Placement and Licensure. The relative caregiver must sign the form indicating they have discussed licensure with the worker and indicate whether they agree to become licensed. Licensing relative providers remains a priority for DHS through FY 2013. Local community support groups offer training and resources for grandparents raising grandchildren.

Goal: Continue to increase the number of relatives licensed through educating them on the benefits of licensure and assisting them with the licensing process.
Status: During FY 2010, Michigan licensed 983 relatives, a 14 percent increase over FY 2009. Michigan strategies that enhance practice and resolve barriers to timely licensure include:

Financial resources to assist with home (structural) barriers
The legislature allocated $375,000 in FYs 2009, 2010 and 2011 to eliminate barriers to licensing including home repairs, medical statements, beds, and smoke detectors. The grant provided financial assistance for applications to obtain medical statements. In FY 2010, 180 relatives used this fund for licensure. Between October 2009 and September 2010, 64 relatives have had variances granted to licensing rules for non-safety standards such as bedroom space, income and child capacity.

Technical Assistance Provided to Counties and Local and Regional Entities
Increasing awareness of the benefits of licensure
A relative mentor program is being piloted in Wayne County, where a licensed relative supports and guides an unlicensed relative through the licensing process. A best practice timeline was developed and provided to both mentor and mentee. An evaluation will be completed to determine effectiveness of the best practice timelines and to see if the additional supports offered by other caregivers increases timeliness to licensure. A relative caregiver informational booklet provides information on the benefits and requirements for licensure, resources to support the licensing process, permanency living arrangement options and the court process for children entering the child welfare system.

In partnership with the Child Welfare Training Institute, relative engagement training is being developed for front line staff on family engagement strategies and licensing rules. An outline has been developed and curriculum is in development. Family team meeting facilitator refresher courses were held between August and September 2010 on the benefits and requirements for relative licensing. Conference calls are being scheduled quarterly with facilitators to reinforce practice.

Statewide trainings on the importance of caseworker visitation included a tool which reminds the foster care worker to address the status of the relatives’ progress towards licensure.
Streamlining the licensing process
Policy became effective April 1, 2011 delays referral for licensure until after approval of the 30-day relative home assessment.

Well-Being
Concurrent Permanency Planning
Concurrent permanency planning will expedite permanency for Michigan’s children. Key areas include:

- Family search and engagement through family team meetings.
- Collaboration and engagement between the birth and foster families to develop and implement the reunification plan.
- Frequent parenting time (parent/child visits) and success strategies.
- Front-loading services for family reunification.
- Concurrently establishing a back-up permanency plan in the event reunification is not possible.

Technical Assistance Provided to Counties and Local and Regional Entities
Status: Michigan piloted concurrent permanency planning to integrate concurrent planning and family engagement strategies, revise policy and implement best practices for statewide implementation. Prior to implementation in Ingham County, training was provided to state children’s services staff and private placement agency foster care providers in Ingham County. Community stakeholder (foster parents, courts, relative caregivers and service providers) training began in April 2010.

A steering committee will appoint staff from the State Court Administrative Office to assist in the implementation. Court involvement is crucial to the success of this practice change. Concurrent permanency planning will be implemented with the family engagement model.

The timeline for transition from permanency planning conferences to family team meetings will coincide with the statewide implementation plan for the MiTEAM model. The Big 14 counties will be the initial implementation of the MiTEAM Model, where they have trained non-case carrying facilitators to assist with training and mentoring.

Technical Assistance Provided to Counties and Local and Regional Entities
Caseworker Visitation
DHS training improves the rate and quality of caseworker visits with children and their caregivers and is focused on improving safety, permanency and well-being case outcomes. The Data Management Unit is developing supervisory reports to monitor monthly visits with parents and children as well as compliance with parenting time and policy was updated to reflect required entry of caseworker visits in SWSS.
Maintaining Important Connections
Michigan is improving placement of sibling groups, enhancing visitation with parents, siblings and caregivers and to preserving family connections and relative placements through reports to monitor parenting time and timeliness to reunification and revised foster care policy to enhance contact standards with parents and siblings.

Policy Revisions
Contact standards with parents and siblings were revised to include:
- Separated siblings must have at least monthly contact and quarterly case reviews to reunite siblings, when possible.
- Two worker-parent visits during the child’s first month in care, at least one of which must occur in the parental home.
- At least one face-to-face worker-parent contact monthly and one quarterly contact in the parental home.
- At least weekly parenting time unless the worker has documented reasonable exceptions within the service plan.

Wayne County Baby Court
The “Baby Court” pilot is a specialized docket that addresses abuse/neglect cases where infants and young children are under court and DHS supervision to assure they move to permanency as quickly as possible through reunification or termination of parental rights. Genesee County successfully implemented a Baby Court and data is beginning to be evaluated.

Technical Assistance Provided to Counties and Local and Regional Entities
Goal: Implement the Wayne County Baby Court to improve outcomes for very young children involved in the child welfare system.
Status: The Wayne County pilot has been operational 11 months with 10 families active, and all fit the following profile:
- The mothers are between the ages of 16 and 25.
- The children are under two years of age.
- Most children are less than one year of age.
- Family size is limited to two children.

The model was adopted from Miami/Dade, Florida, whose team has provided training and technical assistance. Wayne State University has a research project assessing the Wayne County court. During the next 12 months, the objectives include development of refined procedures, policy and best practices. Our goal is to increase the number of families served to 20.

Fetal Alcohol Spectrum Disorder Task Force
DHS health services unit and juvenile justice analysts participate in the task force. DHS supports the task force strategic plan by increasing identification and diagnosis, and working to expand and improve service access and delivery in the child welfare system. The task force works with the Child Welfare Training Institute to promote awareness in training components.
Michigan Substance Abuse/Child Welfare State Team
In June 2010, in response to child welfare cases involving parental substance abuse, the directors of DHS, the Department of Community Health and the State Court Administrative Office signed an agreement to promote cross-system training and collaboration between the three systems. The systems are working to develop a coordination protocol for county level activity by summer 2011.

Children will receive appropriate services to meet their educational needs.
Michigan requires a plan that ensures educational stability of a child while in foster care to implement provisions of the Fostering Connections to Success legislation. During the previous year, DHS initiated contact with the Michigan Department of Education and identified how legislative changes with the McKinney-Vento Act applies to foster children in Michigan. Based on these collaborative efforts, Michigan passed legislation in December 2009 amending Section 1148 of the Revised School Code (MCL 380.1148). The law states:

“[A] school district shall allow the child to enroll in and attend the appropriate grade in the school selected by the Department of Human Services or a child placing agency without regard to whether or not the child is residing in that school district. If the selection results in a child transferring to another school, the child’s records shall be transferred, as provided under section 1135.”

The Michigan McKinney-Vento coordinator identified resources to ensure children enrolled in school can access transportation from their placement to school of origin, among other benefits. Best interest factors were identified when considering a child’s school placement that includes the child’s:
- Social and emotional state.
- Academic achievement and strengths.
- Continuity of relationships.
- Special education programming.
- Distance to and from the current school/new placement and impact on the child.
- Supportive relationships and services.
- Length of anticipated stay in placement.

Technical Assistance Provided to Counties and Local and Regional Entities
Michigan completed the following activities to support implementation of the policy:
- The Child Welfare Training Institute addresses educational policy in new worker pre-service and program specific transfer training.
- Fourteen educational planners were hired and trained in policy requirements and McKinney-Vento resources for DHS staff when children enter foster care or are moved from one placement to another. In turn, the educational planners developed a
PowerPoint training for school personnel and child welfare staff and supervisors that communicates DHS foster care education policy and their roles.

- In June 2010, the educational planners began developing relationships with local schools and intermediate school districts and educated DHS and placement agency foster care staff on their roles and responsibilities.
- In August 2010, DHS presented *Educational Stability for Foster Youth* on Fostering Connections legislation, the responsibilities of the educational planners, and foster care policy at the Educational Issues in Child Welfare conference.

**CFSP 2010-2014 Goals and Objectives**
Michigan has adopted CFSR outcomes as overarching goals and objectives for the foster care program and will take action to achieve the outcomes indicated below. Michigan has also incorporated the consent decree outcomes and measures, predicated on the CFSR, into our strategic plan. These blended outcomes form the basis of our five-year plan.

**Safety**

<table>
<thead>
<tr>
<th>Federal Outcome</th>
<th>Children are, first and foremost, protected from abuse and neglect.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance Indicators/ Baseline</td>
<td>Absence of repeat maltreatment while in a foster care placement - 99.51%</td>
</tr>
<tr>
<td>Results: 2009</td>
<td>99.51%</td>
</tr>
<tr>
<td>2010</td>
<td>99.06% <strong>1</strong></td>
</tr>
</tbody>
</table>

**Action Steps**
- Assess the current circumstances of any potential foster/relative home prior to placing another child in the home.
- Implement *(Completed)* and oversee the limitations on the number of children in a foster home.
- Continue unannounced home visits with all foster care providers quarterly.
- Conduct and review ongoing criminal history and Central Registry checks of all caregivers monthly and other household members quarterly.
- DHS will negotiate the percentage of improvement on this outcome during the development of the CFSR Program Improvement Plan.

---

1 **AFCARS 2009BA Supplied by Child Welfare Improvement Bureau Data Management Unit**
### Permanency

<table>
<thead>
<tr>
<th>Federal Outcome</th>
<th>Timeliness and permanency of reunification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance Indicators/Baseline</td>
<td>Rate of foster care re-entries – 3.2% within 12 months of prior episode</td>
</tr>
<tr>
<td>Results:</td>
<td></td>
</tr>
<tr>
<td>2009</td>
<td>3.2%</td>
</tr>
<tr>
<td>2010</td>
<td><strong>3.8%</strong></td>
</tr>
</tbody>
</table>
| Action Steps | 1. Provide an array of services to reduce the rate of re-entry.  
2. Utilize SDM tools to ensure families are receiving the services needed to rectify removal conditions.  
3. Review and/or revise statewide policy to ensure that all case planning involves the family and youth. ([Refer to Case Management Section](#)). |

<table>
<thead>
<tr>
<th>Federal Outcome</th>
<th>Increase percentage of children reunified in less than 12 months.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance Indicators</td>
<td>Reunification achieved in less than 12 months from the date of removal – 47.7%</td>
</tr>
<tr>
<td>Results:</td>
<td></td>
</tr>
<tr>
<td>2009</td>
<td>51.9%</td>
</tr>
<tr>
<td>2010</td>
<td><strong>53.4%</strong></td>
</tr>
</tbody>
</table>
| Action Steps | 1. Utilize SDM tools effectively to assess the family’s needs and progress towards reunification.  
Increase supervisory oversight of assessments and service plans through monthly consultation with the caseworker prior to each assessment and service plan being finalized. ([Policy implemented](#)).  
Collaborate with courts to conduct regular and frequent permanency-planning hearings.  
2. Pilot Concurrent Permanency Planning. ([Refer to well-being above](#)).  
4. Continue to send the Reunification Alert report to local DHS offices and the court. ([Tool has been automated](#)). |

<table>
<thead>
<tr>
<th>Federal Outcome</th>
<th>Decrease the median length of time to reunification.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline</td>
<td></td>
</tr>
<tr>
<td>Performance Indicators/Baseline</td>
<td>Reunification achieved in less than 12 months from the date of most recent removal</td>
</tr>
<tr>
<td>Results:</td>
<td></td>
</tr>
<tr>
<td>2009</td>
<td>11.6 months</td>
</tr>
<tr>
<td>2010</td>
<td>13.4 months</td>
</tr>
<tr>
<td>Action Steps</td>
<td>Same as previous topic - “Increase percentage of children reunified in less than 12 months.”</td>
</tr>
</tbody>
</table>
### Placement Stability

**Federal Outcome**: Increase or maintain the percentage of children having two or fewer placements while in foster care.

**Performance Indicators/Baseline**

Two or fewer placement changes for:
- Set A: Children in care less than 12 months – 85.8%
- Set B: Children in care between 12 and 24 months – 72.5%
- Set C: Children in care longer than 24 months – 45.4%

**Results:**

<table>
<thead>
<tr>
<th>Year</th>
<th>&lt; 12 months</th>
<th>12 to 24 months</th>
<th>&gt; 24 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>85.6%</td>
<td>73%</td>
<td>47.7%</td>
</tr>
<tr>
<td>2010</td>
<td>87.6%</td>
<td>75%</td>
<td>46.3%</td>
</tr>
</tbody>
</table>

**Action Steps**

- Continue to assess current circumstances of any potential foster/relative foster home in accordance with individual needs of the child.
- Develop policy to limit the use of emergency or temporary foster care facilities. *(Completed).*
- Develop policy and protocol to limit the number of children in residential care facilities. *(Protocol completed).*
- Monitor the implementation of the limitations on the number of children in foster homes.
- Continue to implement and evaluate Treatment Foster Care Services in the identified pilot counties. *(Refer to Mental Health Section).*
- Identify barriers to relative caregivers becoming licensed as foster family homes. *(Completed).*
- Monitor policy implementation of relative notifications as established.

**Outcome**: Children will have placements in close proximity to their family home.

**Performance Indicators/Baseline**

87% of placements in close (< 75 miles) proximity of family home.

**Results:**

<table>
<thead>
<tr>
<th>Year</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>96%</td>
</tr>
<tr>
<td>2010</td>
<td>97%</td>
</tr>
</tbody>
</table>

**Action Steps**

- Implement policy on the limitations of placement within 75 miles of removal placement. *(Completed).*
- Provide training regarding the new policy for relative search and placement. *(Completed).*
- Provide data to county offices regarding geographical proximity of placements. *(Data is provided at least yearly for Recruitment and Retention planning).*

**Outcome**: Increase number of relative placements.
Performance Indicators/Baseline: Set A: Relatives licensed as a foster family – 12%
Set B: Children in foster care are placed with relative caregivers – 35%

<table>
<thead>
<tr>
<th>Year</th>
<th>Relatives Licensed</th>
<th>Children placed with Relatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>11%</td>
<td>36% 9/30/09</td>
</tr>
<tr>
<td>2010</td>
<td>13%</td>
<td>38% 9/30/10</td>
</tr>
</tbody>
</table>

**Results:**

<table>
<thead>
<tr>
<th>Year</th>
<th>Relatives Licensed</th>
<th>Children placed with Relatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>11%</td>
<td>36% 9/30/09</td>
</tr>
<tr>
<td>2010</td>
<td>13%</td>
<td>38% 9/30/10</td>
</tr>
</tbody>
</table>

**Action Steps**
- Identify barriers to relatives becoming licensed foster care homes. *(Completed).*
- Collaborate with Bureau of Child and Adult Licensing to develop and implement policy regarding waivers of licensing standards for relative caregivers. *(Completed).*
- Implement 30-day notification requirements to relatives when a child enters care. *(Completed).*

**Outcome**
Children will have visits with his/her caseworker monthly. *(Completed).*

<table>
<thead>
<tr>
<th>Performance Indicators/Baseline</th>
<th>Results:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2009 43%</td>
</tr>
<tr>
<td></td>
<td>2010 70.9%</td>
</tr>
</tbody>
</table>

**Action Steps**
- Improve data collection to report information accurately. *(Completed; L-Letter Timely Entry of Caseworker Contacts).*
- Coordinate private CPA interface with the SWSS system to increase caseworker visit reporting. *(Refer to DMU/SACWIS Section).*
- By October 2012, develop and implement policy increasing face-to-face contacts with the child to two visits per month in the first month. *(Completed; FOM 722-6).*
Well-Being
As the result of the Michigan’s CFSR in FY 2009, Michigan is instituting CFSR PIP and Quality Assurance case reviews in FY 2011. The state will begin reporting well-being data for families served beginning in FY 2012.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Performance Indicators/ Baseline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Set A: Needs and services of child, parent and foster parents – 50% for parents, 17% for youth, 70% for FP/relative</td>
</tr>
<tr>
<td></td>
<td>Set B: Child, parent and foster family/relative involvement in case planning – 72.5%</td>
</tr>
<tr>
<td></td>
<td>Set C: Monthly Visits Between Caseworker and Parents - 40%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Results:</th>
<th>Year</th>
<th>Set A</th>
<th>Set B</th>
<th>Set C</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2009</td>
<td>48%</td>
<td>46%</td>
<td>31%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action Steps</th>
<th>Continue to utilize SDM tools to identify the needs and strengths for children and families.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Implement MiTEAM as statewide practice model.</td>
</tr>
<tr>
<td></td>
<td>Monitor and evaluate Wayne County Baby Court pilot.</td>
</tr>
<tr>
<td></td>
<td>Implement statewide the Substance Abuse/Child Welfare protocol. (Completed; protocol released in 2009).</td>
</tr>
<tr>
<td></td>
<td>Extend foster care eligibility to age 20. (Ongoing).</td>
</tr>
<tr>
<td></td>
<td>Participate on the Fetal Alcohol Spectrum Disorders Statewide Taskforce and identify and implement policy changes. (Ongoing).</td>
</tr>
<tr>
<td></td>
<td>Review statewide needs assessment and identify service gaps. Explore funding sources to fund effective programs identified.</td>
</tr>
<tr>
<td></td>
<td>By October 2009, implement policy increasing face-to-face contact with the parent to two contacts in the first month. (Completed).</td>
</tr>
</tbody>
</table>

| Outcome | Children receive appropriate services to meet their educational needs. |

| Performance Indicators | No baseline data is available. |

<table>
<thead>
<tr>
<th>Action Steps</th>
<th>Collaborate with the Michigan Department of Education to ensure children are enrolled in school timely. (Ongoing).</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Advocate with the state legislature to revise state law MCL 380.1148 changing residency from foster home to child’s original district. (Completed).</td>
</tr>
<tr>
<td></td>
<td>Develop policy and procedures to screen children for general and special educational needs. (Completed).</td>
</tr>
<tr>
<td></td>
<td>Develop policy and procedures to limit the number of school changes for a child in foster care. (Completed).</td>
</tr>
<tr>
<td></td>
<td>Implement educational planners for identified groups of youth. (Completed; refer to Chafee Section).</td>
</tr>
<tr>
<td></td>
<td>Increase statewide awareness on obtaining a child’s educational record. (Completed; L-Letter disseminated, policy implemented, PPT implemented in Child Welfare Training Institute new worker training).</td>
</tr>
<tr>
<td></td>
<td>Establish measures to monitor that children receive appropriate services to meet their educational needs. Develop and implement policy and processes to reimburse for transportation expenses to maintain a child in their school after removal. (Completed).</td>
</tr>
</tbody>
</table>
CHAFEE FOSTER CARE INDEPENDENCE PROGRAM: YOUTH IN TRANSITION

The Chafee Foster Care Independence Program in Michigan is called Youth in Transition. The goals are to support youth in foster care and increase their opportunities by focusing on their physical, social, economic and psychological needs. The DHS cooperates in the program’s national evaluations. The key components of the program include:

- Independent and supervised independent living programs.
- Skill training.
- Education and employment programming.
- Mentoring.
- Helping youth make permanent connections to supportive adults.

Eligibility Criteria
Youth in foster care between ages 14-21 and former foster youth ages 18-21 that were in foster care at least one day after age 14 are eligible for the program. Foster and juvenile justice youth must have been in foster care through an eligible DHS placement or a child caring institution. Educational and Training Voucher eligibility is the same and includes youth adopted from foster care or placed in a relative guardianship if the adoption or guardianship took place after the youth’s 16th birthday. DHS staff and contractors provide services.

In FY 2010, DHS spent $5,227,999 ($4,182,399 Chafee; $1,045,600 match) on independent living services. The table below shows a breakdown of services.

<table>
<thead>
<tr>
<th>Chafee Funded Services and Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Type</strong></td>
</tr>
<tr>
<td>Contracted Independent Living (IL) and Supervised Independent Living Programs (SIL)</td>
</tr>
<tr>
<td>Youth in Transition Funding (YIT) for 82 counties</td>
</tr>
<tr>
<td>YIT Funding to Wayne County</td>
</tr>
<tr>
<td>MI Youth Opportunity Initiative/Youth Service Delivery Model</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
</tr>
</tbody>
</table>
The department has developed two programs that address the needs of older youth in care and transitioning from care; the Michigan Youth Opportunities Initiative and Youth Service Delivery Model, which are described later in this report.

**Progress Achieved and Planned Activities**

Independent living programs are provided statewide. Youth age 16 and older placed in an independent living or supported independent living program may live with an approved adult, alone in an apartment, or in a structured supervised placement. The caseworker must:

- Assess each youth’s strengths and needs.
- Involve the youth in developing the treatment plan.
- Provide services to meet the identified needs.
- Conduct monthly face-to-face visits with the youth.

Youth participate in daily living skills development, support groups, youth advisory boards, mentoring or other supportive adult connections, education and employment services, leadership development, preventive health services, counseling and cultural enrichment activities. The data in the table below summarizes the number of youth involved in contracted programs funded through Chafee during FY 2010.

<table>
<thead>
<tr>
<th>IL/SIL Program Data</th>
<th>General Independent Living</th>
<th>Supervised Independent Living</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>DHS Supervised</td>
<td>913</td>
<td></td>
<td>913</td>
</tr>
<tr>
<td>County Child Care Funded – Contractor Supervised</td>
<td>617</td>
<td>3</td>
<td>620</td>
</tr>
<tr>
<td>Contractor Supervised</td>
<td>200</td>
<td>201</td>
<td>401</td>
</tr>
<tr>
<td>Number Served</td>
<td>1730</td>
<td>204</td>
<td>1934</td>
</tr>
</tbody>
</table>

In FY 2010, there were 29 contractors providing independent living services and 14 providing supported independent living. All youth in a program receive a monthly stipend of about $560 paid by state general funds or county child care funds.

**Youth in Transition Funds**

The DHS gives funds to counties for independent living services for all foster youth at risk of aging out of foster care. Counties can contract with private agencies or give funds directly to youth to obtain services. Payments to youth or to vendors can include first month’s rent, security deposit, utilities, car repair, day care, preventive services, mentoring, securing state identification cards, participation in support groups and youth advisory boards.
Services Planned for FY 2011
Implementation of Title IV-E Funded Extensions
Michigan has requested technical assistance from the National Resource Center on Youth Services to develop a model extending foster care to age 21 based on the federal legislation. The model will include:

- Policy and statute revisions for foster care, adoption and guardianship subsidy.
- Redesign of independent living services and programs based on the new eligibility definitions for foster care.

Goals: Develop strategic plans for improving services and programs and to extend foster care past age 18 in Michigan by:

- Requesting technical assistance from the National Resource Center on Youth Services to develop a model for foster care over age 18 based on the Fostering Connections Act.
- Conducting a planning meeting facilitated by the National Resource Center on Youth Services to include youth, caseworkers, supervisors, foster parents, service providers, youth services staff and other stakeholders.
- Determining the implications for services and the optimum funding streams to support programs for youth over age 18.
- Restructuring contracts for services to older youth based on the model.

Status:

- Request for technical assistance from the NRC approved by the Children’s Bureau Region V office by April 2010. Completed.
- Telephone conference to plan technical assistance completed in April 2010. Completed.
- Meeting with stakeholders held to plan the model by June 10, 2010. Completed.
- Subcommittees developed with outcomes completed by August 1, 2010. Completed.
- Reconvene the committee to complete the model for extending care and improving services by August 15, 2010. Completed.
- Revise contract language for independent living and supported independent living services by September 15, 2010. Postponed until legislation is introduced and passed.
- Modify data and payment systems to accommodate youth in foster care to age 21. SACWIS and payment system updates in progress.

Accomplishments in FY 2011

- Policy and forms were drafted. A package of bills were introduced and are moving through the legislature.
- For FY 2011, the counties of Bay/Arenac, Genesee, Ingham, Kent, Muskegon, Wayne and Van Buren contracted with eight agencies to provide youth in transition services.

Services Planned for FY 2012
Implementation of foster care until age 21 under a Young Adult Voluntary Foster Care program.
Technical Assistance Provided to Counties and Local and Regional Entities
Transition to Self-Sufficiency: Youth Services Delivery Model
The model is focused on sustaining the Michigan Youth Opportunities Initiative and implementing a new youth casework practice called permanency teaming.

Accomplishments in FY 2010
- A kickoff event was held with DHS and private agency representatives, youth and Jim Casey Youth Opportunities Initiative staff.
- A steering committee and three action teams were created to help counties implement the model.
- The model was shared with county directors, district managers, supervisors and private agency manager.

Implementation activities include:
- Identifying the phase one sites: Antrim/Kalkaska, Benzie/Manistee, Charlevoix/Emmet, Grand Traverse/Leelanau, Wexford/Missaukee, Genesee, Macomb, Ogemaw/Roscommon, Chippewa/Luce and Gogebic/Ontonagon counties.
- Identifying the phase two sites: Kent, Kalamazoo, Midland/Isabella, Washtenaw and Wayne counties.
- Recruiting private agency staff to participate in training.
- Training staff using the permanency teaming model.

Services Planned for FY 2012
Continued coordination with MiTEAM implementation.

Permanency Teaming in Practice
Permanency teaming is the primary case management activity to support youth and assist caseworkers by engaging a young person’s natural network to:
- Increase understanding of the youth’s needs.
- Address the traumatic loss and separation the youth experiences when growing up in foster care due to abuse and neglect.
- Achieve and support family permanence.
- Encourage creative family search strategies and develop permanency options.
- Maintain a safe, long-term family connection.
- Build an adoptive or guardianship family when a parent cannot care for a youth full-time.
- The teaming process continues until a youth has a legal family and leaves the child welfare system. If legal permanence is not possible, the teaming process focuses on long-term commitments between a youth and important adults.
Services Planned for FY 2011

Goal: Help youth develop connections and skills to transition to self-sufficiency by:

- Developing child welfare policy for the Youth Services Delivery Model.
- Developing data to compare outcomes for counties using the permanency teaming model to those counties that do not.
- Identifying and train new sites.

Status:

- Policy is completed by September 2011.
- Baseline data is collected by September 2011.
- Increase number of counties using the permanency teaming model by September 2011.

Accomplishments in FY 2011

- A permanency teaming training was held in Washtenaw County on February 14 and 15. Attendance included 17 DHS staff and 2 POS staff.

Services Planned for FY 2012

Goal: Help youth develop connections and skills to prepare for self-sufficiency.

Objectives: Develop older youth policy within the MITEAM model.

Measurement: Policy for the MITEAM is completed by September 2012.

Employment Related Education, Training and Services

Beyond services available in other programs, summer employment options for foster youth are a priority. Collaboration continues with the Department of Licensing and Regulatory Affairs and Michigan Works Agencies to assist foster youth in obtaining employability skills.

Accomplishments in FY 2011

Policy was published directing foster care workers to refer all foster youth age 14 and older without a goal of reunification to Michigan Works Agencies. Youth Services worked with Child Welfare Field Operations to develop and implement a process for reporting youth referred to the Michigan Works Agencies and the type of services received. The information is collected and reported in SWSS. Documentation released to the field provided specific instructions on how to report employment referrals.

The Summer Youth Employment Program was implemented in eight Michigan Works Agencies in FY 2010 through agreement between DHS and the Department of Licensing and Regulatory Affairs that served 333 foster youth. A new agreement supports the Summer Youth Employment Program for 2011 and is in effect until August 31, 2011. DHS is using $600,000 of Chafee funds, to implement this program at six Michigan Works Agencies. The program will serve youth in Kent, Ingham, Clinton, Eaton, Wayne, Genesee, Shiawassee, Macomb and St. Clair counties including foster youth 14 and older with work readiness classes and employment placement, credit recovery and GED courses will also be offered. DHS has developed data reports that each Michigan Works Agencies must complete that show outcomes, work readiness and follow-up reporting.
Services Planned for FY 2012

Goals: Develop opportunities for foster youth that prepare them for employment by:

- Receive outcome and follow-up reports from the Michigan Works Agencies at 3, 6, 9 and 12 months after the completion of the FY 2011 program. These reports will show the sites that will continue the Summer Youth Employment Program in FY 2012.
- Completing the 2011 agreement to provide Summer Youth Employment for 350 youth in nine counties.
- Collaborating with the Michigan Works Agencies to ensure each program has an educational component.
- Improving service coordination.

Status:

- The number of youth referred to Michigan Works Agencies during FY 2011.
- The number of youth receiving Michigan Works Agencies services during FY 2011.
- The number of youth participating in summer employment during FY 2011.
- The number of youth participating in an educational component during FY 2011.
- The number of youth participating in Summer Youth Employment Program during FY 2011.

EDUCATION AND TRAINING VOUCHER PROGRAM

This state administered program is delivered through contract with Lutheran Social Services of Michigan and is monitored by DHS. The contractor maintains a database and website that streamlines the application process. Youth can apply through the website, by paper application, or by calling to request an application (1-877-660-METV).

The contractor has developed collaborative relationships with community colleges, universities and vocational schools that will help youth apply for admission, financial aid and vouchers. Lutheran Social Services of Michigan trains partner institutions.

Technical Assistance Provided to Counties and Local and Regional Entities

Accomplishments in FY 2010 and FY 2011

In FY 2010, the staff completed 45 outreach activities including:

- Annual regional meetings.
- Foster care youth job and career fairs.
- Mass informational emails to DHS and private agency caseworkers.
- Presentations to youth boards.

In FY 2010, the ETV staff completed 45 outreach activities. These activities included the ETV annual regional meetings, foster care youth job and career fairs, mass informational emails to DHS and private agency caseworkers and presentations to youth boards.
From October 1, 2010 through June 30, 2011, the ETV staff completed 33 trainings, presentations and mass mailings. In both FY 2010 and FY 2011, approximately 93% of the funds were directed to youth with administration costs of 7 percent. As of June 30, 2011, 570 foster youth were awarded funding.

**Employment and Training Voucher Data**

<table>
<thead>
<tr>
<th>Year</th>
<th>July 1, 2009 to June 30, 2010</th>
<th>July 1, 2010 to March 31, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Youth Awarded Vouchers</td>
<td>679</td>
<td>694</td>
</tr>
<tr>
<td>First Year Vouchers Awarded</td>
<td>320</td>
<td>281</td>
</tr>
</tbody>
</table>

**Number of Years Awarded to Individual Students in 2009-2010**

<table>
<thead>
<tr>
<th>Years</th>
<th>1 Year</th>
<th>2 Years</th>
<th>3 Years</th>
<th>4 Years or Beyond</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>47.1%</td>
<td>21.5%</td>
<td>16.9%</td>
<td>14.4%</td>
</tr>
</tbody>
</table>

**Type of Post-Secondary Program Recipients Attended in 2009-2010**

<table>
<thead>
<tr>
<th>Type of Post-Secondary Program</th>
<th>4 Year University</th>
<th>Community College</th>
<th>Private 4 Year Univ.</th>
<th>Trade or Vocational</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>37.4%</td>
<td>47.2%</td>
<td>5.9%</td>
<td>9.4%</td>
</tr>
</tbody>
</table>

**Number of Years Awarded to Individual Students October 1, 2010 – June 30, 2011**

<table>
<thead>
<tr>
<th>Years</th>
<th>1 Year</th>
<th>2 Years</th>
<th>3 Years</th>
<th>4 Years or Beyond</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>37.72%</td>
<td>24.91%</td>
<td>16.84%</td>
<td>20.52%</td>
</tr>
</tbody>
</table>

**Type of Post-Secondary Program ETV Recipients Attended October 1, 2010 – June 30, 2011**

<table>
<thead>
<tr>
<th>Type of Post-Secondary Program</th>
<th>4 Year University</th>
<th>Community College</th>
<th>Private 4 Year Univ.</th>
<th>Trade or Vocational</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>36.49%</td>
<td>48.07%</td>
<td>7.37%</td>
<td>8.17%</td>
</tr>
</tbody>
</table>

During FY 2010, the contractor started an Educational Training Voucher Facebook page. The social networking site provides a youth friendly website where staff post updated information on program expectations, award amounts, application processes and deadlines. The application was modified to encourage applicants to join the Facebook page. As of June 20, 2011, there were 54 active users on the site.

**Services Planned for FY 2012**

**Goal:** Ensure vouchers are available to all eligible youth.
- Eligible youth will be aware of the program when attending post-secondary education programs.
• The contractor will process applications and award vouchers in a timely manner.
• The education analyst and contract staff will complete trainings throughout the state for FY 2012.
• A site visit will be scheduled by the education analyst to ensure contractor compliance.
• ETV policy, FOM 960 will be updated to better reflect ETV approved expenditures.

Status:
• Collection of data annually on: the number of youth applying for and awarded vouchers, the number of years each youth obtains a voucher, and the number of youth who successfully complete their post-secondary education or training program.
• Monthly reports on applications, distribution of funds, presentations and other activities.
• An annual contractor site visit.

Technical Assistance Provided to Counties and Local and Regional Entities
Preparation for Post-Secondary Education and Training
EduGuide is an award winning, Michigan-based, non-profit agency that equips educators with family engagement strategies to support school success and encourage post-secondary training and education. Through a partnership with the EduGuide organization, Michigan began a special Foster Care College Goal Sunday to assist foster youth in filling out the Free Application for Federal Student Aid. The annual event was held February 20, 2011 at the University of Michigan-Dearborn.

In FY 2010, EduGuide approached DHS with an offer to become a partner organization in a web-based academic support system for foster youth. EduGuide is actively securing grant funds to create the customized online mentoring system. This system will be used to support foster youth life skills development. An education planner serves as the coach, creates a team page much like Facebook, and invites his/her foster youth to become members.

Services Planned for FY 2012
Goal: Ensure youth have the necessary support to achieve educational success. Education planners will develop team pages on the EduGuide site to mentor youth and develop plans to improve education outcomes for foster care youth in Detroit Public Schools.

Status:
• The number of DHS foster youth teams established in the EduGuide website by November 2011.
• The number of youth participating in the EduGuide mentoring process during FY 2011.
• Develop an operational plan with clear goals and objectives by July 2011.
Accomplishments in FY 2010
In FY 2010, DHS developed a plan for providing ongoing educational assistance for foster youth. The chart below lists counties with an education planner.

<table>
<thead>
<tr>
<th>Counties Served by Education Planners</th>
<th>Number of Planners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wayne</td>
<td>4</td>
</tr>
<tr>
<td>Macomb</td>
<td>1</td>
</tr>
<tr>
<td>Oakland</td>
<td>1</td>
</tr>
<tr>
<td>Genesee</td>
<td>1</td>
</tr>
<tr>
<td>Kent</td>
<td>1</td>
</tr>
<tr>
<td>Calhoun/Kalamazoo/Branch/Hillsdale</td>
<td>1</td>
</tr>
<tr>
<td>Ingham/Barry/Eaton</td>
<td>1</td>
</tr>
<tr>
<td>Jackson/Livingston/Shiawassee/lenawee/Monroe</td>
<td>1</td>
</tr>
<tr>
<td>Isabella/Midland/Saginaw/Bay/Arenac</td>
<td>1</td>
</tr>
<tr>
<td>Berrien/Cass/St. Joseph/Van Buren</td>
<td>1</td>
</tr>
<tr>
<td>Muskegon/Ottawa/Allegan</td>
<td>1</td>
</tr>
<tr>
<td>Dickinson/Delta/Menominee</td>
<td>1</td>
</tr>
</tbody>
</table>

Technical Assistance Provided to Counties and Local and Regional Entities

Services Planned for FY 2011

Goal: Youth receive the necessary advocacy and support to be successful in school.
- Education planners will provide training on topics specific to educational issues of foster youth to diverse audiences in the community.
- Continue to provide, at minimum, quarterly training sessions.
- Continue to have monthly phone conferences with the education planners to provide support and technical assistance.
- The education planners will complete monthly reporting forms until data can be entered into the Juvenile Justice Online Technology system.
- Work with the Data Management Unit and Field Operations Administration to have education planner information entered onto a database.

Status:
- The final two education planners were hired in August 2010 and the education analyst provided them with a full-day training session.
- Report requirements and forms were developed by September 2010. The referral form and three separate reports are developed and in use by the education planners.
- Outcomes and data collection methods are identified by September 2010.
- Reporting mechanism will be present in Juvenile Justice Online Technology system by January 1, 2012.
- Educational planners will assist with developing a baseline of youth in the Big 14 counties that are leaving foster care with a high school diploma or GED. This will be done by the DHS data management unit sending a list of youth that left care between
January 2011 and June 2011. The education planners will assist with finding if those youth graduated.

- The number of youth served by education planners beginning in June 2011.
- The number of trainings provided by the education planners to child welfare staff and school personnel in FY 2011.
- The number of youth served who entered post-secondary programs in FY 2011.

**Post-Secondary Institutions**

The Western Michigan University John Seita Scholarship pays for tuition of undergraduate courses at the university for current and former foster children who meet eligibility criteria. Books, fees, housing, food and other living expenses are not included in the scholarship; however, most or all of these costs may be covered by financial aid and available state support, thereby making it possible for a Seita Scholar to earn an undergraduate degree with little or no student loans.

The Seita program has a full-time DHS staff person dedicated to the program on Western Michigan University’s campus. This staff member assists with Youth in Transition requests, Education and Training Voucher applications and any other DHS services that may be required. Outcomes for the Seita program have been extremely positive. The chart below shows the performance statistics for each cohort. The outcomes for the Seita program have been extremely positive. The expectation is that the program will have a total of 140 students in the fall 2011 semester.

**Western Michigan University**

**First Semester Performance Statistics by cohort 2008/09, 2009/10, and 2010/11**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrolled in fall semester</td>
<td>N=51</td>
<td>N=47</td>
<td>N=53</td>
</tr>
<tr>
<td>Enrolled at end of fall semester</td>
<td>94%</td>
<td>100%</td>
<td>96%</td>
</tr>
<tr>
<td>Returned for spring semester</td>
<td>76%</td>
<td>94%</td>
<td>94%</td>
</tr>
<tr>
<td>Enrolled at end of spring semester</td>
<td>71%</td>
<td>83%</td>
<td></td>
</tr>
<tr>
<td>Returning for 3rd semester</td>
<td>53%</td>
<td>81%</td>
<td></td>
</tr>
</tbody>
</table>

The University of Michigan provides the Blavin scholarship to foster youth. During FY 2009, DHS collaborated with the University of Michigan to improve the Blavin Scholarship Program for foster youth. The number of students awarded the scholarship increased from five in 2008 to
eleven in the 2010-2011 school year. It is expected that the program will have 13 students in the fall 2011 semester.

Ferris State University developed the Ferris Youth Initiative that assists former foster youth obtaining a college education by providing support and learning opportunities to promote academic success. The program includes a financial scholarship of $4,000 per year, an academic mentor and supportive services to give students assistance navigating the college experience. Current funding allows for a maximum of 20 students, although Ferris anticipates that will increase in the future.

The Ferris Youth Initiative hosted an event, “Day of Dialogue” on August 3, 2011. They invited other post-secondary institutions, representatives from local DHS offices, the HEYU unit, ETV staff and other stakeholders in the community to discuss how they can best serve foster youth that are attending college and what has worked so far.

Services Planned for FY 2012

**Goal:** Increase the number of post-secondary institutions offering assistance to foster youth.

DHS is working to bring one additional university on board by September 2011 to provide opportunities in higher education for foster youth.

**Objective:** DHS will work to bring one additional university on board by September 2012 to provide opportunities in higher education for foster youth.

**Status:** The number of post-secondary institutions providing services to foster youth in FY 2012.

Supportive Relationships with Mentors and Dedicated Adults

**AmeriCorps VISTA Volunteers**

Collaboration established with the Corporation for National and Community Service and several local DHS offices resulted in the placement of three AmeriCorps VISTA volunteers in three sites in FY 2010. The responsibilities of the VISTA members include developing mentor programs, community volunteer opportunities and skill training to obtain stable housing for foster youth.

**Accomplishments in FY 2010**

In FY 2010, local sites recruited, interviewed and selected the VISTA candidates. The selected AmeriCorps VISTA candidates began working with six DHS site locations.

**Services Planned for FY 2011 and 2012**

**Goal:** Develop mentoring programs, community volunteer opportunities and resources for stable housing for foster youth.

- Develop a mentor program in each of the three AmeriCorps VISTA sites.
- Develop community volunteer opportunities for foster youth.
- Assist in developing housing resources for foster youth.
Status:
- The number of mentors recruited and matched with youth by April 2011.
- The number and type of volunteer activities that foster youth completed by April 2011.
- The number of youth provided housing resources by April 2011.

Supports and Services to Former Foster Care Youth

Michigan Youth Opportunities Initiative

The Michigan Youth Opportunities Initiative is a partnership between the Jim Casey Youth Opportunities Initiative and DHS. The program was created to improve outcomes for youth transitioning from foster care to adulthood. It supports youth in learning skills for financial literacy, opening and saving in bank accounts, expanding their financial resources, which includes each youth having a personal savings accounts and an individual development account.

As Michigan completes the sixth year of the program, it is more reliant on Chafee for funding the program to support account matching and local expenditures. Chafee funds support youth boards and stipend payments for specific activities; individual development account matches for Chafee eligible purchases, asset and media skills training and the annual statewide the Michigan Youth Opportunities Initiative coordinator meetings.

The Michigan Youth Opportunities Initiative has had four implementation phases. In FY 2010, the fourth phase focused on the remaining non-MYOI urban and larger counties and the Upper Peninsula pilot sites.

<table>
<thead>
<tr>
<th>Michigan Youth Opportunities Initiative Sites</th>
<th>Youth Enrolled</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Sites</td>
<td></td>
</tr>
<tr>
<td>Phase One Sites - 2002</td>
<td></td>
</tr>
<tr>
<td>Wayne</td>
<td>130</td>
</tr>
<tr>
<td>Northern (Grand Traverse/Leelanau, Emmet/Charlevoix, Antrim/Kalkaska, Wexford/Missaukee, Benzie/Manistee)</td>
<td>80</td>
</tr>
<tr>
<td>Phase Two Sites - 2004</td>
<td></td>
</tr>
<tr>
<td>Bay/Arenac</td>
<td>37</td>
</tr>
<tr>
<td>Livingston/Shiawassee</td>
<td>13</td>
</tr>
<tr>
<td>Macomb</td>
<td>40</td>
</tr>
<tr>
<td>Saginaw</td>
<td>16</td>
</tr>
<tr>
<td>Washtenaw</td>
<td>10</td>
</tr>
<tr>
<td>Phase Three Sites - 2006</td>
<td></td>
</tr>
<tr>
<td>Alpena/Presque Isle</td>
<td>12</td>
</tr>
<tr>
<td>Crawford/Otsego</td>
<td>9</td>
</tr>
<tr>
<td>Genesee</td>
<td>23</td>
</tr>
<tr>
<td>Kent</td>
<td>21</td>
</tr>
<tr>
<td>Michigan Youth Opportunities Initiative Sites - Continued</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>County Sites</td>
<td>Youth Enrolled</td>
</tr>
<tr>
<td>---------------</td>
<td>----------------</td>
</tr>
<tr>
<td>Mecosta/Osceola</td>
<td>20</td>
</tr>
<tr>
<td>Midland/Isabella</td>
<td>17</td>
</tr>
<tr>
<td>Ogemaw/Roscommon</td>
<td>8</td>
</tr>
<tr>
<td>Ottawa</td>
<td>9</td>
</tr>
<tr>
<td><strong>Phase Four – Chafee Expansion - 2010</strong></td>
<td></td>
</tr>
<tr>
<td>Barry/Eaton</td>
<td>0</td>
</tr>
<tr>
<td>Chippewa/Luce</td>
<td>9</td>
</tr>
<tr>
<td>Gogebic/Ontonagon</td>
<td>40</td>
</tr>
<tr>
<td>Ingham</td>
<td>2</td>
</tr>
<tr>
<td>Kalamazoo</td>
<td>7</td>
</tr>
<tr>
<td>Marquette</td>
<td>0</td>
</tr>
<tr>
<td>Oakland</td>
<td>13</td>
</tr>
<tr>
<td>St. Clair</td>
<td>17</td>
</tr>
</tbody>
</table>

**Accomplishments in FY 2010**

Each site records activities through a quarterly report to DHS. Activities include youth boards, outreach events, fundraisers, presentations and community board meetings. In FY 2010:

- 298 youth board meetings were held, with 2,626 youth attending.
- 107 outreach events and presentations took place, with 538 participants.
- 9 fundraising events were held.
- 22 community partner board meetings were held.
- $19,218 was raised through cash or in-kind donations from community partners.

**Accomplishments in FY 2011**

Each MYOI site records activities through a quarterly report, which is submitted to the HEYU. Activities include youth boards, outreach events, fundraisers, presentations and community board meetings. Data will be available at the end of the fiscal year.

The annual statewide MYOI coordinator meetings were held on February 1, 2011 and August 16, 2011. The HEYU analyst facilitates the meetings, which focus on self-evaluation, fundraising, MYOI sustainability, budgets, reporting documentation and best practices in program and youth development.

MYOI continued its fund development strategies to assist in serving older youth including, the creation of a webpage, participation in donation sites such as www.artfulvision.org and specific grocery store reward programs.

**Youth Specific Supports**

510 youth had individual development accounts at the end of FY 2010. The accumulated savings totaled $193,068.
Services Planned for FY 2011

Goal: Increase the opportunities for youth to participate in youth boards by:

- Increasing the number of community partners in each site.
- Increasing the number of youth participating in youth boards.

Status:

- The number of community partners added by September 2011.
- The number of youth participating in youth boards by September 2011.

Services Planned for FY 2012

Goal: Expand MYOI to Clinton and Gratiot counties.

Objectives/Measures:

- Determine the staffing needed in Clinton/Gratiot.
- Train new staff on implementation.
- Develop infrastructure to fully implement MYOI including, bank partner, local community partners and outreach strategies for case workers and youth.
- At least one staff will be identified as the MYOI Coordinator.
- The bank partner will be determined and set-up for implementing MYOI-IDAs.
- At least 10 youth will begin the orientation and enrollment process.

Housing Resources

DHS is committed to ensuring that youth transitioning from the foster care system have safe and affordable housing. To reach this goal, the department is developing diverse opportunities for housing, including:

- Federal funding options through grant applications to the Department of Housing and Urban Development.
- Revising contracts to expand housing options through the Homeless Youth and Runaway programs and referring youth to the Michigan State Housing Development Authority Tenant Based Rental Assistance program.

DHS is developing alliances with land banks and developers while mobilizing the community through local partnerships. The AmeriCorps VISTA volunteers support these efforts in an effort to provide stability for youth transitioning from foster care.

Accomplishments in FY 2010

The Homeless Youth and Runaway (HYR) program contracts reported 21.7 percent (124) of the 572 homeless youth served were foster youth. This represents an increase of nearly 7 percent.

DHS developed partnerships with the faith-based community in Genesee County to initiate a housing pilot for transitioning foster youth. Youth are provided mentors from churches, attend landlord/tenant training prior to tenancy and must volunteer for a community project. In March 2010, six youth were selected, trained in landlord/tenant responsibilities and placed in housing.
A Kent County program was modeled after the Genesee pilot, where youth pay $250 to $275 in monthly rent if they attend landlord/tenant training and agree to work with a community mentor who lives in the community where the home or apartment is located. Property owners were willing to reduce monthly rent amounts, knowing that participating youth were more likely to be responsible renters given training and support.

**Services Planned for FY 2012**

**Goal:** Increase safe affordable housing options and supportive services for former foster youth ages 18 to 21.

- Ensure 25 percent of the youth served in the transitional living placements in 2010 and 2011 are former foster youth or homeless due to a dissolved adoption or guardianship.
- Increase the number housed in the Genesee pilot to 10.
- Expand the housing resource pilot to Kent County by October 2011.

**Status:**

- The number and percentage provided housing in the transitional living program.
- The number housed in the Genesee County housing project.
- The number of housing resource pilots initiated.

**Foster Care Transitional Medicaid**

DHS provides a Foster Care Transitional Medicaid brochure to private and public agency caseworkers for distribution to youth prior to their exit from the child welfare system.

**Accomplishments for FY 2010**

DHS collects data on a bi-annual basis on the number of youth eligible and enrolled. The statewide implementation of the Bridges provided the platform for automatic enrollment for youth aging out of the foster care system at ages 18 through 20. On April 13, 2010, 677 youth were active, a significant increase from the 94 enrolled in March 2009.

**Services Planned for FY 2012**

**Goal:** Increase the number of youth transitioning from foster care who are enrolled in Foster Care Transitional Medicaid and distribute informational stickers to DHS, private agency and workers across the state.

**Status:**

- Number of youth enrolled in during FY 2011.
- Number of informational stickers distributed.

**Report of Activities that Enhanced Service Collaboration**

**Teen Pregnancy**

Michigan departments of Education, Community Health and Human Services developed a state team to reduce teen pregnancy. The team developed the Michigan Foster Care Youth Health Behavior Survey to obtain statistical information on foster youth sexual behavior, to provide
information to reduce teen pregnancy in foster youth, to obtain statistical information on the prevalence of pregnancy in foster youth and the number of foster youth who have children. The survey will resume in the fall of 2011.

**Services Planned for FY 2011**

**Goal:** Reduce teen pregnancy in Michigan’s foster youth population. DHS will implement the Michigan Foster Youth Health Behavior Survey.

**Status:**
- The number of foster youth taking the survey.
- Baseline data collected on the number of pregnant or parenting foster youth.

**Technical Assistance Provided to Counties and Local and Regional Entities**

**Youth Service Delivery Model**

DHS provided training in the permanency teaming model for staff and for new Michigan Youth Opportunities Initiative coordinators. The trainings are listed below:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date I</th>
<th>Date II</th>
<th>Location</th>
<th>DHS</th>
<th>Contract Agency</th>
<th>Youth</th>
</tr>
</thead>
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<td>10/13/09</td>
<td>10/14/09</td>
<td>Gaylord</td>
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<td>2/4/10</td>
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<td>3/3/10</td>
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<td>5</td>
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<td>3/31/10</td>
<td>Marquette</td>
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<td>8</td>
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<td>4/15/10</td>
<td>Isabella</td>
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<td>1</td>
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<td>9/10/10</td>
<td>Macomb</td>
<td>40</td>
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<td>0</td>
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<td>9/30/10</td>
<td>Cheboygan</td>
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<td>Lansing</td>
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<tr>
<td>MYOI Training</td>
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<td>Escanaba</td>
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<td>2</td>
<td></td>
</tr>
<tr>
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<td></td>
<td>Oakland</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MYOI Training</td>
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<td></td>
<td>Traverse City</td>
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</table>
Accomplishments FY 2011
DHS provided training in the permanency teaming model for staff and for new MYOI coordinators. The trainings are listed below.

<table>
<thead>
<tr>
<th>Training Type</th>
<th>Date</th>
<th>Location</th>
<th>Count</th>
<th>Phase</th>
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<tr>
<td>Permanency Teaming: Train the Trainer</td>
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<td>Gaylord</td>
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<td>1</td>
</tr>
<tr>
<td>MYOI Training</td>
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<td>Lansing</td>
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<td>2</td>
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<td>MYOI Training</td>
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<td>MYOI Training</td>
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<tr>
<td>MYOI Training</td>
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<tr>
<td>MYOI Training</td>
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<td>2</td>
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<tr>
<td>MYOI Training</td>
<td>6/14/11</td>
<td>Ingham</td>
<td>3</td>
<td></td>
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</tbody>
</table>

Training planned for FY 2011
Goal: Increase the number of DHS and private agency staff trained in the Youth Services Delivery Model by:

- Increasing the number of staff trained in current sites.
- Training three new sites in the permanency teaming model.

Status:

- Phase 5 sites are identified by April 2011.
- Phase 5 sites’ DHS and private child placing agency staff are trained in permanency teaming by September 2011.

Educational Opportunities

Accomplishments for FY 2010 and 2011
The education analyst conducted 14 presentations and trainings during FY 2010. As of June 30, 2011, thirteen trainings were completed for the year. The training focuses on accessing Chafee funds and Education and Training Vouchers to support foster youth.

Training planned for FY 2012
Goal: Increase the awareness of child welfare staff about post-secondary educational opportunities and funding through:

- Training scheduled in Lansing, Grand Rapids and Mackinac Island.
- The education analyst will provide training as requested to DHS offices, private agencies or other community partners.
Status:
- The number of trainings completed by June 30, 2011: fourteen training were completed in FY 2010 and thus far, 13 have been completed in FY 2011.
- The number of trainings completed by May 1, 2012.

Statewide Training for Youth
Accomplishments for FY 2010
- In FY 2010, Michigan Youth Opportunities Initiative provided 59 financial literacy trainings for 306 participants with an additional 100 asset trainings to 809 participants.
- Two youth media trainings were held April 1 and 6, 2011. Nineteen youth attended.

Training planned for FY 2011
Goal: Ensure youth are provided training that supports their transition to adulthood by increasing the number receiving media training and training that supports self-sufficiency.
Status:
- The number of media trainings provided by September 2011.
- The number participating in media trainings by September 2011.
- The number participating in asset training.

Services Planned for FY 2012
MYOI training will continue in Clinton/Gratiot and in sites that have coordinator transition.

Youth Involvement in Improving Statewide Services
The Fostering Connections legislation required a new 90-day discharge meeting for youth transitioning from foster care. Staff developed a transition meeting form with input from stakeholders.

Accomplishments in FY 2010 and FY 2011
In FY 2010, two transitioned foster youth reviewed and provided feedback on the 90-Day Discharge and Annual Transition Meeting forms. The policy and forms are now complete, requiring meetings for youth after their 16th birthday.

As part of Michigan’s efforts to improve the rate of monthly caseworker visitation, DHS produced a video of youth who spoke about their relationships with their caseworkers and how caseworker visitation improved case plans and outcomes. Michigan also presented a one-day conference on family engagement that featured a panel of former foster youth who shared information on effective engagement through caseworker/child visitation.

Youth Participation Planned for FY 2011
Goal: Youth are actively involved in the planning and implementation of the Fostering Connections legislation. DHS will implement a media campaign and youth will educate other youth in foster care, caseworkers, courts and other stakeholders on the importance of permanency and the extension of foster care to age 21.
Status: The media campaign will be implemented once legislation extending foster care to 21 is passed.

Youth Participation in Improving Foster Care

Accomplishments in FY 2010

One hundred forty-five Michigan Youth Opportunities Initiative youth presented at 45 conferences throughout the state to DHS and private agency staff, the Child Welfare Training Institute, PRIDE, Rotary Clubs, colleges, non-profit groups and other community organizations. Youth involvement during the year included:

- Genesee and Macomb county youth addressed the importance of the teaming process to the DHS and private child placing agency staff.
- Presentations to educators on the importance of providing post-secondary opportunities for former foster youth such as the WMU Seita Scholars program.
- Presentations to foster and adoptive parents during the Michigan Association for Adoptive, Foster and Kinship conference.
- Participation in youth panels during Child Welfare Training Institute foster care worker training for DHS and private child placing agency staff.
- Presentation by one Seita scholar during the DHS media event on March 8, 2010.
- The statewide youth board met December 10, 2010, and provided feedback on fundraising extension of foster care until age 21.

Youth Participation Planned for FY 2011

Goals: Foster youth are involved in developing practices, policies and procedures to improve child welfare. The Statewide Youth Board will continue to meet biannually to discuss policy reviews and proposals, local youth training curriculum, or other issues they choose. The annual *Youth Voice* publication will be shared with DHS staff, leadership and legislature. The youth advisory committee will develop the foster care handbook for youth.

Status:

- The *Youth Voice* was shared in March 2011.
- The second statewide youth board will meet by August 2011.
- The foster care handbook will be completed by September 2011.
- Lesbian/Gay/Bisexual/Transgender brochures will be completed by September 2011.

Accomplishments in FY 2011

The *Youth Voice* document was shared statewide and posted on the website. The statewide youth board meeting was held on December 22, 2011 with 19 youth and 11 staff in attendance. Youth provided feedback on the extension of foster care to 21 and on program changes within MYOI. They also participated in a focus group on sexual health education availability for youth in foster care. A statewide youth board representative wrote an editorial for the Detroit News on the Fostering Connections bills, which was published in August. In addition, the foster care handbook was completed and made available on the websites. Two youth media trainings were held on April 1, 2011 and April 6, 2011. Nineteen youth attended the trainings with 14 staff.
Services Planned for FY 2012

Goal: Ensure youth are provided training designed to support their transition to adulthood.

Objective:
- Increase the number of youth receiving media training.
- Increase the number of youth involved in trainings to support their self-sufficiency.

Status:
- The number of media trainings provided to youth by September 2011.
- The number of youth participating in media trainings by September 2011.
- The number of youth participating in asset training.

Goal: Foster youth are involved in developing practices, policies and procedures to improve child welfare.

Status: The Statewide Youth Board will continue to meet bi-annually. The agenda topics that may include policy reviews and proposals, local youth training curriculum or other issues the youth want to address.
- The statewide youth boards will be held in spring and summer.
- The youth boards will be involved in outreach for the National Youth In Transition Database.

Michigan's Progress in Developing and Implementing a Foster Care Trust Fund

Public Act 525 of 2008 created the State Foster Care Advisory Board in DHS to administer the Foster Care Trust Fund. Funds may not be spent or appropriated from the trust fund until the amount credited meets or exceeds $800,000. The board is required to work collaboratively with private and public foster care programs to identify and address the problems facing children in the foster care system, raise awareness of foster care and develop a support network for youth.

Accomplishments in FY 2010

The act amends the Michigan Income Tax Act to permit an individual to designate a contribution to the Foster Care Trust Fund on their annual Michigan income tax form.

Activities Planned for FY 2011

Goals: Establish a foster care trust fund program for youth receiving independent living services for transition assistance. When established, DHS will ensure a former foster youth is placed on the Foster Care Trust Fund Board. The target date for this is uncertain; DHS cannot predict when sufficient funding will be available to establish the board.

Status: DHS has identified two former foster youth as potential board members.

Coordination/Consultation with Michigan's Federally Recognized Native American Tribes

DHS has relationships with Michigan’s 12 federally recognized tribes to ensure tribal youth have access to Education and Training Vouchers and Chafee funds. DHS invited tribal partners to
meet regarding access of tribal youth and to identify tribal interest in sharing and administering a portion of the state’s federal allotment.

Technical Assistance Provided to Counties and Local and Regional Entities

- Youth Services has attended Tribal State Partnership meetings since July 2010.
- DHS will consult with two or more tribes.
- Three tribes are participating on the subcommittee that is developing a plan.
- Tribal partners will identify how DHS can support access to services for foster youth.
- Tribal partners will help develop policy and procedures for youth to access services.
- Identify tribal partners to administer programs, if not through central office.

Accomplishments in FY 2010

Staff collaborated with the Native American Affairs director to ensure Michigan’s tribes have the opportunity to contribute to policy changes for Chafee funding and receive ongoing communication on service opportunities and Indian Child Welfare Act compliance. In FY 2010, staff participated in the Tribal Training Day and provided resources to tribal youth. Staff now attend Tribal State Partnership quarterly meetings and made a presentation at the July 2010 meeting. At the January 2011 meeting, a Youth in Transition subcommittee was formed to develop the process for tribal youth to access funding. A total amount of $20,000 is being set aside from state Chafee YIT funds for tribal youth that are supervised by tribal court only. The youth will access this funding through the HEYU. A Memorandum of Understanding will be developed between DHS and each tribe.

Services Planned for FY 2012

Goal: Youth from Michigan’s 12 federally-recognized tribes will receive the same services and benefits afforded all foster youth.
- Youth Services will determine how many tribal youth are eligible. HEYU was told that the number of tribal youth supervised by tribal court should not be more than 15.
- A decision will be made for how tribal youth will access services by October 1, 2011. $20,000 of YIT funding will be kept and administered by the YIT analyst.
- Tribal partners will help develop policy, processes and procedures for tribal youth to access services by October 1, 2011.
- Staff will identify tribal partners to administer programs if not administered through central office.
- Staff will invite the 12 federated tribes in Michigan to participate in a presentation on the services and funding available to tribal youth. In December 2010, an invitation was sent to tribes by DHS Native American Affairs.

Status:
- The number of quarterly Tribal State Partnership meetings attended.
- Policy and practice changes implemented as a result of tribal consultation.
- The number of tribal youth receiving vouchers and Chafee funds.
- Education and Training Voucher and Youth in Transition policy reflect tribal input.
ADOPTION

In FY 2010, Michigan achieved fewer adoptions compared to FY 2009 due to there being 492 fewer children with a goal of adoption. This resulted in 418 fewer adoptions in FY 2010. There is a consistent trend over the past 10 years; completed adoptions in Michigan have remained in the range of 2,500 to 3,000 from 2001 to FY 2010.

<table>
<thead>
<tr>
<th>Year</th>
<th>Total State Wards</th>
<th>Wards Goal Adoption</th>
<th>Annual Adoption</th>
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<td>09/01</td>
<td>5,911</td>
<td>4,328</td>
<td>2,927</td>
</tr>
<tr>
<td>09/02</td>
<td>6,248</td>
<td>4,615</td>
<td>2,833</td>
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<td>09/03</td>
<td>6,347</td>
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<td>6,227</td>
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<td>09/06</td>
<td>6,292</td>
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<td>6,172</td>
<td>4,264</td>
<td>2,602</td>
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<td>6,019</td>
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<td>2,722</td>
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<td>09/09</td>
<td>5,272</td>
<td>3,690</td>
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<td>2,612</td>
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</tbody>
</table>
Technical Assistance Provided to Counties and Local and Regional Entities
DHS convened the sixth Permanency Forum in October 2010 and it included reports from the 23 counties. Counties reviewed progress toward improving all areas of permanency and their progress on the backlog cohorts. Speakers presented information on:

- Creative funding.
- Recruitment.
- Planning and local initiatives.
- Extending foster care to age 20 in Michigan.

CFSR Program Improvement Plan Goal
DHS worked to improve timeliness to adoptions for children with a goal of adoption. In 2010, approximately 85 percent of adoption cases were transferred to private agencies for supervision. DHS continues to supervise some adoption cases directly, so partnership and collaboration remain essential in meeting the adoption goals.

Goals:

- Make timely referrals to private agencies to initiate adoption specific services and complete the adoption in less than 12 months.
- Review cases identified as children living with an adoptive resource family for over six months from termination of parental rights without an order of adoption placement.
- Review recruitment plans for children without an identified adoption resource family at termination to ensure an appropriate recruitment strategy is in place.
- Conduct reviews for children with a goal of adoption for six months from the termination without an identified adoptive resource.
- Provide technical assistance by a contracted expert for any case in which a child has been available for adoption for a year from termination without an identified family.
- Incorporate policy changes into the new worker training curriculum.
- Develop and distribute semi-annually a state level analysis of:
  - The number of children without an adoptive resource at the beginning of the period.
  - The number of children who had an adoptive resource at the end of the period.
  - The number of cases reviewed.
- Outcomes and barriers to identifying adoptive resources or achieving adoption resulting in recommended actions to improve timeliness.
- Provide the semi-annual report to the Permanency Options Work Group.
- Review and revise adoptive parent recruitment strategies at state and local levels based on the semi-annual report.
- Assess and report on the work of the permanency resource managers regarding children in their county whose goal is adoption and who do not have an identified family within six months of termination of parental rights.
Status:
- Collect data on the length of time from termination to referral to a private agency by county through the review of transfer forms sent to DHS central office.
- Document reviews of children on “hold” status with an identified adoption resource family by agency and determine the barriers.
- Collect data on individual recruitment plans submitted to Michigan Adoption Resource Exchange (MARE) by agencies and approved or returned for additional efforts.
- Document case exploration meetings held by permanency resource managers, the task assigned and the eventual outcomes.
- Collect data on individual status and composites of average and median time from termination to finalization in each county.
- Develop a “toolkit” of best practice recruitment strategies information.

Adoption Policy/Program Improvements
To improve timeliness to adoption, adoption policy was revised effective December 1, 2010 that includes:
- Referral to adoption services must occur within five working days from the date of receipt of the order terminating parental rights
- Acceptance of the case by the private agency must be received by DHS within seven working days from the date the referral was received by the agency.
- An adoption worker must be assigned within three working days of case acceptance, and adoption activities must begin.
- If a child does not have an identified adoptive family, the adoption worker must submit a written child-specific recruitment plan and the MARE registration for photo listing of the child to MARE within 30 calendar days of case acceptance.
- A child specific recruitment plan template was finalized in October of 2010.
- If a child does have an identified adoptive family, the adoption worker must obtain a signed DHS 4809, Intent to Adopt form, signed by the prospective adoptive parent(s) within four working days of case assignment.
- If the child is not being adopted by a licensed foster care provider, the adoption worker must initiate evaluation of the prospective adoptive home within seven calendar days of the acceptance date of the referral or identification of the adoptive family, whichever is later. The BCAL 3130, Initial Foster Home/Adoptive Evaluation must be completed within 90 calendar days from the date of assignment of the case.
- If the child is being adopted by a licensed foster care provider who has a previously approved BCAL 3130, the DHS-612, Adoptive Family Assessment Addendum, must be completed within 30 calendar days.
- The Child Adoption Assessment must be completed within 45 calendar days of acceptance.

To assist counties with achieving timely adoptions, the Adoption Alert Report was published in January 2011 that lists all children legally free for adoption. The message is displayed on the
reports as a reminder that a review of the case is required when a child is in adoption status at three months with no identified family. Additional case reviews are required at six and twelve months if the child still does not have an identified family. In counties where there is a permanency resource manager, they monitor these cases and conduct the adoption reviews.

On August 1, 2010, a contract was awarded to Adoption Resource Consultants to provide services to Genesee, Oakland and Wayne counties. The consultants conduct additional case reviews for children beginning the 12-month timeframe without an identified adoptive family.

**DHS Collaboration and Partnerships: Adoption Oversight Committee**

The committee:
- Examines adoption services in Michigan.
- Makes recommendations for improvements.
- Develops action plans to increase the number of child welfare adoptions.

The work of the Adoption Oversight Committee has been instrumental in the following areas:
- Review of pre-adoption training requirements.
- Development of a court protocol for post-termination review hearings.
- Surveys for parents, caseworkers and youth involved in disrupted/dissolved adoptions.
- Research and presentation of national post-adoption models.
- Provision of input and recommendations on policy changes.

**Permanency Options Work Group**

In 2006, Michigan established the Permanency Options Work Group. Its meetings in 2010 focused on:
- Extending jurisdiction to age 20.
- Waiving tuition for in-state college for foster youth.
- Reinstatement of parental rights.
- Open adoptions.
- Federal Adoption and Safe Families Act law (requiring an agency to file a termination petition for any child in care for 15 out of the most recent 22 months, unless certain exceptions apply).

**Adoption Day**

Twenty-nine county courts participated in Adoption Day in 2010, a day when courts finalize many adoptions. During the six years in which Michigan has celebrated Adoption Day, more than 16,000 children have been placed into adoptive homes from foster care.

**Goals:** Continue strong partnerships and collaboration to improve policy and practice leading to increased adoptions from foster care. Continue collaboration between the DHS Adoption Program, State Court Administrative Office, the Adoption Oversight Committee and other stakeholders to improve practice, expand recruitment and address the needs of children in
need of a permanent home. Involve adoptive parents, foster parents and youth in decisions made on policy and practice.

**Status:**
- Number of policy and statute changes resulting from work groups and committees.
- Membership of resource parents and youth on work groups and teams.

**Michigan Adoption Resource Exchange (MARE)**
MARE is an information and referral service contracted by DHS to facilitate finding permanent homes for children that:
- Produces recruitment and service brochures.
- Maintains a website of children available for adoption.
- Helps communities develop adoption recruitment activities.
- Produces quarterly newsletters for professionals, parents and children.

One of MARE’s recruitment activities is the Michigan Heart Gallery, a traveling photographic and audio exhibit created to find families for children in foster care. A Heart Gallery Opening is scheduled each year to launch the new photo display. This year’s event held March 26, 2011 in Detroit attracted 171 attendees who registered and returned information cards, and 64 families who registered at the event. The Heart Gallery exhibit is displayed in many communities throughout the year and at special events and conferences.

MARE has developed a youth advisory board through the Michigan Youth Opportunities boards across the state. The youth inform and influence adoption services in Michigan.

**ADOPTION INCENTIVE FUNDS**

Michigan received $3,511,033 to be expended by December 31, 2012. Contracts have been awarded for the following services:
- **Adoptive Parent Consultants** - This contract was awarded to Adoptive Family Support Network in Kent County, experienced adoptive parents who serve as peer mentors and trainers to pre-adoptive and adoptive parents.
- **Adoption Resource Consultants** - This contract was awarded to Orchards Children’s Services in Oakland County to provide enhanced oversight and case planning for children and youth with terminated parental rights for over one year without a family identified.
- **Adoptive Parent Training** - This contract was awarded to Michigan State University School of Social Work to provide adoption-specific training and support to parents who are adopting or have adopted a child from the child welfare system.
Permanency staff is developing contract proposals for the development of:
- Additional adoptive parent consultant contracts throughout the state.
- Extreme recruitment contract to locate kin resources for youth in need of an adoptive family.
- An adoptive parent handbook.
- Contracts with private agencies to provide regional post adoption services.
- An interagency agreement between DHS and the Department of Community Health/Community Mental Health for pre- and post-adoption therapy assessments.
- Two statewide adoption conferences with national experts for adoption staff, court staff, youth and adoptive parents.
- Other adoption specific activities allowable under titles IV-B and IV-E of the Social Security Act.

Adoption Subsidy
The DHS Adoption Subsidy program provides financial support and/or medical subsidy to adoptive families to help children adopted from Michigan's foster care program or eligible for supplemental security income. DHS policy effective March 1, 2011 clarified the administrative hearing process regarding adoption support subsidy, medical subsidy and nonrecurring adoption expenses.

In 2009, a Leadership Academy team reviewed the medical subsidy residential treatment policies and made recommendations to the department for changes. A work group reviewed the medical subsidy program and draft policy was developed. An adoptive parent handbook has also been drafted.

Goal: Review and determine changes needed in the medical subsidy program to assist families who have adopted children from foster care with special needs.

Status:
- Permanency staff will finalize policy and form changes by December 31, 2011.
- The Permanency Unit staff will distribute the adoptive parent handbook to adoptive parents by December 31, 2011.

Permanency Planning
Michigan is reducing the number of children awaiting reunification, adoption or guardianship for over one year. The children awaiting permanency include:
- Temporary court wards, children with a goal of reunification who were in care for more than a year as of January 1, 2009.
- Permanent state wards, children who were “legally free” for adoption for more than one year, as of January 1, 2009.
Progress in Permanency for Temporary Court Wards Cohorts
The goal for FY 2010 was to achieve 85 percent closure in the temporary court wards permanency backlog cohort. Michigan had a 77.8 percent closure rate or 3,905 cases as of September 30, 2010, and had an 84 percent closure rate or 4,214 cases as of March 31, 2011. The goal is to achieve 100 percent closure by September 30, 2011. It is important to note that if permanency is achieved for the remaining open temporary court wards cohort cases, the closures due to permanency can only reach 96 percent.

Progress in Permanency for Permanent Court Wards Cohort
The goal for FY 2010 was also to achieve 85 percent closure in the permanent state wards permanency backlog cohort. Michigan had a closure rate of 63.6 percent or 2,785 cases as of September 30, 2010 and a closure rate of 70.5 percent or 3,083 cases as of March 31, 2011. The goal is to achieve 100 percent closure by September 30, 2011. It is important to note that if permanency is achieved for the remaining open cohort cases, the closures due to permanency can only reach 71 percent.

Data collection and analysis has been critical in developing strategies to address the permanency needs of the children in the cohorts. To support local efforts to achieve permanency, several efforts were undertaken, including:
- Monthly sharing of cohort data with the State Court Administrative Office for distribution to the local courts.
- Distributing a spreadsheet of remaining open cases itemized by county and district in each cohort group to the county directors each month as of January 2011. Beginning in June 2011, the spreadsheets will be updated and sent to the county directors weekly.
- Distributing cohort data to 23 county teams participating in the Permanency Forums, which led to the collection of information from local courts about barriers to permanency.
- Continued development and enhancement of DHS web-based reporting, updated daily on DHS’ internal data management system (InfoView). Local office staff readily access InfoView and can provide updates to private agency staff.

Goal: DHS will achieve legal permanency for children in the two cohorts by the following dates:
One hundred percent by October 2011. (Refer to section above.)

Status:
- Data on the permanency resource manager reviews of cohort cases in the 15 largest counties, the tasks assigned and eventual outcomes.
- Monthly cohort data reports provided to counties and courts.

Permanency Planning Assistants and Permanency Planning Specialists
As planned, these positions have been eliminated. Foster care and adoption workers, managers and supervisors are required to review and develop permanency strategies for foster youth. Foster care and adoption workers have taken on the responsibilities to ensure that permanency is achieved on all foster care cases. In counties in which there is a permanency resource
manager s/he assists staff in mining files, talking with youth about important people in their lives, setting up and facilitating meetings to focus on identifying a supportive permanent placement or resource and assisting staff in completing permanency paperwork. Through March 31, 2011:

**Temporary Court Ward Backlog Cohort**

<table>
<thead>
<tr>
<th>County Name</th>
<th>Total Baseline</th>
<th>Open Cases</th>
<th>Open Cases %</th>
<th>Closed Cases</th>
<th>Closed Cases %</th>
</tr>
</thead>
<tbody>
<tr>
<td>GENESEE</td>
<td>360</td>
<td>52</td>
<td>14.4%</td>
<td>308</td>
<td>85.6%</td>
</tr>
<tr>
<td>KENT</td>
<td>275</td>
<td>43</td>
<td>15.6%</td>
<td>232</td>
<td>84.4%</td>
</tr>
<tr>
<td>INGHAM</td>
<td>112</td>
<td>20</td>
<td>17.9%</td>
<td>92</td>
<td>82.1%</td>
</tr>
<tr>
<td>MACOMB</td>
<td>272</td>
<td>13</td>
<td>4.8%</td>
<td>259</td>
<td>95.2%</td>
</tr>
<tr>
<td>OAKLAND</td>
<td>529</td>
<td>43</td>
<td>8.1%</td>
<td>486</td>
<td>91.9%</td>
</tr>
<tr>
<td>WAYNE</td>
<td>2007</td>
<td>457</td>
<td>22.8%</td>
<td>1550</td>
<td>77.2%</td>
</tr>
<tr>
<td>URBANS</td>
<td>3555</td>
<td>628</td>
<td>18%</td>
<td>2927</td>
<td>82%</td>
</tr>
<tr>
<td>STATEWIDE</td>
<td>5017</td>
<td>803</td>
<td>16%</td>
<td>4214</td>
<td>84%</td>
</tr>
</tbody>
</table>

**Terminated Parental Rights Court Ward Backlog Cohort**

<table>
<thead>
<tr>
<th>County Name</th>
<th>Total Baseline</th>
<th>Open Cases</th>
<th>Open Cases %</th>
<th>Closed Cases</th>
<th>Closed Cases %</th>
</tr>
</thead>
<tbody>
<tr>
<td>GENESEE</td>
<td>416</td>
<td>135</td>
<td>32.5%</td>
<td>281</td>
<td>67.5%</td>
</tr>
<tr>
<td>INGHAM</td>
<td>185</td>
<td>33</td>
<td>17.8%</td>
<td>152</td>
<td>82.2%</td>
</tr>
<tr>
<td>KENT</td>
<td>158</td>
<td>34</td>
<td>21.5%</td>
<td>124</td>
<td>78.5%</td>
</tr>
<tr>
<td>MACOMB</td>
<td>287</td>
<td>62</td>
<td>21.6%</td>
<td>225</td>
<td>78.4%</td>
</tr>
<tr>
<td>OAKLAND</td>
<td>320</td>
<td>115</td>
<td>35.9%</td>
<td>205</td>
<td>64.1%</td>
</tr>
<tr>
<td>WAYNE</td>
<td>1533</td>
<td>566</td>
<td>36.9%</td>
<td>967</td>
<td>63.1%</td>
</tr>
<tr>
<td>URBANS</td>
<td>2899</td>
<td>945</td>
<td>33%</td>
<td>1954</td>
<td>67%</td>
</tr>
<tr>
<td>STATEWIDE</td>
<td>4376</td>
<td>1293</td>
<td>29.5%</td>
<td>3083</td>
<td>70.5%</td>
</tr>
</tbody>
</table>

Goals:
- Further develop and train staff on permanency.
- Utilize the permanency resource manager expertise to provide training and increased support to the foster care and adoption staff in developing best practices for permanency.

Status:
- Monthly leading to weekly backlog data reports demonstrating improved permanency outcomes.
- Permanency resource manager monthly reports of training and support of foster care and adoption staff.
**Permanency Resource Managers**

Permanency resource managers work closely with local DHS and private agency staff. They are assigned to counties based on the distribution of permanency backlog cohort cases to:

- Meet with foster care and adoption staff regularly to discuss case-specific and systemic barriers and gaps.
- Help determine resources and service needs.
- Offer expertise in community resources and new approaches to plan for children in the system for extended periods.
- Identify new strategies toward permanency with case managers.
- Help complete paperwork and reports related to permanency.
- Review spreadsheets of all open backlog cases with office managers monthly to ensure urgency to find permanency for these children.

**Counties Identified**

The Permanency Unit determined the 15 counties that are assigned one or more permanency resource managers because they had a higher percentage of open cases than the state average in either or both cohorts. There are six assigned to the residential cohort.

**Technical Assistance Provided to Counties and Local and Regional Entities**

Permanency resource managers help caseworkers develop narratives for the approval process and have conducted trainings for private agencies, DHS staff, residential staff and other stakeholders. They worked with management teams to develop and streamline internal processes and helped track and monitor progress. They help interpret new policies and consult with management teams to determine training needs for field staff.

In FY 2010, 85 percent of adoption cases were transferred to private agencies; therefore, DHS adoption workers and supervisors responsible for monitoring the adoption cases needed training on adoption policy and process. Permanency resource managers presented training on:

- Adoption policies.
- Child and family assessment templates and timeframes.
- SWSS requirements.
- Michigan Adoption Resource Exchange requirements.
- Individualized recruitment plans.
- Adoption subsidy.
- Court process.

**Case Exploration Meetings**

The permanency resource managers conduct “case exploration meetings” for children on the permanency backlog to determine if the appropriate permanency goals are in place and to prescribe services and actions required to secure the defined outcomes. Permanency staff conducted over 3,200 case explorations on the backlog cohort cases as of March 31, 2011.
There were approximately 2,000 follow-ups to the case explorations, which consisted of e-mail, telephone, case conferences and face-to-face contacts with the assigned workers/supervisors.

Additionally, the permanency resource managers began adoption case reviews on all cases in addition to backlog cases. This additional review focuses on those cases that are six months post-termination of parental rights without an identified adoptive family. They conduct adoption reviews to determine the recruitment efforts made and to discuss alternative methods of recruiting a family. Since beginning this process, they have conducted over 150 adoption reviews and made over 200 follow-up contacts. By October 2011, all DHS and private agency staff will conduct adoption case review meetings at defined intervals to address case-specific delays in adoption.

To assure youth aged 16 and older achieve permanency, the permanency resource managers attend transitional meetings for youth to ensure their permanency plans include the required components. They attended almost 100 transitional meetings that develop annual transition plans or discharge plans since beginning this process in late 2010.

**Residential Permanency Resource Managers**

Residential permanency resource managers achieve permanency for children in residential placement in both cohorts and ensure these children complete residential treatment and are discharged to step-down programs or returned to the community. The Residential Treatment and Transition Unit was re-structured in July 2010 and is responsible for:

- Developing a residential case practice model.
- Developing a service delivery model.
- Policy writing.
- Training development.
- Conducting case reviews of backlog cohort children in residential treatment.
- Conducting case reviews of children at risk of extended length of residential stays.
- Coordinating Residential Transition and Planning Managers, DHS and private agencies, central office and other state partners overseeing the Wayne County Residential Permanency Initiative.

**Residential Transition and Planning Managers**

In July 2010, four of the 26 permanency resource manager positions were allocated to the Residential Transition Treatment Unit to address the permanency, mental health and behavioral needs of children in the backlog cohort residing in residential placements, initially beginning with children in Wayne County. They work with local DHS staff to:

- Establish an appropriate permanency goal for each child.
- Review the residential placement.
- Work collaboratively with families, agencies and community providers to identify services and actions required to secure defined outcomes.
The Residential Transition Planning Managers may review the youth’s case files to gain an understanding of the child’s past and present medical, behavioral, mental health and social history. They may visit the residential facility and meet with residential staff and the child regarding the treatment plan.

**Wayne County Residential Permanency Initiative**
In April 2010, the unit spearheaded the Wayne County Residential Permanency Initiative to:
- Gather information regarding the current issues surrounding children in residential treatment.
- Determine when residential treatment is appropriate.
- Develop a residential case practice model.

**Target Population**
Twenty-seven cases were identified that include Wayne County backlog cohort children under the age 14 currently in residential treatment awaiting reunification or adoption. Comprehensive case file reviews were conducted and managers followed up with the residential facilities, treatment providers, related professionals and other interested parties.

**Goals:** Provide case review for youth in the foster care system for long periods. Through the review process, improve permanency outcomes for children and decrease the number of youth emancipating from the system without permanent connections by:
- Determine permanency strategies to ensure children and youth are provided with permanent homes or connections.
- Review cases of children in the identified cohorts.
- Determine permanency strategies, assign tasks and monitor the outcomes.
- Identify specific and system-wide gaps in services.
- Increase accountability in case management and adherence to policy.
- Collect and analyze data relating to county performance to track trends at the practice level and determine if technical assistance is needed in particular areas of the state.
- Provide technical assistance on identified barriers and issues.
- Assist in developing policy, outcome-based services and best practices.
- Verify data accuracy.
- Assure that children receive the level of care appropriate for their clinical needs.
- Develop a continuum of services that focuses residential treatment on therapeutic intervention.
- Develop a multi-disciplinary case practice approach.
- Develop a “gatekeeper” process for placement of children into residential treatment.
- Develop outcome based services and best practices.

**Status:** Documentation of:
- All case reviews.
- Goal changes.
- Tasks assigned.
• Gaps in services identified.
• Outcomes for all cases reviewed.
• The number of youth emancipating from care without approved permanency goals.
• Case reviews for children in residential placements.
• Treatment plans and discharge for residential placements.
• Published policy on the requirements for residential placements at all levels by September 2011.
• Training curriculum developed by September 2011.

**Gap Analysis**
Each county completed a gap analysis worksheet for each of the cases in the Temporary Court Ward and Termination of Parental Rights cohorts that detailed permanency barriers for that child or youth. The permanency resource managers continue to provide analysis on the gaps in services and other system issues that affect permanency as they review individual cases.

**Goal:** DHS will collect and synthesize the findings of the permanency resource managers to identify service gaps and system issues leading to policy revision and improved services by:
- Using managers’ monthly reports to define service gaps and barriers to permanency.
- Developing new services or system changes that address gaps and barriers identified.

**Status:**
- Permanency resource managers’ monthly activity reports and data.
- Documentation of new or revised policy, contracts and collaborations to address gaps.

**Michigan Permanency Goals**
DHS revised the Michigan permanency goals to align the state with federal permanency goals. Reunification remains the optimal goal; when returning home is not appropriate, permanency staff pursue adoption and guardianship. If permanency through the preferred goals is not possible, the caseworker may use the remaining permanency goals of permanent placement with a fit and willing relative and another planned permanent legal arrangement including emancipation. Permanency staff submitted over 962 permanency goal approvals through March 31, 2011. The following chart describes the types and disposition of permanency goals as of March 31, 2011:

<table>
<thead>
<tr>
<th>Relative</th>
<th>Another Planned Legal Arrangement</th>
<th>Emancipation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approved</td>
<td>163</td>
<td>116</td>
</tr>
<tr>
<td>In Process</td>
<td>17</td>
<td>16</td>
</tr>
<tr>
<td>Withdrawn</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Denied</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Closed</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Returned</td>
<td>13</td>
<td>17</td>
</tr>
<tr>
<td>Total Submitted</td>
<td>197</td>
<td>154</td>
</tr>
</tbody>
</table>
CFSR Program Improvement Goal: Review permanency goals for timeliness and appropriateness and:
- Monitor and provide technical assistance in cases where a child’s permanency goal does not meet the policy standards.
- Assure the permanency goal is updated in a timely manner upon approval of the updated service plan.
- Conduct a specialized worker and supervisory review of each child’s permanency planning goal commencing one year from the date of case acceptance to determine appropriateness of the goal and identify action steps.
- Submit the permanency goal request for relative, another legal arrangement and emancipation to central office approval to identify trends and barriers to achievement.

Status:
- Track permanency goals and exits through SWSS data.
- Review of permanency goals submitted for approval to ensure optimum outcomes.
- Maintain data on goals submitted and approved or denied by county.
- Summary report of trends, barriers and plans to address them.

Implementation of the Guardianship Assistance Program
The program went into effect July 1, 2009. It offers alternative permanency when reunification and adoption are not viable with a monthly subsidy equal to the foster care payment until the child reaches age 18. Guardianship may be especially favorable in the following circumstances:
- Relatives who want to maintain their current relative status.
- Older youth who will not consent to adoption after counseling on the importance of permanency.
- Families in certain cultures who do not approve of termination of parental rights.

The Permanency Unit anticipates that 1,500 children may find permanency this way. Many of the eligible children will be those who have had a goal of reunification or adoption but barriers or challenges have prevented permanency from occurring.

The number of requests submitted, approved and funded as of March 31, 2011:

<table>
<thead>
<tr>
<th>Submitted</th>
<th>Approved</th>
<th>Withdrawn</th>
<th>Funded</th>
<th>Closed</th>
</tr>
</thead>
<tbody>
<tr>
<td>424</td>
<td>229</td>
<td>53</td>
<td>150</td>
<td>09</td>
</tr>
</tbody>
</table>

Applications from foster parents and relatives as of March 31, 2011:

<table>
<thead>
<tr>
<th>Submitted</th>
<th>Relatives</th>
<th>Foster Parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>424</td>
<td>285</td>
<td>139</td>
</tr>
</tbody>
</table>
Technical Assistance Provided to Counties and Local and Regional Entities

Goal: Increase the number of children reaching permanency through guardianship with assistance by 10 percent each year by:
- Developing a Guardianship Alert to track all children in care with a goal of guardianship.
- Providing training to local agencies and courts.

Status:
The Permanency Unit will use the database to monitor guardianship activity for children who:
- Have been in care 18 months.
- Exited care with a finalized guardianship within 24 months of removal.
- Are in care longer than 24 months who have not reached permanency with a goal of guardianship.

Permanency Training
The Permanency Unit provides training and technical assistance to local DHS, private agency and the court staff on:
- Permanency issues and goals.
- Guardianship assistance program.
- Data on the permanency backlog cases.
- Policy and applicable forms clarification.

Grant Projects
Two private child-placing agencies received federal grants to develop programs that help older children maintain connections with birth families. Bethany Christian Services and Homes for Black Children disseminated the findings at the October 29, 2010 Permanency Forum. Oakland County DHS and Spaulding for Children received a $2 million federal grant to develop and pilot a best practice outreach model in Oakland, Macomb and Wayne counties.

Michigan CFSR Permanency Outcomes 2 and 3 Baseline Data
For FY 2010, DHS’ performance on Permanency Composite Two: Timeliness of Adoption was 111.0. The national standard is 106.4 or higher. Performance on the individual measures:

<table>
<thead>
<tr>
<th>Measure</th>
<th>Baseline FY 2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>C2-1: Exits to adoption in less than 24 months 75th Percentile = 36.6%</td>
<td></td>
<td>30.6%</td>
<td>34.8%</td>
<td>34.0%</td>
<td>33.6%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measure C2-2: Exits to adoption, median length of stay 25th Percentile = 27.3 months</td>
<td>29.5 months</td>
<td>28.7 months</td>
<td>29.1 months</td>
<td>29.2%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Measure C2-3: Children in care 17+ months, adopted by the end of the year
75th Percentile = 22.7%

<table>
<thead>
<tr>
<th>Year</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>23.7%</td>
<td>27.9%</td>
<td>28.8%</td>
<td>30.3%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Measure C2-4: Children in care 17+ months achieving legal freedom within 6 months
75th Percentile = 10.9%

<table>
<thead>
<tr>
<th>Year</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>11.8%</td>
<td>14%</td>
<td>16.4%</td>
<td>15.9%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Measure C2-5: Legally free children adopted in less than 12 months
75th Percentile = 53.7%

<table>
<thead>
<tr>
<th>Year</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>33.5%</td>
<td>38.7%</td>
<td>40.1%</td>
<td>41.0%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: DHS Data Warehouse

DHS’ overall performance continues to improve for Composite 2: Timeliness of Adoptions. Composite measures C2-3 and C2-4 improved and met the 75th percentiles. Composite measures C2-1 and C2-2 showed a slight decrease between FY 2009 and FY 2010 and did not meet the 75th and 25th percentiles. The measure C2-5, legally free children adopted in less than 12 months, showed a 1.4 percent improvement but there remains a need for a much higher improvement in this area.

For FY 2010, DHS’ performance on the Permanency Composite 3: Permanency for Children and Youth in Foster Care for Long Periods of Time was 124.4. The national standard is 121.7 or higher. Performance on the individual measures:

| Measure C3-1: Exits to permanency prior to 18th birthday for children in care for 24+ months
75th Percentile = 29.1% | Baseline FY 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>27.6%</td>
<td>31.4%</td>
<td>33.4%</td>
<td>35.3%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Measure C3-2: Exits to permanency for children with Termination of Parental Rights
75th Percentile = 98.0% | Baseline FY 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>96.4%</td>
<td>96.7%</td>
<td>96.8%</td>
<td>97.8%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Measure C3-3: Children emancipated who were in foster care for 3 years or more
25th Percentile = 37.5% | Baseline FY 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>48.7%</td>
<td>46%</td>
<td>48.8%</td>
<td>47.8%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: DHS Data Warehouse
Data Analysis
Based on the efforts described throughout this report, Michigan continues to increase performance outcomes on Composite 3: Permanency for Children and Youth in Care for Long Periods of Time. All composite measures improved, demonstrating continued effective efforts. C3-1 and C3-3 have surpassed the 75th and 25th percentiles. The C3-2 measure, exits to permanency for children with termination of parental rights increased to 96.8 percent, which is 1.2 percent away from the 75th percentile.

INTER-COUNTRY ADOPTIONS

In Michigan, inter-country adoptions are exclusively within the purview of licensed private adoption agencies. An adoption agency licensed in Michigan to provide them has an agreement with the foreign country specifying the responsibilities of the agency in completing adoptions. Children in families at risk of disruption or dissolution are eligible for the same services and supports as a child born in this state when entering foster care. There were no internationally adopted children whose adoptions were identified as disrupted or dissolved in FY 2010 in Michigan.

ADOPTIVE AND FOSTER PARENT RECRUITMENT AND RETENTION

DHS will develop and maintain an adequate number and array of adoptive and foster home placements to meet the safety and permanency needs of all children requiring out-of-home care. DHS is increasing recruitment and retention for adolescents, sibling groups and children with disabilities by:
- Collecting and analyzing data.
- Increasing public awareness of the need for adoptive and foster homes.
- Collaborating with the Office of Faith Based and Neighborhood Partners and other faith based initiatives.
- Providing technical assistance to produce viable recruitment and retention plans.

During FY 2010, DHS collected and analyzed licensing data trends on issuing licenses, closing homes and the number of kin compared to non-kin homes. In FY 2010, DHS licensing bureau issued 2,130 new foster home licenses, an increase of 219 from the previous year. During that period, 1,775 homes closed, an increase of 164 from the previous year. In FY 2009, Michigan increased finalized adoptions to 3,030 children, an increase over the previous year. This is significant because the closed home surveys shows that the majority of homes close voluntarily, citing adoption as the top reason for not continuing as a foster parent. The chart details the trend of enrollments, open and closed homes over the last three years in urban counties:
Although enrollments showed a decline of 17 percent from FY 2009 to FY 2010, there was a 16 percent increase in original licenses issued in the urban counties. There was only an increase of one foster home closing from FY 2009 to FY 2010 in the urban counties. The chart below describes the types of homes (relative versus unrelated) opened by public and private agencies in urban counties during FY 2010:

<table>
<thead>
<tr>
<th>County</th>
<th>Enrollments Received</th>
<th>Original Licenses</th>
<th>Closed Homes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Genesee</td>
<td>130</td>
<td>248</td>
<td>202</td>
</tr>
<tr>
<td>Ingham</td>
<td>53</td>
<td>106</td>
<td>83</td>
</tr>
<tr>
<td>Kent</td>
<td>190</td>
<td>263</td>
<td>224</td>
</tr>
<tr>
<td>Macomb</td>
<td>113</td>
<td>287</td>
<td>239</td>
</tr>
<tr>
<td>Oakland</td>
<td>169</td>
<td>308</td>
<td>219</td>
</tr>
<tr>
<td>Wayne</td>
<td>523</td>
<td>675</td>
<td>601</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>1178</td>
<td>1887</td>
<td>1568</td>
</tr>
</tbody>
</table>

Although enrollments showed a decline of 17 percent from FY 2009 to FY 2010, there was a 16 percent increase in original licenses issued in the urban counties. There was only an increase of one foster home closing from FY 2009 to FY 2010 in the urban counties. The chart below describes the types of homes (relative versus unrelated) opened by public and private agencies in urban counties during FY 2010:

<table>
<thead>
<tr>
<th>County</th>
<th>Agency</th>
<th>Kin</th>
<th>Non-Kin</th>
<th>Sum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Genesee</td>
<td>Department of Human Services*</td>
<td>5</td>
<td>9</td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>Private Agencies in Genesee County</td>
<td>57</td>
<td>40</td>
<td>97</td>
</tr>
<tr>
<td><strong>Genesee County Total</strong></td>
<td></td>
<td>62</td>
<td>49</td>
<td>111</td>
</tr>
<tr>
<td>Ingham</td>
<td>Department of Human Services*</td>
<td>2</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Private Agencies in Ingham County</td>
<td>30</td>
<td>26</td>
<td>56</td>
</tr>
<tr>
<td><strong>Ingham County Total</strong></td>
<td></td>
<td>32</td>
<td>30</td>
<td>62</td>
</tr>
<tr>
<td>Kent</td>
<td>Department of Human Services*</td>
<td>4</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Private Agencies Opened in Kent County</td>
<td>62</td>
<td>103</td>
<td>165</td>
</tr>
<tr>
<td><strong>Kent County Total</strong></td>
<td></td>
<td>66</td>
<td>106</td>
<td>172</td>
</tr>
<tr>
<td>Macomb</td>
<td>Department of Human Services*</td>
<td>14</td>
<td>28</td>
<td>42</td>
</tr>
<tr>
<td></td>
<td>Private Agencies in Macomb County</td>
<td>85</td>
<td>59</td>
<td>144</td>
</tr>
<tr>
<td><strong>Macomb County Total</strong></td>
<td></td>
<td>99</td>
<td>87</td>
<td>186</td>
</tr>
<tr>
<td>Oakland</td>
<td>Department of Human Services*</td>
<td>14</td>
<td>4</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td></td>
<td>54</td>
<td>87</td>
<td>141</td>
</tr>
<tr>
<td><strong>Oakland County Total</strong></td>
<td></td>
<td>68</td>
<td>91</td>
<td>159</td>
</tr>
<tr>
<td>Wayne</td>
<td>Department of Human Services*</td>
<td>11</td>
<td>17</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>Private Agencies in Wayne County</td>
<td>154</td>
<td>114</td>
<td>268</td>
</tr>
<tr>
<td><strong>Wayne County Total</strong></td>
<td></td>
<td>165</td>
<td>131</td>
<td>296</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>492</td>
<td>494</td>
<td>986</td>
</tr>
</tbody>
</table>

* May include DHS homes opened in other counties.
Goal: Ensure that Michigan DHS can meet the capacity and need for foster and adoptive homes through:

- Using licensing and SWSS data to determine the capacity and need for foster and adoptive homes in Michigan.
- Continuing to develop and produce specialized reports for local use on numbers of licensed homes, kin and non-kin homes and types of licenses.
- Working with the Data Management Unit to develop standardized reports on adolescents, sibling placements and splits, children with disabilities, and children waiting for recruited adoptive homes for each county, including new foster care entry data and other relevant data.

Status:

- Licensing bureau reports on the numbers of licenses, closed homes, etc. by county.
- SWSS data on adolescents, sibling placements and splits, children with disabilities and children needing adoptive homes including data on:
  - Initial entry of foster children by age, living arrangement, gender, race and ethnicity.
  - Number of foster care youth by living arrangement and age.
  - Number of children with a goal of adoption by county and month.

Adoptive and Foster Parent Retention and Recruitment Plan

The annual plan template was released to the counties and private agencies with a due date of August 1, 2010. However, the data reports required for the plans were not distributed until September 2010 because the recruitment coordinator position was vacant from May - August 2010 and the deadline was extended to October 31, 2010. With increased collaboration between DHS county offices and private agencies, 60 plans covering all 83 counties were submitted for FY 2011.

In January 2011, responses to the plans went to county directors so that the responses would be shared with all agencies that participated. The responses highlighted:

- Agencies that were actively licensing homes in the county.
- Goal for the number of non-relative homes needing licensure.
- County plans to recruit foster and adoptive families.
- Public and private agencies made site visits to the big 14 counties in March 2010 for a six month update on the plans.

Accomplishments in FY 2011

On August 5, 2011, the annual Adoptive and Foster Parents Retention and Recruitment Plan template for FY 2012 was sent to each county and local plans are due by September 1, 2011. The recruitment goals and action steps for each county require collaboration and planning between the DHS county office as the lead agency and the private agencies serving that county.
Technical Assistance Provided to Counties and Local and Regional Entities

Goals: Local county offices and private agencies will use best practices to recruit and retain adoptive and foster care families to increase the number and retention of homes to assure:

- Each child placing agency will develop and submit a plan that defines the number of specialized homes needed and activities to recruit families focusing on adolescents, sibling groups, children with disabilities and children waiting for adoption.
- The coordinator will complete site visits to public and private child placing agencies to collect information on placement needs, recruitment strategies and retention ideas.
- DHS will disseminate best practices information statewide through the DHS website and other media.
- The coordinator will develop and distribute a report to agencies that demonstrates best practices used in Michigan.

Status:

- Data collected from each local office and private agency plan with measurable goals and outcomes.
- Increase in the number of adoptive and foster care homes in Michigan based on data collected by DHS licensing bureau.

Media and Events

- Michigan uses the Adopt Us Kids© campaign for public service announcements.
- There was an increase in the number of radio ads during November 2010 in conjunction with Adoption Month. Comcast, a national cable company, ran continuous spots on their on demand channel in Lansing, Flint, Detroit and Grand Rapids from early December through the month of January 2011.
- Comcast customers interested in adopting could send their information to Adopt-Us-Kids who forwarded it to Michigan Adoption Resource Exchange, which handles certain parts of the state adoption program.
- Michigan Adoption Resource Exchange, or MARE, tracked 196 inquiries and provided a data report.
- The project was a free service due to the partnership with Adopt Us Kids and the “You Don’t Have to Be a Perfect Parent” campaign.
- DHS and Detroit public television placed public service announcements in December 2010 and January 2011 with foster and adoptive parents and foster youth telling their stories while the MARE contact information appeared onscreen. These PSAs aired as recruitment tools for the Wayne County area.

The DHS contractual partnership with MARE includes recruitment and retention activities. MARE is the liaison between adoptive applicants and the agencies that supervise the adoptions. It receives referrals from families interested in Michigan children who are photo listed on the Adopt Us Kids website (334 as of September 30, 2010) and refers families to the appropriate agencies responsible for the child. The Michigan Heart Gallery, a traveling photographic and audio exhibit created to find families for children in foster care, is a MARE recruitment activity.
to increase the number of adoptive families for children needing homes in our state. It pairs professional photographers with waiting children to have photographs available for display.

There are over 300 children available for adoption posted on the MARE website. There have been 4,662 inquiries to MARE regarding the children available for adoption during FY 2010. Of these inquiries, 2,240 came from families already approved as adoptive families.

MARE had 13 regional recruitment events during FY 2010 including match parties that provide a comfortable environment for adoptive families to meet available children. After the events, the families and children have the chance to follow up with any questions. MARE also hosted 30 Heart Gallery events in Michigan communities during this reporting period. The Heart Gallery has been shown to be an effective tool to recruit adoptive and foster families.

Technical Assistance Provided to Counties and Local and Regional Entities
The DHS recruitment coordinator works with DHS Communications and the Adoption Oversight Committee Recruitment and Retention Subcommittee to create a recruitment tool kit to ensure consistent messages in local outreach efforts. The anticipated outcome is streamlined recruiting using less time and effort.

**Goal:** Increase awareness of the need for adoptive and foster parents a media campaign and special events by:
- Working with national and state associations to develop a marketing campaign.
- Designing new or using established television and radio public service announcements and advertisements to recruit adoptive and foster care homes.
- Developing posters, brochures and handouts on the need for foster families.
- Helping counties develop news coverage at events on the positives of foster parenting.
- Improving the website for Michigan’s adoptive and foster parents.
- Developing a social media campaign using Facebook, Twitter and podcasts.

**Status:**
- Increased participation in events as reported in each agency’s plan.
- Collecting Adopt Us Kids responses, MARE inquiries and caller referral sources.
- Increase in web inquiries to DHS and MARE.

**Planned Activities for FY 2012**
DHS will collaborate with MARE during FY 2012 regarding the 2012 Heart Gallery Opening.

**Foster/Adoptive Parents as Recruiters**
DHS local offices and private agencies include experienced foster and adoptive parents in local recruitment activities that have:
- Developed resource books and newsletters for adoptive and foster parents.
- Established mentoring programs.
- Used recognition events to honor foster parents in each county.
Presented information through malls, church and 4-H groups and other community forums.

The recruitment coordinator has met with public and private staff on the importance of such collaboration to meet recruitment and retention goals.

**Goal:** Increase recruitment and retention efforts by utilizing experienced adoptive and foster parents by:

- Including experienced foster parents in recruitment activities to explain the benefits of fostering and adopting children, and focus on the need for homes for adolescents, sibling groups and children with disabilities.
- Developing partnerships between child placing agencies and community partners to use adoptive and foster parents and foster children to increase awareness.
- Enhancing partnerships with national and state associations such as the Michigan Association for Adoptive, Foster and Kinship parents and private agencies.
- Enhancing collaboration and partnerships to engage local churches, schools and community organizations in recruitment activities.

**Status:**

- Annual local plans that provide data and narrative indicating foster parent recruitment efforts.
- Increase the number of adoptive and foster homes.
- Increase in the number of public-private coalitions as reported in the annual recruitment plan.

**Accomplishments in FY 2011**

DHS has collaborated with MARE on the Adoption Navigator program. The Adoption Navigator program is an initiative to help prospective adoptive parents through the adoption process. Adoption Navigators provide support, guidance and assistance to prospective adoptive parents throughout the adoption process by responding to their questions and concerns.

**Planned Activities for FY 2012**

DHS will be initiating a Foster Care Navigator program during FY12. This program will provide prospective foster parents with assistance and support during the certification process.

**Targeted Recruitment**

Local DHS offices and private agencies include adolescents, children from sibling groups and with disabilities at community presentations to increase recruitment activities for children and youth available for adoption that do not have an identified family.

**Accomplishments in FY 2011**

DHS has collaborated with Orchards Children’s Services on amending the Adoption Resource Consultants contracts to include extreme recruitment. Extreme recruitment will consist of efforts to identify, locate, and recruit individuals who may be a viable placement option for a youth (i.e. relative, fictive kin) which will include mining case and court files, making home visits.
to last known addresses of previously or currently involved individuals, meeting with the youth, contacting and meeting with individuals that the youth has identified, utilizing internet sites to locate individuals, completing a social networking map, and creating a professional team.

**Goal:** Target recruitment for special populations of adolescents, sibling groups, children with disabilities and children waiting for adoption.

- Each agency submitted a plan for recruiting homes for adolescents, sibling groups, children with disabilities and children waiting for adoption.
- Recruitment efforts will include adoptive and foster care adolescents, sibling groups and children with disabilities, telling their stories.
- Engage adolescents in identifying connections and recruitment activities to find a permanent family.
- Involve foster children in activities such as after-school programs and volunteerism to increase interaction among foster youth.

**DHS will:**

- Develop individual and family recruitment for teenagers, children with disabilities and sibling groups.
- Provide child-specific backlog data to help identify children’s permanency needs.
- Use permanency resource managers work with backlog cases to address children’s’ permanency needs.
- Geo-map areas where children are being removed and develop targeted recruitment efforts in those communities.
- Provide resource books and newsletters to adoptive and foster parent groups describing special populations’ needs.
- Implement mentoring for adoptive and foster parents.
- Increase the number of foster parent recognition events.
- Increase the number of community events where information about foster parenting is distributed.

**Status:**

- Completed plans by each DHS office and private agency will indicate targeted recruitment efforts that used youth, adoptive and foster parents.
- Decreased the number of adolescents placed in non-family settings.
- Decreased the number of adolescents siblings separated in care.
- Increased the number of adolescents foster and adoptive parent support groups to provide training, resources and crisis intervention for foster parents.
- Decreased the number of adolescents children placed in residential treatment centers for long lengths of time.
- Decreased the number of adolescents children waiting for an adoptive home.
Faith-Based Recruitment
The Faith Communities Coalition in Michigan wants to help support recruitment of foster and adoptive families in Michigan. Orphan Ministries throughout Michigan supports children in foster care, and religious leaders are calling to their congregations to care for children in need of families. DHS invited leaders of Faith Communities Coalitions and Orphan Ministries to present at the Permanency Forum in October 2010.

DHS is engaging the faith communities to recruit resources and foster and adoptive parents while also organizing them to work together. This is crucial to allow all of the faith communities to more effectively and efficiently serve the children in foster care.

Goal: DHS will facilitate successful adoptions of children and youth waiting in the foster care system by involving members of the faith community through recruitment, training and supporting adoptive families and foster care agencies.

- Increase awareness of the need for foster and adoptive parents among congregations.
- Provide gatherings where congregations, organizations and child placing agencies can network to provide help for foster children and aging-out youth.
- Educate and motivate congregations to help alleviate the suffering of children in foster care and those aging out.
- Challenge congregations to collaborate with agencies in projects or programs to benefit foster children, foster/adoptive/kinship families, or aging-out youth.
- Encourage congregations to recruit foster and adoptive parents and mentors.

Accomplishments in FY 2011
DHS will be hosting two faith based recruitment events in September of 2011. These events will be held in Wayne County and in the Flint/Saginaw area and are being promoted through DHS, private agencies and the faith-based communities.

Planned activities for FY 2012
DHS will continue to collaborate with the Faith Communities Coalition, the Save Our Children Coalition and other faith communities in FY 2012 to expand current initiatives and to create new initiatives.

Statewide Strategic Recruitment and Retention Plan
DHS established a planning committee of staff, partners and agencies to create a comprehensive recruitment and retention plan in Michigan.

Planned Activities for FY 2012
DHS will continue to collaborate with the Michigan Association for Foster, Adoptive and kinship Families (MAFAK) during FY 2012 by supporting their efforts to launch a new website, supporting their efforts to initiate foster/adoptive parent support groups, and by supporting the group’s Annual Training Conference.
In addition, FY 2012 starts the implementation stage of the Diligent Recruitment Grant received by DHS and the private adoption agency, Spaulding for Children, in 2010. The Diligent Recruitment Grant is a three-year grant focused on designing and implementing a successful multi-faceted model of diligent recruitment for kinship, foster and adoptive families to improve permanency options for children and youth in foster care and to meet the diligent recruitment requirements of the Multi-Ethnic Placement Act. The Diligent Recruitment Grant will have several initiatives during FY 2012 including:

- Targeted, child specific recruitment to meet the placement needs of children in care.
- Recruitment and development of homes, including relative homes and homes for siblings to be placed together.
- Addressing retention barriers.
- Training for staff and prospective foster and adoptive parents on working with families, youth and possible placement resources on active concurrent plans.
- Timely search for prospective parents for children in care.
- Collaboration with agencies and community-based organizations that can provide services.
- Development of strategies to move the program toward a philosophy of working on permanency from the first day children enter the child welfare system.

**Goal:** Create and implement a strategic plan that encompasses all retention and recruitment supports within Michigan in a collaborative effort to recruit and retain foster and adoptive parents that will:

- Raise awareness of the need for foster and adoptive parents among agencies, congregations, and other community stakeholders.
- Create and distribute practice guides to agencies, organizations and faith communities.
- Create a tracking system to assist agencies in recruiting and licensing foster parents.
- Educate agencies on current recruitment activities that are successful.

**Status:**

- Public and private agencies will collaborate to create one annual Adoptive and Foster Parent Retention and Recruitment Plan for each county.

**Measures:**

- Fewer children waiting for permanency.
- More foster and adoptive parents.

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**HEALTH CARE SERVICES PLAN**

**Goal:** Every child in foster care will have an updated physical examination by March 31, 2010.

**Status:** Completed.
This was a time-limited initiative focused on updating medical examinations and documentation for children in foster care. DHS spreadsheets demonstrated substantial compliance with the requirement. The only children who were not up-to-date with a physical examination or able to be scheduled for a physical examination were children who were away from their placement without leave or those in out-of-state placements.

**Infrastructure**

**Goal:** DHS will develop a Health Unit by June 2010  
**Status:** Completed.

Health services were combined with education and youth services creating a new unit, the Health, Education and Youth Unit in the Child Welfare Bureau. The transfer of health services to the Child Welfare Bureau affords a closer coordination of policy and practice for child welfare programs. By addressing the well-being of children involved in programs administered by the bureau, DHS will not only achieve permanency, but will also sustain permanency for all children in the system. The health-related responsibilities include centralized strategic planning, oversight and tracking of psychotropic medication and health policy. The medical director reports to the unit and there are two policy analysts for health-related matters.

**Coordination and Collaboration**

The Michigan Department of Community Health is responsible for health programs and DHS relies on it to move our health agenda forward. A team approach in building a system solicited input and feedback from a variety of experts that includes Community Health staff, local DHS directors and staff, and local Community Mental Health directors and staff. Private child-placing agency and residential care providers provided information and suggestions.

**Transition of Foster Children to Managed Care**

**Goal:** Children in foster care will be enrolled in managed care plans by October 2010.  
**Status:** Completed.

- In November 2010, all children in foster care during that month were transitioned to Medicaid Health Plans from fee-for-service Medicaid. From November 2010 forward, all children entering foster care are enrolled in plans.
- A health liaison officer ensures timely health care access for children entering foster care.
- The health liaison officer:
  - Knows all the available managed care providers.
  - Backs-up workers in the enrollment and disenrollment process.
  - Ensures that established health care procedures are followed.
  - Assesses family, child and provider satisfaction.
- A position description was written in September 2010 and 25 positions were allocated for FY 2011 including seven in Wayne County.

**Goal:** All 25 health liaisons will be hired, trained and providing services.
Immunizations
The American Academy of Pediatrics recommends an immunization schedule congruent with the Michigan Medicaid program. In addition, a schedule of required childhood immunizations for Michigan school settings serves as a minimum standard for children in care. Policy requires parental or Michigan Children’s Institute consent for the human papillomavirus vaccine.

Immunizations are considered “routine medical care” but some parents refuse to have their children immunized because of religious beliefs. If this is the case, parents sign a statement specifying the prohibition, which is retained in the case record.

Goal: DHS will utilize the expertise of its medical director to evaluate all recommended immunizations to determine their appropriateness as preventive health care for foster children.

Status: In process. The medical director and relevant DHS and DCH staff discuss immunization policy and practices recommended by the Centers for Disease Control and Prevention and determined DHS policy on the human papillomavirus vaccine is too restrictive. The DHS medical director will discuss revisions with DHS Children’s Services Administration and Legal Services.

Technical Assistance Provided to Counties and Local and Regional Entities
The Michigan Child Immunization Registry tracks immunizations of all children in the state. Since March 2005, Services Worker Support System (SWSS) automatically downloads data from DCH to get up-to-date information on the immunization of foster children that prevents duplicate or missed immunizations. DHS updated foster care policy on December 1, 2009 instructing workers to review immunization records and immediately take action if immunizations are not up-to-date.

Goal: Policy will be updated to define immunizations considered “routine medical care.”

Follow-Up Medical Care
DHS updated foster care policy in FY 2010 regarding follow-up medical and dental care. Caseworkers must review the medical and dental forms completed by physicians and note whether follow-up care is required. If the child requires follow-up care, the caseworker is responsible to ensure that the child receives required tests or attends appointments. Supervisory case reading will monitor these activities.

Psychotropic Medication Management Policies and Procedure
The DHS medical director is a child psychiatrist who guides policies, procedures and oversight of psychotropic medication management of children in DHS care.

Goals for FY 2011: By September 30, 2011, DHS will update policies and procedures for the use of psychotropic medications. DHS will conduct a pilot in three counties to review cases flagged because a child is prescribed psychotropic medication outside of DHS guidelines.
**Status:** In process. DHS was unable to meet the goal date of September 30, 2010 and established a new goal date of September 30, 2011.

DCH is no longer involved with the Pharmacy Quality Improvement Project for children that analyzed prescribing mental health medications for Medicaid members and identified prescribing patterns inconsistent with evidence-based guidelines. DHS was working with DCH to use the project to track and oversee psychotropic prescribing practices for foster children. In April 2010, DHS developed new guidelines and data reports to flag children prescribed psychotropic medication outside acceptable prescribing patterns. A pilot program is being developed in three counties to begin tracking and oversight.

The DHS Medical Director established the Child Welfare Health Advisory Board and the first meeting was held in June 2010. The board reviews new health information and determines its application in the child welfare system. In the area of the prescribing of psychotropic medication, it will:

- Review and update prescribing guidelines.
- Develop a plan for ongoing professional oversight at a regional level.
- Conduct reviews on complex cases.
- Provide input on informed consent policies.

The board developed new guidelines for informed consent that will be incorporated into the psychotropic medication policy scheduled for release on September 30, 2011.

**Serious Emotional Disturbance Waiver Pilot**

**Goal for FY 2011:** Expand the pilot to two new sites and increase the number served.

The pilot expands home and community-based services that support children at risk of psychiatric hospitalization and residential or institutional placement by using the 1915(c) waiver to provide additional services. The pilot serves DHS foster children with extensive mental health needs in eight counties where DHS redirected $1.76 million in state funds and matched $6.3 million in Medicaid funds to serve 266 children. The first DHS child began receiving services in December 2009. Since the foster care pilot began, 185 children have been served. The DHS match of $1.76 million is now a line item in the DHS budget appropriation. DHS is in the process of identifying other funds to use as match in order to expand the pilot to more counties.

**Serious Emotional Disturbance General Fund Benefit**

In July 2010, DCH and DHS met with pilot staff to notify them of a new benefit to ensure provision of mental health services for children in DHS foster care who are ineligible for the DHS SED waiver pilot. To date, 21 children were served. The general requirements include:

- The full array of specialty mental health services and supports are provided through Community Mental Health service providers (with Wraparound as a required service).
• It is available only to children identified as seriously emotional disturbed and new to CMH services after August 1, 2010, or children who have not received services within the prior six months, not children currently served by CMH.
• Local DHS and CMH agree on children to be referred and served.
• Eligibility priority is given to:
  o Foster children placed by DHS in a residential facility, having an Axis 1 mental health diagnosis, and who are being transitioned to community services and/or a permanent home with birth family, relative or adoptive family.
  o Foster children placed in foster care having an Axis 1 mental health diagnosis with total Child and Adolescent Functional Assessment Scale score of 80-110 or 30 level sub-scores in at least two areas or significant functioning difficulty as indicated on the Preschool and Early Childhood Functional Assessment Scale.
  o Children, aged 0-3, identified as being at significant risk and in need of enhanced services.
  o Foster children having an Axis 1 mental health diagnosis where extensive community services are necessary to maintain and support foster care placement/family reunification. Child and Adolescent Functional Assessment Scale / Preschool and Early Childhood Functional Assessment Scale sub scores in home, school/child care and behavior toward others are 20 or above may be used to determine risk versus the child’s total score.

**Goal:** Assist DCH with pursuit of 1915(a) contract to expand pilot to two additional sites and increase the number of children served.

**Technical Assistance Provided to Counties and Local and Regional Entities**

**Medical and Mental Health Training**

In FY 2010, the Child Welfare Training Institute, in collaboration with the DHS medical director, offered a new medical and mental health training series to caseworkers and supervisors in child welfare. The first covered:

- Common psychotropic medications.
- Attention Deficit Hyperactivity Disorder and anxiety disorders in children.
- Childhood depression and suicide.

An additional class was added in September 2010 covering Failure to Thrive/Reactive Attachment Disorder. More than 1,900 staff attended the courses in 2010. Three additional topics, Bipolar/Behavioral Intervention, Medically Fragile Children and Pervasive Developmental Disorder, are being added for 2011.

DHS, DCH and three public health departments developed the Foster Care Public Health Nurse pilot to provide:

- Enhanced health services to children entering foster care.
- Oversight to children on psychotropic medication.
• Medical consultation to older youth exiting the foster care system.

DHS entered into contracts with Ingham and Ionia counties and the Mid-Michigan District Health department that assigns a nurse to the DHS office in their service area. The nurse will:
• Complete a health needs assessment for each child entering care that includes a health history and current medical needs.
• Consult with foster care workers to ensure timely and accurate completion of medical passports and informed consent forms.
• Review the files of all children in the county on psychotropic medication and flag cases for further review when prescribing patterns fall outside acceptable DHS guidelines.
• Meet with youth aging out of care to develop a health care plan for ongoing needs.

Expected outcomes for the pilot include:
• Timely medical and dental exams.
• Improved documentation and completed medical passports.
• Early identification of health needs.
• Psychotropic medication oversight.
• Medical home for each youth and continuity of health care.
• Exiting youth better prepared to continue needed medical care.

Goals for FY 2011: Develop an evaluation for the pilot and continue and/or expand the pilot if health outcomes improve in pilot counties.

Technical Assistance Provided to Counties and Local and Regional Entities
Electronic Tracking of Medical and Dental Examinations
The DHS Data Management Unit measures whether the initial physical and dental examinations and yearly physical and dental examinations were met in accordance with DHS policy and the consent decree. DHS sent an instructional memorandum to local offices in March 2010 to provide workers with the steps for entering medical and dental information into SWSS FAJ for all children in state custody. At the same time, DHS informed private agency foster care providers and child caring institutions of electronic tracking and reminded them to forward medical and dental information to the DHS monitor. Caseworkers were required to complete the initial data entry by May 15, 2010. In July 2010, DHS issued a field directive outlining the requirement to update the data in SWSS FAJ to reflect provision of initial medical and dental examinations. The effort succeeded, and DHS uses the information in SWSS FAJ to report on initial and yearly medical and dental examinations. The most recent report available, covering April 2010 through September 2010, shows 77 percent of the children entering foster care received a medical examination within 30 days. Of the children requiring an initial dental examination during the same period, 47 percent received one within 90 days.

Goal: Improve the percentage of children receiving timely initial medical and dental exams.
STAFF DEVELOPMENT AND PROGRAM SUPPORT: CHILD WELFARE TRAINING INSTITUTE

Child welfare worker training ensures that staff in Michigan are prepared to carry out the responsibility of keeping children safe from abuse and neglect. The training institute trains public and private agency foster care providers in the laws, programs, policies and philosophy of Michigan’s child welfare system. This update details training activities that occurred between April 1, 2010 and March 31, 2011.

The pre-service institute prepares newly hired CPS, foster care and adoption workers to assume a child welfare caseload with program-specific transfer training for workers who have previously completed the pre-service institute in one program area, but who have transferred to a new program area. Workers who need transfer training join the pre-service institute for three weeks of program specific training. The training curriculum remains the same as described in the 2010-2014 Child and Family Services Plan. The Child Welfare Training Institute provides a competency-based written examination for all pre-service and supervisor training to evaluate trainees’ level of knowledge and ability.

**Children’s Protective Services (CPS) Training**

All newly hired CPS workers must complete a nine-week pre-service institute. Three hundred forty-nine trainees completed the training, after which they are able to assess families, develop investigation reports and service plans required under Michigan’s Child Protection Law and CPS policy.

Child welfare staff that transfer to CPS from another child welfare program area take 18 days to cover the new policies and procedures. During this reporting period, 145 staff completed the CPS program specific transfer training. The institute offered in-service training and the number of attendees:

- CPS Forensic Interviewing (48).
- CPS Legal Process (46).
- Interviewing and Investigations (49).

**Foster Care Training**

Child Welfare Training Institute offers a pre-service institute training for DHS and private agency foster care new hires that provides the skills and knowledge necessary to prepare staff to ensure safety, well-being and permanency to children who are committed to DHS for care and supervision. During this reporting period, 132 DHS and 356 private agency new hires completed the pre-service institute.

As part of a pilot, Child Welfare Training Institute staff trained and certified several private agency staff as trainers for foster care pre-service training. This offered additional pre-service institute opportunities for private agency foster care staff. The pilot ended in January 2010 due
to contracting issues. A new contract allowing private agencies to offer additional pre-service trainings for their staff is in process.

The foster care program specific transfer training class had 125 individuals from DHS and 13 from private agencies complete the training during this reporting period. Eighty-nine staff members received training in the foster care legal process.

**Adoption Training**

Newly hired adoption workers participate in a nine-week pre-service institute. During this report period, the following lists the training and number of attendees:
- Adoption program specific training (66).
- Adoption transfer training (64).

In addition to the required pre-service and transfer training courses, some individual sessions are available as in-service training. The following lists trainings and the number of attendees:
- Adoption Legal Process (96).
- Adoption Subsidy (76).
- Transitioning Successful Adoptive Families (89).

**Juvenile Justice Training**

DHS juvenile justice case managers attend a 10-day program specific transfer training which is offered as needed. Most juvenile justice case managers are court employees and are trained by the Michigan Judicial Institute of the State Court Administrative Office. During the reporting period, DHS trained 43 juvenile justice workers. Transfer trainings are offered quarterly.

**Child Welfare Supervisor Training**

A group of public and private stakeholders, Michigan State University and the Office of the Children’s Ombudsman worked with Child Welfare Training Institute to develop a training package for CPS, foster care and adoption supervisors. This 40-hour training began in April 2009 and is ongoing for all private and public supervisors. The training currently consists of:
- Two days of general supervisor training.
- Three days of program-specific training.
- A competency-based written examination.

During this reporting period, the following supervisors successfully completed the training:
- CPS (85).
- Foster care (201).
- Adoption (82).

The Child Welfare Training Institute offered a new training series titled *Secondary Trauma: Supervisor Recognition and Response* to assist child welfare supervisors and others more readily identify how secondary trauma manifests in the workplace and effectively work to maintain a strong and resilient work force. Child Welfare Training Institute offered this two-part training in
five locations during June through September 2010. The following lists the series and the number of attendees:

- Secondary Trauma: Recognition and Response Part I (161).
- Secondary Trauma: Recognition and Response Part II (98).

In-Service Training
The seven Michigan universities with graduate social work programs have developed a DHS approved in-service track for continuing education. The contract provided 21 half-day training sessions between January and September 2010. DHS provided several in-service training options including:

- **Confidentiality.** This is a full-day in-service training offered to all DHS and private agency staff. The curriculum ensures staff understands confidentiality law and policy to avoid potential liability and protect client’s rights. DHS strongly recommends that this training include court staff, attorneys and judges. Two hundred and fifty people were trained during this reporting period.

- **Report writing.** The training provides skills to promote individualized, program-specific, behavioral-based narratives and goal development to meet CFSR outcomes. Two hundred and six people completed this training.

- **Medical and Mental Health Training Series.** DHS training staff and medical director developed the series that helps workers and supervisors identify and meet the medical and mental health needs of children involved with the child welfare system, particularly children in foster care or a residential placement. The training series is:
  - ADHD and Anxiety Disorders in Children.
  - Bipolar/Behavioral Intervention.
  - Common Psychotropic Medications.
  - Childhood Depression and Suicide.
  - Failure to Thrive/Reactive Attachment Disorder.
  - Medically Fragile Children/Chronic Diseases - will be offered three times between May and July 2011.

Each full-day training is offered to DHS and private agency workers and supervisors. The training sites alternate between Lansing and Detroit locations, with a plan for one to three days of training in Traverse City (in northern Michigan). During this reporting period, 1,972 people completed training. Additional in-service trainings provided during this report period with trainings and the number of attendees:

- “Promoting Positive Outcomes through Caseworker/Child Visits” to improve the rate and quality of caseworker visits with children in foster care placements. The training was offered in 35 sessions around the state. Some 2,200 DHS and private agency workers and their supervisors were trained on federal and state requirements for caseworker visits with children and how to ensure visits are of sufficient quality to ensure the safety, permanence and well-being of the children.
“Fostering Change: A New Vision for Family Engagement” was offered for judges, referees, policymakers, court personnel, Lawyer-Guardians ad Litem, parents’ attorneys, child welfare professionals, service providers and caseworkers with 351 attendees.

- Title IV-E training for child welfare funding specialists and their supervisors (19). The Federal Compliance Division developed and presents this three-day training.
- Title IV-E refresher training for child welfare funding specialists and their supervisors (118). The Federal Compliance Division developed and presents this one-day training, offering six sessions in this report period at various locations statewide.
- Concurrent Permanency Planning for supervisors (11).
- Education Planners were offered a variety of training opportunities:
  - Education Planner: How to Make an Effective Presentation (9).
  - Education Planner Part II (21).
  - Education Planner training part III (24).
  - Education Planner training part IV (21).
  - Education Planner training part V (17).
  - Education Planner training part VI (12).
  - Education Planner training of funding sources (38).
- Permanency Planning staff had a variety of responsibilities in which they were trained:
  - Permanency Planning Assistant training (96).
  - Permanency Planning Conference Database (184). Permanency Planning Team Decision-Making (now Family Team Meeting) Facilitator (303).
  - Permanency Planning Specialists (88).
  - Permanency Planning Facilitator Update webinar (73).
  - Permanency Planning Facilitator Update webinar part B (21).

In addition to the staff who received this training during pre-service and transfer training, in this reporting period, special topic trainings were offered. The following lists the training and the number of attendees:

- Foster Care Transitional Medicaid – 45 attended.
- Transitional Medicaid – Private Agency – 16 attended.

- Introduction to Domestic Violence (24).
- Introduction to Medical Findings of Child Abuse and Neglect (44).
- Introduction to Mental Health (49).
- Introduction to Self-Awareness/Cultural Diversity (10).
- Introduction to Substance Abuse training (33).
- Transitioning Youth to Independence and Adulthood (13).
- Working Safe/Working Smart (36).
- Introduction to Childhood Trauma (46).
- Introduction to Constitutional Rights (13).
- Introduction to Engaging the Family (7).
- Introduction to Family Preservation (15).
- Introduction to Indian Child Welfare Act (15).
• Introduction to Lesbian, Gay, Bi-sexual, Transitioning and Questioning Youth (LGBTQ) (15).
• Introduction to Poverty (50).
• Introduction to Sexual Abuse (12).
• Mock Trial (4).
• Early Childhood Development (6).
• Forensic Interviewing Update (8).
• His Brain, Her Brain...and Your Approach (25).
• Interviewing and Investigations (49).
• Medical Aspects of Physical Abuse (27).
• Medical Aspects of Sexual Abuse (8).

Expanding services – The Child Welfare Tuition Reimbursement Plan
The Child Welfare Tuition Reimbursement Plan provides financial assistance for child welfare staff to acquire a master’s degree in social work. DHS has identified $1 million to provide reimbursement for FY 2011. It is uncertain if funding will continue in the next fiscal year. All permanent and certain limited term full time DHS first and second line supervisors are eligible. Upon acceptance into an accredited social work master’s degree program and receipt of a B/3.0 grade or higher, DHS will reimburse 75% of tuition costs, not to exceed $10,000 per individual per year. Staff participating must commit to work in public agency child welfare for two years after completing their MSW.

Family Preservation Services Training
Family preservation services delivers training to private agency contracted staff that provides in-home crisis intervention, support services or reunification services to families. These service programs include Families First of Michigan, the Family Reunification Program and Families Together/Building Solutions.

Family preservation trainings focus on research-based service delivery using strength-based, solution-focused techniques and is open to local DHS staff. The following list includes trainings offered and the number of attendees:
• Families First of Michigan Core Training Series (209).
• Families First Supervisor Orientation (17).
• Family Reunification Program core (57).
• Family Reunification Program core I series (40).
• Family Reunification Program core II series (19).
• Family Reunification Program overview for new workers (18).
• Family Reunification Program supervisor orientation (5).
• Families Together Building Solutions Core (36).
• Program Manager Overview (10).
• Supervisory I (9).
• Supervisor II (12).
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- Supervisory III (18).
- Family Preservation Skills Revisited (39).

DHS offered other family preservation topics. The following list includes trainings offered and the number of attendees:
- Behavior by Design (75).
- Incest-Affected Families I (94).
- Incest-Affected Families II (65).
- Lesbian, Gay, Bisexual, Transgender and Questioning Youth (69).
- Personal Safety for Workers (48).
- Mental Health I - Interventions (125).
- Mental Health II – For Kids (24).
- Self-Care for Workers (62).
- Solution Focused training (103).
- Self-Awareness (167).
- Substance Affected Families (185).
- Impact of Domestic Violence (127).
- Domestic Violence Laws (70).
- Testifying in Court (for family preservation workers) (61).
- Money Whisperer (72).

**FOSTER AND ADOPTIVE PARENT TRAINING**

The Child Welfare Training Institute provides train-the-trainer sessions for DHS and private agency staff who then train foster and adoptive families. The required pre-placement curriculum is the Foster/Adopt Parents' Resource for Information, Development and Education or PRIDE training. DHS offices collaborate with private agencies to provide advanced training. During the report period, 265 DHS and private agency staff members attended PRIDE training.

**Collaboration**

The Child Welfare Training Institute expanded its collaboration with public and private partners, university and other stakeholders by continuing the Child Welfare Training Advisory Committee, which reviews training curriculum and course content of Michigan’s child welfare training program and makes recommendations for improvement. In FY 2010, the committee reviewed pre-service institute training to explore alternative modalities, such as video conferencing, online training and future redesign to make it more responsive to the needs of the field.

Michigan continued its collaboration with the following groups to provide training:
- Michigan Association for Foster, Adoptive and Kinship Parents.
- Prosecuting Attorneys Association of Michigan.
- State Court Administrative Office.
- Governor's Task Force.

**Evaluation**
DHS is evaluating training effectiveness based on:
- The immediate impressions of trainees and whether they learned new information and skills is considered the level one and two evaluation. In most cases, this evaluation is completed on paper.
- Level three evaluation is conducted through online surveys of trainees' supervisors after the trainee has returned to work.
- Level three looks for transfer of skills/knowledge to job performance.

**Child Welfare Training Institute Goals**
The Child Welfare Training Institute aligned its goals with the Child Welfare Improvement Task Force goals to provide opportunities for training and workforce development to ensure judicial officers and public and private providers have adequate skills and competencies to serve the needs of children, youth and families.

**Goal:** Communicate training issues to DHS and private agency staff through specialized training letters, website updates and electronic communications in 2011 and 2012.
**Status:** Child Welfare Training Institute unveiled its new website in June 2010, which is used to enhance communication with local DHS and private agency offices.

**Goal:** Expand capacity to provide pre-service training to newly hired workers by developing private agency led pre-service institutes.
- In FY 2011 and 2012, expand foster care pre-service training and start private agency led pre-service training.
- In FY 2011 and 2012, evaluate the effectiveness of private agency led pre-service training by comparing trainer evaluations and trainee competency-based examination scores.
- Modify and continue building private agency training capacity through 2014.
**Status:** Piloted a successful private agency certified trainer program in 2009 that resulted in six certified private agency foster care pre-service trainers.

**Goal:** Expand in-service training to public and private child welfare workers. In FY 2012, collaborate with universities to develop and present child welfare in-service options and lead a child welfare training consortium to identify and fulfill child welfare training needs for caseworkers, tribes and other child welfare professionals.
**Status:** Collaborate with Michigan graduate schools of social work to provide free in-service training opportunities for DHS and private agency staff. Child Welfare Training Institute
contracted with the Michigan State University School of Social Work for 21 sessions for FY 2010. The FY 2011-2014 contract for future university partnerships will be initiated in the near future.

Child Welfare Training Institute created a child welfare training consortium with over 30 participants, including the State Court Administrative Office, the Prosecuting Attorney’s Association of Michigan, universities, private agency and a tribal social services director. Each of the committees for forensic interviewing, Indian Child Welfare Act and in-service training met to identify training needs and ways to address those needs. This consortium will resume regular meetings in the near future.

**Goal:** Collaborate with the seven graduate schools of social work in Michigan to develop course work that would cover most of the pre-service training to reduce training time.

- In 2010, meet with the universities, identify issues to be explored, and share lesson plans for review.
- Implement course work in at least one university by August 2011 and continue expanding to other university programs, including undergraduate social work programs, by 2014.

**Status:** The Child Welfare Training Institute is working with two graduate schools and several baccalaureate social work programs in Michigan to develop coursework that will cover most pre-service training information and have this in place by the 2012 academic year. The Child Welfare Training Institute will initiate discussions with appropriate federal Administration for Child and Families staff to ensure that this process is compliant with federal requirements.

**Goal:** Identify and implement training to address unmet needs of children and families that present barriers to safety, permanency and well-being.

- In 2012, the Child Welfare Training Institute will continue to integrate family preservation concepts into child welfare training to reduce unnecessary removal and placement of children.
- In 2011 and 2012, the Child Welfare Training Institute will work with the foster care program office to implement concurrent planning policy and training to enhance skills.
- The Child Welfare Training Institute will continue to weave core concepts throughout its training and develop individual training modules or in-service training on key issues.

**Status:** The Child Welfare Training Institute is integrating family preservation into child welfare training and offers many family preservation “core” training modules as in-service training options for workers. Child Welfare Training Institute is integrating information about concurrent permanency planning into lesson plans to ensure workers are familiar with the concepts even if the program has not yet been formally introduced in all counties. The Child Welfare Training Institute liaisons meet with program staff on concurrent permanency planning and its implementation statewide.

**Goal:** During FY 2010, DHS revised its Public Assistance Cost Allocation Plan to include the “expanded training group” under P.L. 110-351, Fostering Connections to Success and Increasing Adoptions Act of 2008.
**Status:** DHS is working on modifying its cost allocation plan in FY11.

**Goal:** By 2011, Child Welfare Training Institute will implement new training for relative caregivers and guardians, foster and adoptive parents and private agency adoption workers. **Status:** Child Welfare Training Institute is in the process of converting PRIDE Training to be delivered using compact discs. This format would allow the training to be available to a wider audience.

**Goal:** Child Welfare Training Institute will implement a process in the Juvenile Justice Online Technology system to certify that supervisors have reviewed revised policy with their staff. **Status:** Completed. The Child Welfare Training Institute records in-service training hours for supervisor and staff review of new policy. Supervisors use an automated process with an electronic signature that certifies they have reviewed policy with their staff. DHS will use this information during the CFSR program improvement plan to validate that staff have reviewed all new policy.

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**OFFICE OF PROFESSIONAL DEVELOPMENT**

The Office of Professional Development trains DHS staff on non-programmatic issues and provides training and consultation for the program offices. Staff produce instructional videos, web-based training, video conferences and other tools for performance support and distance learning and delivers service through:

- **New Supervisor Institute:** Offered several times a year for recently promoted DHS supervisors. All new supervisors are expected to attend training that typically spans three months combining classroom instruction and web conferences.

- **New Director Institute:** A learning opportunity for new directors, this institute combines classroom instruction and web conferences. Subject matter experts lead topics of special interest and offer networking and in-depth discussion. Trainers conduct classroom sessions on leadership competencies most important for new directors. To reduce time and travel expense, some topics are delivered by web conference.

- **Customer Service Excellence Training:** This web-based training involves identifying customer conditions, adapting, and personalizing the delivery of service. Trainees are taught positive self-talk, effective listening and questioning skills and appropriate interaction strategies to increase customer satisfaction. All new DHS employees are required to complete this course.

- **Working Safe/Working Smart:** This web-based course focuses on how to plan for individual safety when resources are limited, yet action is needed. The training identifies techniques for field safety, office safety and interviewing to increase the knowledge and skills of staff in recognizing emotionally charged situations. This includes early risk assessment, prevention of exacerbation and using appropriate referrals. The training
focuses on the use of non-physical crisis intervention methods to defuse aggressive or hostile behavior.

- **Leadership Academy**: The academy develops a pool of 20-25 high potential candidates who are prepared and ready to step into leadership positions as they become vacant. Members are trained in leadership competencies rather than groomed for particular positions. All DHS employees with Civil Service classification level of P-11 or above and supervisors at any level are eligible to apply for Leadership Academy. The academy requires a two-year time commitment that can be demanding and time consuming, similar to attending graduate school.

- **Leadership Development Program**: Training is open to all staff statewide with management approval to provide or increase leadership skills and address succession planning needs by preparing staff for supervisory opportunities. The program has classroom training, online learning courses, assessment and development plans and the mentoring partnership to identify and build strengths to prepare emerging leaders for supervisory positions.

### CHILDREN’S SERVICES CONTINUOUS QUALITY IMPROVEMENT PROGRAM

DHS developed the Quality Assurance Unit under the Continuous Quality Improvement Division to ensure:

- Consistent, high-quality services to children and families.
- Permanence, safety and well-being of children.
- Reduction of possible adverse occurrences.
- Continuous improvement in programs and processes to achieve targeted outcomes.

**Goal**: By December 2009, one quality assurance analyst will be located in five of the six urban counties, as well as other local offices in each geographic region based on child welfare population and program participation.

**Status**: The 12 analysts assigned geographically assure statewide coverage.

**Goal**: By January 2010, analysts will track and analyze outcome data for children under DHS care and supervision, and prepare quarterly tracking reports for the counties and DHS central office management. By June 2010, the Quality Assurance Unit will create reports identifying trends and patterns.

**Status**: DHS has developed specific data driven outcomes to be monitored by the Children’s Services Administration and the Quality Assurance Unit. The Data Management Unit is developing data reports for each outcome identified. The field will test the reports for accuracy and completeness and once approved, they will become production reports available for managers and quality assurance staff.
The Quality Assurance Unit is also developing an automated case reading system. The CPS supervisory case reading tool is completed and being tested. The CFSR case reading tool is currently being programmed into the system. Quality Assurance Unit staff and the Child Welfare Contract Compliance Unit are developing a case review tool to evaluate private agencies and DHS on the same questions. The Quality Assurance Unit will assess the case reading data and make recommendations from improvement.

**Goal:** Quality assurance staff will make recommendations to the Children’s Services Administration and field operations for improving the child welfare system. These recommendations will be integrated into DHS policy and procedures upon approval.  
**Status:** Ongoing. The staff creates a quality improvement plan for program offices that identifies barriers in policy and programs that affect service delivery and make recommendations for change.

**Goal:** By March 2010, analysts will develop and track the completion of quality improvement plans for local offices not meeting benchmarks. Starting in June 2010, analysts will monitor and re-evaluate processes to ensure changes affect the areas needing improvement.  
**Status:** Completed. It is the responsibility of the analysts to monitor and assess quality improvement to ensure the plan addresses the areas needing improvement. The analyst assists the identified county with the following:

- Identify baseline data on each recommendation and select at least three recommendations that the county will address in the quality improvement plan.
- Develop action steps, measures, and identify persons responsible to address areas identified.
- Submit the quality improvement plan within 30 days of receipt.
- The Quality Assurance Unit tracks all quality improvement plans on state and county levels.
- The Quality Assurance Unit will utilize the baseline data and, if needed, follow up case reviews to monitor success.
- Progress on all quality improvement plans will be reported by the Quality Assurance Unit through an annual summary report and future county reports if appropriate.

**Goal:** By June 2010, quality assurance analysts and the DHS county directors will develop local quality improvement teams.  
**Status:** In April 2010, the Quality Assurance Unit began the development and implementation of local Continuous Quality Improvement Teams. The following projects are currently underway:

- Macomb County will focus on the quality of the face-to-face contacts entered into SWSS FAJ. The group will develop a best practice standard to measure the quality of the face-to-face contacts.
- Lapeer County will evaluate and develop a protocol for licensing relatives.
Kent County will establish protocol and agreement on communication between private agency foster care workers and DHS monitors.

Washtenaw County will review and modify CPS intake process.

Oakland County will resolve barriers to documenting communication between CPS and foster care concerning investigations for youth in out-of-home placement.

Ionia County will improve consistency of work with relatives, from initial CPS involvement through foster care.

**Goal for FY 2011 and FY 2012:** By April 2011, the Quality Assurance Unit will evaluate findings of the continuous quality improvement teams in pilot counties. We are in the process of reviewing the effectiveness of this program and if it is deemed successful teams will be implemented statewide.

**Status:** Continuous Quality Improvement Teams are established in Macomb, Lapeer, Kent, Washtenaw, Oakland and Ionia counties. The next phase of the Continuous Quality Improvement teams is to roll out to several additional counties. The Quality Assurance Unit will compile findings by reviewing county-level data identified as trends to assist in overall improvement strategies and make recommendations from the team’s findings.

**Data Profile**
The Quality Assurance and Data Management Units will compile a comprehensive statewide data profile based on county-level data that defines a baseline for ongoing qualitative and quantitative measurement of program outcomes. From this profile, it will be possible to define acceptable thresholds for each indicator statewide, as well as the county or office level.

**Goal:** Develop baseline data for the measurement of DHS program outcomes that includes the CFSR goals of safety, permanence and well-being.

**Status:** DHS is developing reports for each outcome that will be tested by the field. Once approved, the reports will be available to administration and field staff.

**Technical Assistance Provided to Counties and Local and Regional Entities**

**Goal:** By March 2010, quality assurance analysts will maintain local office excellence through the quality-monitoring loop and share best practices with other local offices.

**Status:** Quality assurance analysts provide quarterly feedback summaries based on the results of the special reviews on higher-risk cases to the counties. Analysts also provide immediate feedback to local management regarding practices noted during case reads and immediately notify local office management on any case where a child may be at imminent risk of harm.

**Technical Assistance Provided to Counties and Local and Regional Entities**

**Children’s Protective Services Quality Assurance**
The CPS case reading review process has been developed and the purpose is to apply standards that support quality service and strengthen program practices. There are two components:

- CPS supervisors complete internal case readings and evaluate the patterns and trends noted in in their county.
• Quality assurance analysts complete case readings.

An important component for quality improvement is to assure that feedback is provided on reviews and performance improvement is re-assessed after the initial quality improvement plans are implemented. The Quality Assurance Unit will complete county summary reports along with annual statewide reports that identify any patterns and/or trends and will make recommendations for program enhancements.

**Goal:** By July 2010, the quality assurance analysts will track, report and analyze data from the completed CPS supervisory case reviews. They will prepare quarterly tracking reports for the counties and DHS central office management.

**Updated Goal:** By July 2011, quality assurance analysts will conduct targeted CPS case readings and complete data analysis. They will prepare annual reports that identify patterns and trends and make recommendations for program improvement.

**Status:** Starting in July 2010, each county compiled the information from the CPS supervisor case reading forms and provided a summary report. The Quality Assurance Unit produced a CPS Statewide Quarterly Report to identify patterns and trends. The unit completed two reports for the periods covering July-September 2010 and October-December 2010.

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**QUALITY ASSURANCE: MALTREATMENT IN FOSTER CARE**

**Goal:** Develop policy and practice to reduce maltreatment in care below the national standard.

**Status:** A DHS team of experts will use continuous quality improvement to assess occurrences of maltreatment in foster care. They will document and analyze data obtained from cases to identify and recommend reporting needs, system enhancements and policy changes to reduce instances of maltreatment. The committee has established sub-groups on:

- Policy and training.
- Prevention policy and practice.
- Data integrity, analysis and quality assurance.

Quality Assurance Unit reads a random sample of CPS complaints investigated by the current Maltreatment in Care units and will evaluate using interviews and surveys of staff and community stakeholders, then make recommendations for policy or procedure enhancements.

**Special Reviews for High Risk Cases**

**Goal:** The consent decree requires DHS to conduct special reviews of five cohorts of high-risk cases for children who have been:

- Subject of an allegation of abuse or neglect in a foster home or residential care setting, licensed or unlicensed, between June 2007 and September 2008, and who remain in the facility or home in which the maltreatment is alleged to have occurred.
- Subject of three or more reports alleging abuse or neglect in a foster home, the most recent of which report was filed during or after July 2007, and who remain in the home in which maltreatment is alleged to have occurred.
- In three or more placements, excluding return home, within the previous 12 months.
- In residential care for 12 months or longer.
- In unrelated caregiver placement, defined as an unlicensed home, in which the caregiver is not a relative of the child but has been approved as a placement resource because of prior ties to the child and/or the child’s family.

**Status:** As of December 31, 2010, the Quality Assurance Unit has completed 2,779 case reviews in this breakdown:
- Cohort A: 293
- Cohort B: 149
- Cohort C: 1,491
- Cohort D: 571
- Cohort E: 275

The Quality Assurance Unit has authored and made public four state reports on the special reviews of higher risk cases. A fifth report has been completed and is in the approval process. It should be public by June 2011.

**QUALITY ASSURANCE: BUREAU OF JUVENILE JUSTICE**

In FY 2010, the Bureau of Juvenile Justice continued monitoring state and federal grants awarded to Michigan, managed the regional detention support assignment unit for all juvenile justice residential placements, and managed three residential juvenile justice facilities that provide treatment for delinquent male and female youth ages 12-20 referred by county courts whose offenses and assessed risks warrant more intensive services than community-based treatment can provide. Services include sex offender, substance abuse and mental health treatment and treatment for severely violent and chronic offenders. All residential facilities operate at the DHS secure level with direct 24-hour, seven day per week staff supervision. Early in 2010, two state community justice centers and the Nokomis Challenge Center were closed because of decreases in the resident population and continuing budget pressures.

The Bureau of Juvenile Justice Quality Assurance Unit was administratively combined with the Child Welfare Quality Assurance Unit. Staff continued to conduct site reviews at the three state-operated residential facilities to ensure compliance with DHS residential policy. Site reviews are conducted using policy-based checklists and include reviews of safety, security, facility administration, residential programming, medical services and youth behavior management. Techniques used include tours, observations of facility routine, reviews of documentation, inspections of facility transport vehicles, and interviews with residents and staff. Facility management staff are debriefed and findings are documented in written reports that are
provided to management. Quality assurance staff conduct follow-up visits to verify that the facility effectively implemented any corrective action plan.

**Technical Assistance Provided to Counties and Local and Regional Entities**

Quality Assurance staff continues development of the monthly statistical package, a comprehensive summary of facility key events (assaults, restraints, and injuries) based on facility incident reports. The package provides a compilation of recent incident data and historical trends that help facility management maintain safety and security. Quality assurance staff also use the Juvenile Justice Online Technology to monitor timeliness of treatment plans and provide reports to bureau leadership.

**Goal:** Bureau of Juvenile Justice Quality Assurance staff will conduct semi-annual reviews of the three residential facilities to ensure compliance with policy. At least one review will be unannounced. Quality assurance staff will conduct follow-up visits to verify corrective action plans are effectively implemented.

**Status:** In 2010, Bureau of Juvenile Justice Quality Assurance staff conducted semi-annual reviews at each of its three residential facilities, with each receiving an unannounced visit.

**Goal:** Bureau of Juvenile Justice Quality Assurance will conduct research on nationally recognized child welfare quality accreditation programs and make proposals regarding accreditation for the three facilities.

**Status:** Bureau staff completed the research and made a proposal to the DHS administration in March 2010.

**QUALITY ASSURANCE: CASE READING AND CFSR BASELINE DATA**

The CFSR staff is working with the Data Management Unit and the Department of Technology, Management and Budget to automate case reading tools to collect data for the Program Improvement Plan and assist the contract compliance and quality assurance units, field and program offices. The plan is to automate the following case reading tools:

- DHS quality assurance.
- CFSR case reading.
- Foster care supervisory.
- CPS supervisory.

The CPS supervisory tool, which was updated to reflect CFSR questions, has been automated, tested and is on target to be automated by May 2011. The other tools are being updated to include questions that map to all 23 Items in the CFSR.

The CFSR tool collects data for the Program Improvement Plan baseline and quarterly reporting on CFSR Items 3, 4, 5, 7 and 17-20. This tool is a modified version of the federal CFSR Onsite
Review Instrument. DHS received approval to use the modified version of the federal tool by the Program Improvement Plan Management Advisory Group on February 4, 2011. DHS also negotiated with that group on the number of cases that must be read during the two-year reporting period.

DHS will read 100 cases in the first two quarters of the Program Improvement Plan to establish Michigan’s baseline data. For quarterly reporting purposes, 25 cases will be read for each of the remaining six quarters. The Data Management Unit will pull a stratified and randomized case sample from Berrien, Calhoun, Genesee, Ingham, Jackson, Kalamazoo, Kent, Macomb, Muskegon, Oakland, Saginaw, St. Clair, Washtenaw and Wayne counties, otherwise known as the Big 14. Wayne County cases will be represented in the sample numbers at the same level as the onsite review, approximately 30-40 percent of the cases and will be read in all of the reporting quarters.

The case reviewers include individuals from DHS and private agencies, with CFSR unit staff performing second and third level quality assurance reviews. Training to use the CFSR tool was held in April 2011. In addition to reporting in quarterly Program Improvement Plan reports, the results will be shared with the counties where the cases were pulled from, the contract compliance unit, the quality assurance unit, program offices and field offices. This will help Michigan improve casework practice and policy.

**New Goal:** The CFSR staff will incorporate questions related to all 23 Items into a new tool that will be used by Quality Assurance and the Contract Compliance Unit.

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**QUALITY ASSURANCE: CHILD WELFARE CONTRACT COMPLIANCE UNIT**

The Child Welfare Contract Compliance Unit staff annually review DHS contracts that provide foster care, adoption, supervised independent living and residential services. They also monitor family preservation contracts.

In FY 2011, the new Foster Home Compliance Unit will be assigned to visit a random sample of each contractor’s foster homes to assess child safety and the appropriateness of services. DHS is developing policy and procedures for these visits, which will be conducted in conjunction with the annual contract reviews.

**Goal:** Review each private child placing agency and residential foster care contract at least once a year and conduct investigations as needed.

**Status:** During FY 2010, DHS completed 100 percent of all contract compliance reviews on adoption, foster care, treatment foster care, residential foster care, sex offender foster care and shelter foster care.
In FY 2011, DHS is on track to complete 100 percent of the reviews for adoption, foster care, treatment foster care, residential foster care, sex offender foster care and shelter foster care.

**Goal:** Families First reviews began during 2009 and occur annually.  
**Status:** This goal is partially completed. DHS established a standardized review of contracts; however, due to a loss of monitoring staff, specific contract types received priority. During FY 2010, DHS reviewed 86 percent of all Families First contracts. These remain a priority and DHS intends to complete 100 percent of the reviews during FY 2012.

To ensure staff completes all reviews annually and the contractor completes a contract compliance improvement plan on time, the unit has continued to use a tracking system assignment sheet.

**Goal:** Implement policy and procedures for contract monitoring.  
**Status:** During FY 2010, DHS updated policies and procedures and will continue in 2011 to complete random foster home visits in addition to annual contract reviews. DHS will standardize policies and procedures on safety assessment and services provided to foster children and caregivers.

In FY 2010, DHS developed and implemented a complaint notification form to formalize the process when a local DHS office, court personnel or parties want to file a complaint regarding a provider’s compliance with the terms of the contract and/or applicable DHS policy. In 2011, this form was made available on the DHS public website.

There were 97 complaints during FY 2010 and 89 special investigations were completed or resolved. The eight remaining complaints are not considered complete until DHS approves each Contract Compliance Improvement Plan. DHS amended private agency and adoption contracts to include all requirements set forth in the consent decree.

**Performance Based Contracts for Foster Care and Residential Foster Care**

**Placement Agency Foster Care Contracts**

**Goal:** By October 1, 2010, amend the Placement Agency Foster Care contracts to include the requirement for an agency corrective action plan if the performance based contracting measures are not met.  
**Status:** Completed. DHS and private agencies reviewed the performance measures for the first year to establish a baseline. DHS contract and data management staff continued to extract data to analyze its integrity; however, because of challenges in verifying the accuracy and the process being cumbersome and time consuming, a decision was made to discontinue collection of data on the existing measures until contractors could directly enter case information into the existing system or an updated reporting system.

DHS uses Child and Family Services Review scores to measure outcomes for children and families. To have consistent performance measures across public and private agencies and to
assist in obtaining accurate data, DHS and Department of Technology, Management, and Budget are developing an interface for private agencies to access the SWSS FAJ that will allow private agencies to enter information. Implementation of SWSS Web is slated for July 2011.

This unit will amend contracts to include CFSR standards as the performance measures and staff will begin to review the data as a part of the annual contract compliance review and determine the type of corrective action required.

Residential Foster Care Contracts
Goal: By July 2009, staff will develop performance-based contracting measures for residential foster care providers, and they will be included in the contracts.
Status: Completed. Child Welfare Contract Compliance Unit amended residential contracts effective September 1, 2009, to include the performance measures. As in the foster care performance management process, contract and data management staff had trouble verifying the accuracy of data submitted by residential providers and discontinued collecting residential performance data.

When completed, SACWIS and SWSS FAJ will allow residential providers to enter information into the system, increasing the timeliness and accuracy of data. The process for reviewing performance measures will resume once data is available.

Substantiated Abuse/Neglect and Use of Corporal Punishment
To ensure child safety, DHS will consider substantiated incidents of corporal punishment in a contract agency when processing its licensure renewal application. A contract agency that fails to report suspected abuse or neglect to DHS results in an immediate investigation to determine appropriate corrective action, up to and including termination of the contract or placement of a provider on provisional licensing status. A repeated failure to report within one year shall result in contract termination.

DHS licensing and contract staff work together to investigate allegations when the agency is a contracted private child-placing agency. Licensing receives an automated list of all licensed foster parents or adults living in a licensed home, whose names were placed on the CPS Central Registry the preceding week as perpetrators of child abuse or neglect. When a match is found, they send a letter to the certifying agency advising them that the foster parent or adult member of the foster home has been named as a perpetrator. The letter advises the director that a foster home complaint investigation must be opened immediately and that being named as a perpetrator of child abuse or neglect requires a recommendation of license revocation.

Update: DHS staff is required to review all instances of substantiated child abuse and/or neglect against an employee or a foster family certified for licensure by the contractor. Staff reviews for patterns of abuse/neglect and requires corrective action as appropriate. A repetitive pattern could be grounds for adverse contract action.
DHS licensing notifies DHS whenever a member of a foster family licensed by a private contractor is placed on the CPS Central Registry and a supervisor contacts the private agency and determines whether DHS supervised children remain in the licensed foster home.

In FY 2011, DHS is considering a new team to review contracts that have received two violations of failure to report suspected abuse and/or neglect within a 12-month period to consider the circumstances involved in the failure to report, prior to issuing a notice to terminate the contract. Consideration will be given to:

- Circumstances regarding the two failure-to-report violations.
- Submission and approval of a Contract Compliance Improvement Plan.
- Submission and approval of a Bureau of Children and Adult Licensing Corrective Action Plan.
- Contract compliance history.
- DHS licensing compliance history.

After the review, recommendations would be made regarding contract adverse action, up to and including termination of the contract.

The Child Welfare Contract Compliance Unit participates in the DHS Maltreatment in Care Committee, which made a recommendation to track patterns and trends and to make recommendations based on the data. In 2011, staff will develop a tracking system and will review reports to analyze maltreatment in care occurrences.

**QUALITY ASSURANCE: THE BUREAU OF CHILDREN AND ADULT LICENSING**

**Goal:** Continue to conduct evaluations and investigations for all child placing agencies and child caring institutions to ensure the safety of Michigan’s children.

Public Act 116 of 1973, also known as the Child Care Organizations Act, protects children placed out of their own home by establishing standards of care for child placement agencies, institutions and family foster homes. The act also contains penalties for noncompliance with promulgated administrative rules. Michigan has administrative rules that govern:

- Child placing agencies, (Rule 400.12101-400.12713).
- Foster family homes and foster family group homes (Rule 400.9101-400.9506).
- Child caring institutions (Rule 400.4101-400.4666).

The bureau is involved in the process of revising the rules through:

- The Michigan Administrative Hearing System formerly the State Office for Administrative Hearings and Rules, which approves rule changes following public hearings and modifications based on public and user, input.
- Rules are filed with the Secretary of State with an effective date.
**Status:** Public forums will be scheduled during the summer of 2011 to obtain feedback on the proposed rule changes. The initial draft of the child placing agency rules was completed in March 2011 and submitted to Michigan Administrative Hearing System for review of enforceability and legality of all language. DHS and a group of stakeholders began working on the foster home rules in August 2010, completed the initial draft in March of 2011 and submitted the draft to the Michigan Administrative Hearing System for review. Public forums will be held at the same time as forums of the child placing agency rules.

**OFFICE OF THE FAMILY ADVOCATE**

The Office of Family Advocate responds to complaints from citizens, the legislature and the governor’s office about families and children in the child welfare system. In FY 2010, it responded to 458 complaints that ranged from providing information to full case reviews; the latter analyzes compliance with department policies and state and federal laws. In FY 2010, the office conducted 22 reviews because of constituent complaints. When necessary, the Family Advocate makes recommendations for changes in local office practice and statewide policy.

The Office of the Family Advocate is also responsible for receiving and tracking child death alerts from DHS field offices to ensure the notice is timely, accurate and complies with DHS policy. Interagency agreements require the office provide death alerts to the Office of Children’s Ombudsman and Michigan Public Health Institute.

The Office of Family Advocate is the DHS unit responsible for reporting and reviewing child fatalities that occur in an open foster care cases. Within six months of each fatality, the office issues a report summarizing DHS involvement with the family and child. If concerns with case handling were identified, the report will also include findings and recommendations. Each completed report is forwarded to the appropriate local DHS office or private child placing agency and DHS Child Welfare Field Operations, Bureau of Children and Adult Licensing, Child Welfare Training Institute and DHS program office(s). The report is also submitted to Children’s Rights Inc., the Public Catalyst Group and the Quality Assurance Unit.

In cases where the Office of the Family Advocate identified findings, a corrective action plan must be submitted to the Office of Family Advocate and the Quality Assurance Unit for data collection, identification of trends and other continuous quality assurance and improvement activities. In FY 2010, they reviewed 72 corrective action plans submitted from DHS, private child placing agencies and other entities.

On behalf of the DHS director, the Office of Family Advocate director participates in statewide advisory boards, task forces and work groups.

**Goal:** Respond to complaints from citizens, the legislature and the governor’s office, conduct in-depth case analysis when warranted and make recommendations for DHS policy and practices.
Goal: Track child deaths reported to CPS or a child placing agency.
- By 2012, revise and update DHS policy concerning child death alert procedures and timeframes.
- On a monthly basis, report to Children’s Rights Inc. and Public Catalyst Group each foster child fatality that occurred that month.
- Within six months of each fatality, complete a comprehensive case analysis and submit recommendations for corrective action to the county office and private child placing agency.
- As the plans are completed, submit them to DHS Child Welfare Field Operations and the Quality Assurance Unit for continuous quality improvement activities.
- Beginning in 2011, publish an annual report of child deaths in foster care made available to the public.
- By 2012, develop an interagency agreement between DHS and the State Court Administrative Office outlining procedures for sharing confidential information about children who died in foster care.

Goal: Update statewide DHS policy on confidentiality of child welfare information by 2011 including:
- Soliciting input of stakeholders including CPS policy, legal affairs and field office staff on revisions to policy.
- Using the DHS policy development and review process to finalize amendments to policy.
- Serving as department resource and respond to inquiries pertaining to confidentiality policy and procedures.

Goal: Provide liaison and other services to the Office of Children’s Ombudsman including:
- Starting quarterly meetings to discuss interagency procedures, specific problematic cases and other matters of mutual concern.
- Exploring options for enhanced access to electronic case file information to facilitate case reviews.

Status: Completed. Effective March 1, 2011, the Office of Children’s Ombudsman was identified as a stakeholder in development of the new SACWIS system; the office began participating March 9, 2011.

Goal: By 2012, update the DHS interagency memorandum of understanding with the DHS statewide policy for responding and the Office of Children’s Ombudsman requests and reports.

Status: Achieved. The memorandum of agreement was updated and signed by the DHS director and Children’s Ombudsman on February 8, 2011
OFFICE OF THE CHILDREN’S OMBUDSMAN

The Office of Children’s Ombudsman is an independent state office administered through Michigan Department of Technology, Management and Budget that investigates complaints concerning children involved in the child welfare system, reviews case files and conducts interviews with case management staff and collateral sources. The DHS Office of Family Advocate is the department liaison.

If the ombudsman’s office identifies safety concerns or other issues needing immediate attention, it issues a request for action or administrative response to the family advocate. If the ombudsman identifies violations of law, DHS policy or procedure, it may issue a report of findings and recommendations to DHS. It may close a case administratively when a concern was noted but satisfactorily resolved by DHS. Typically, reports focus on issues that affect child safety, permanency and well-being.

In FY 2010, the Office of Children’s Ombudsman:
- Sent 123 completed investigations to DHS.
- Requested responses to seven requests for action or administrative response.
- Requested responses to 30 reports of findings and recommendations.
- Affirmed DHS or private child placing agencies in 51 cases.
- Resolved 40 investigations with administrative closings.

DHS also works with the ombudsman to improve child welfare policy and practice. The office issues an annual report that includes recommendations for legislative and policy changes in the areas of CPS, foster care, adoption and child welfare issues. DHS responds to the recommendations and the report is published. The published report is provided to the governor, DHS director, the Michigan legislature and is made available to the public. The OCO statistics for fiscal year 2010 regarding closed investigations are:
- 42 percent affirmed DHS actions.
- 25 percent had findings of law or policy violations and requested DHS written response and corrective action.
- 33 percent were resolved by DHS or the private child placing agency or the ombudsman determined that no further action or response was needed.

The Office of the Children’s Ombudsman reports can be found at: http://www.michigan.gov/oco/0,1607,7-133-3195---,00.html.

MICHIGAN FOSTER CARE REVIEW BOARD

The Foster Care Review Board is a third-party review that monitors and reports on efforts to move children in foster care to safe and timely permanency. The State Court Administrative
Office administers the program, which is composed of trained citizen volunteers who serve on one of 30 local boards in the state.

The board reviews a random sample of cases and will conduct a specialized review where there is a significant concern. Selected cases are reviewed every six months until permanency is achieved. The board provides written findings and recommendations to the local court, DHS and child placing agency for review and consideration.

The board investigates appeals by foster or relative caregivers when a child is moved from a placement and the caregiver does not believe the move is in the child’s best interests. They forward findings and recommendations to the agency, local court and Michigan Children’s Institute Superintendent regarding the appropriateness of the change in placement.

A statewide advisory committee includes child welfare leaders and advocates who help assure that the program fulfills its statutory mandate and provides maximum benefit. State statute also requires an annual report be published and delivered to the Michigan legislature and governor. The report specifies system issues that delay permanency or compromise child and family well-being and makes recommendations. The annual reports are located at: [http://courts.michigan.gov/scao/services/fcrb/fcrb.htm](http://courts.michigan.gov/scao/services/fcrb/fcrb.htm).

The 2009 annual report published in May 2010 contained the following recommendations related to DHS. DHS actions made in response to the recommendations are noted afterward.

*We recommend that the State Court Administrative Offices Court Improvement Program collaborate with the DHS to form a task force of foster care caseworkers, judges, parent and child attorneys, foster parents and parent advocates. The goal of the task force is to establish a functional and useful written case plan format and/or a uniform court report format that includes a clear, comprehensive and easily read document containing the information required to establish and monitor a plan to facilitate the safety, well-being and timely permanency of each child in care.*

Former Supreme Court Justice Maura Corrigan, now DHS director, convened a work group to address this recommendation. It developed drafts of both standardized court reports and recommendations for improving the case service plan that are being reviewed by DHS for implementation.

*We recommend that the DHS increase or otherwise improve new caseworker training on assessment and case plan development, and require regular continuing education to upgrade the assessment and case planning skills of all DHS and private agency caseworkers and supervisors.*

Improvements in the training curriculum are being carried out.
We recommend that the DHS and the Michigan Legislature work with state colleges and universities to establish social work classes that are specific to assessment and case planning in the child welfare system.

DHS’s and the legislature’s response to the status of this recommendation is forthcoming.

We recommend that DHS amend its policy to ensure that incarcerated parents are included in the case planning process.

DHS policy has been amended as recommended and is being monitored for compliance.

DHS Quality Assurance Unit is developing policy and procedure to use these recommendations in quality assurance reviews. In addition, the board will provide feedback to DHS regarding progress in meeting CFSR Program Improvement Plan objectives.

**DHS DATA MANAGEMENT**

The Data Management Unit is the centralized staff that coordinates all county, state and federal information requests. It works with Department of Technology, Management and Budget to provide accurate, timely and validated data to fulfill customer-reporting needs.

**Data Reporting**

Staff assures timely distribution of reports using:

- A database to track information requests.
- Data extraction into user-friendly reports.
- An internal web page for data sharing with DHS staff.
- Detailed requirements that provide standardized data reports and sets.

DHS shares data electronically with the courts through agreement with the State Court Administrative Office.

**Goal**: The Data Management Unit will create and test child welfare data reports and compliance reports, which will allow county-level oversight of progress in an effort to achieve state and federally mandated outcomes.

**Status**: Over the last year, staff has implemented:

- Child welfare data reports specific to each program area that evaluate each county against CFSR measures, caseworker visitation requirements and state-mandated policy measures.
Compliance reports on a variety of key indicators with capability to report on the district, section, unit and worker level. These reports help county management review for compliance with defined benchmarks and include case specific detail. The reports show trends in decision-making that may lead to non-compliance, safety issues or impeded permanency.

In the previous Annual Progress and Service Report, it was anticipated that the caseworker visit data report would be released in June 2010. Due to reduced staffing and development issues, the caseworker visit reports have been distributed for testing. The caseworker visitation reports will assist in tracking the timely entry of the visitation data into the Services Worker Support System (SWSS).

In July 2011, staff will release reports on monthly CPS caseworker contacts and visits for families with a current and/or on-going CPS cases. The report will track face-to-face hours, complaint-to-commencement hours and complaint-to-disposition days to help ensure compliance with policy.

Technical Assistance Provided to Counties and Local and Regional Entities

Goal: The Data Management Unit will create and test a series of alert reports. The intent of these reports is for caseworkers to be alerted of upcoming deadlines for child safety, permanency and well-being, such as medical and dental appointments.

Status: In June 2011, staff will release reports on medical and dental appointments through the department’s internal web page. The documents will help county managers define benchmarks and view trends that may lead to non-compliance.

Staff developed an Adoption Alert Report for children who are legally free and have a goal of adoption. The goal for FY 2011 is to provide courts and private agencies access to the report. A data sharing agreement with the courts is pending finalization. Additionally, there is a child placing agency interface in development that will provide DHS with the ability to identify individual workers.

Goal: Develop a Permanency Tracking System to allow workers, supervisors, managers and county directors to review data reports that provide a status of children in the child welfare system at any point along the continuum of care from initial contact with DHS through permanency.

Status: In September 2010, DHS and the National Resource Center for Child Welfare Data and Technology held a workshop with program staff. It addressed specific data driven reports that DHS executives, county directors and county administrators can use in the decision-making process.

In April 2011, staff began releasing data driven decision-making reports encompassing key indicators to provide a status of children in the child welfare system. The reports provide a statewide summary with county, district, unit and worker level capability. The intent is to view
trends in decision-making that may lead to non-compliance, safety issues or impede permanency. Over the next year, the Data Management Unit will release similar reports for:

- CPS case listings and case counts, Initial Service Plan-Updated Service Plan and data quality and timeliness reports.
- Foster care case listings and counts, stability of placement and goal to adoption, length of time and quality and timeliness reports.
- Adoption case listings and counts, referrals, time to permanency and data quality and timeliness reports.
- Juvenile justice case listings, case counts, Initial Service Plan-Updated Service Plan, stability of placement and face-to-face contacts.

**Goal:** Develop a web page accessible on the department’s intranet.
**New Goal:** Develop a web page for county administrators to obtain case-level detail.
**Status:** Staff continues to maintain and update a secure web page. The county directors’ internal team site provides executives and county administrators access to monthly reports and case sensitive data.

**Goal:** Develop a communication and training strategy for report distribution and use, along with SWSS system changes to effect change in service delivery.
**Status:** Staff continues to work with field operations to develop a communication strategy with local staff. The reports will provide additional information for field operations.

### SACWIS COMPLIANCE

**Goal:** Michigan will have an advanced planning document approved by the Administration for Children and Families by July 2011.

**Goal:** Michigan will implement a SACWIS pilot by October 2012.
**Status:** DHS and the state Department of Technology, Management and Budget staff drafted a request for proposal to seek a vendor for the development of a SACWIS-certified system. In March 2011, DHS and Department of Technology, Management and Budget selected Unisys as the contracted design, development and implementation vendor. Unisys began work modifying Tennessee’s application (called TFACTS) to meet Michigan’s needs. DHS submitted a revised planning document to ACF in May 2011.

DHS staff is conducting rapid requirements design sessions with field and policy staff, stakeholders including private agency and court staff, and DTMB staff to define the high-level business flows for the new system. Conceptual design sessions began in May 2011.

**Goal:** Michigan will implement the new provider payment system by January 2010.
**Status:** The new system was implemented in September 2010; it includes state and IV-E funded foster care and adoption subsidy payments.

**Goal:** Develop a private agency interface into the SWSS FAJ application to ensure accurate data collection and monitoring.

DHS and Department of Technology, Management and Budget are designing a web-based interface for contracted private agency staff to access the SWSS FAJ application. Contract agency staff will update foster care, supervised-adoption, dual abuse/neglect and delinquency court ward cases assigned to their agency. DHS and Department of Technology, Management and Budget plan to implement the new SWSS Web application by the July 2011 to:

- Reduce staff time entering data on paper forms.
- Increase staff efficiency.
- Ensure accurate data in SWSS FAJ, particularly with social work contacts.

DTMB will change SWSS FAJ so DHS staff can benefit from the new functionality. DHS will assign a case to the private agency; DHS and private agency will be able to view a history of the responsible agency along with the DHS and private agency staff assigned to the case. Private agency staff will also be able to view case summary information from SWSS FAJ, ensuring accurate and up-to-date case information.

DHS and private agency staff will also have the ability to upload or download documents to a central repository. The document management module will ensure that DHS and private agency staff are sending case information in a timely manner. The functionality will meet security and confidentiality provisions. DHS will provide training to DHS and private agency staff and the SACWIS Helpdesk staff will provide application support.

**Changes to SWSS**

- SACWIS staff also execute changes to the existing SWSS system. Over the last year, the majority of the work was devoted to requirement deliverables, strategic planning for the new SACWIS system, and the new provider payment system.
- The SWSS/SACWIS project has a dedicated Helpdesk with five employees. SWSS/SACWIS staff support the SWSS helpdesk and field staff, averaging 500 field calls per month.

Other changes include:

- **Centralized CPS intake:** Technical programming is occurring now; the pilot functionality will begin in Kent and Kalamazoo counties in July 2011 and will be operational statewide in April 2012.
- **Special investigations of abuse and/or neglect while in foster care:** In January 2010, DHS implemented screen changes to SWSS CPS to track special investigations of abuse/neglect for children in foster care. This new functionality will be piloted in July 2011 and statewide implementation is scheduled for October 2011.
Michigan goal removal and concurrent permanency planning goals in SWSS: DHS anticipates these changes will be implemented in the summer of 2011 to track a child’s goal(s) in foster care.

Guardianship assistance program and extension of foster care to age 21: DHS policy, SACWIS, field and Department of Technology Management and Budget staff are meeting on these changes to SWSS. Because of the implementation of the new SACWIS system in 2012, minimal changes will be made in SWSS to implement this functionality.

EVALUATION, RESEARCH AND TECHNICAL ASSISTANCE

Michigan received technical assistance for several CFSR and CFSP goals and objectives during FY 2010. Following is a brief description of each of these projects. Additional information can be found in the applicable sections of this report.

Outcomes: Continuous quality improvement process.
Activities: Analysis and improvement of Michigan’s quality assurance system and support for its implementation.
The first steps in the project were review and analysis of Michigan’s current quality assurance system with recommendations for improvement. The proposed process moves progressively toward the goal of continuous quality improvement (CQI) with feedback loops, checks and balances, and the ability to adjust and improve outcomes for children and families. The process is being implemented in urban areas with the expectation of going statewide. This technical assistance consisted of off-site consultation. DHS Quality Assurance Manager Mary Lou Mahoney had a call with the National Resource Center for Organizational Improvement to discuss CQI questions and receive some examples from other states. The resource center provided numerous links and attached materials from other states’ CQI systems.
Status: Complete.

Outcome: Safety, permanency and well-being through improved foster care recruitment and retention.
Activities: Assistance with recruitment and retention of foster families.
NRC Lead: Shari Black, National Resource Center for the Recruitment and Retention of Foster and Adoptive Parents.
Update: Michigan drafted a two-year plan to recruit foster families for sibling groups, teens, children with disabilities and children waiting for adoption. The state will continue to seek support in the implementation of the plan to address statewide recruitment and retention.
Status: Complete.

Outcomes: Permanency and well-being through the Youth Services/Independent Living Finance Project.
Activities: Support for developing a plan to improve independent living services and delivery of those services to youth in care.
National Resource Center (NRC) Lead: Jim Casey Youth Opportunities Initiative and Casey Family Services. The Finance Project assisted the department in developing a youth services program delivery model for independent living services.  
**Status:** Complete.

**Outcomes:** Permanency through adoption initiatives.  
**Activities:** Support in developing a plan to increase the number of adoptions of children who are legally free for adoption.

National Resource Center (NRC) Lead: John Levesque, National Resource Center for Adoption. Technical assistance coordination was provided by Ann Simmons. Two days of technical assistance were provided on July 22 and 23, 2010. Topics included the role of the Permanency Resource Manager, termination of parental rights and Michigan Adoption Resource Exchange, family assessment and preparation, recruitment approaches, planning for post-adoption services, petition filing and the legal process. The focus was on helping permanency resource managers coach case carrying staff and monitor progress toward permanency.  
**Status:** Completed July 22, 2010.

**Outcome:** Safety, permanency and well-being through creation of a statewide recruitment and retention plan.  
**Activities:** Planning for improved recruitment and retention of adoptive homes for children in foster care/adoption and training of trainers.

NRC Lead: Shari Black, National Resource Center for Recruitment and Retention of Foster and Adoptive Families at AdoptUsKids; technical assistance coordinator was Ann Carver. Maureen Heffernan and Tracy Scatterday met with state administrators and Michigan Adoption Resource Exchange program staff and provided a Train the Trainer of AdoptUsKids/Lasting Impressions. The goal was to assist the state and private contractor to strengthen youth narratives to enhance recruitment efforts for photo-listed youth.  
**Status:** Completed September 13, 2010.

**Outcomes:** Permanency through increased options for children in care.  
**Activities:** Support in developing a plan to increase permanency; will coordinate with other initiatives to increase permanency and transfer children to a permanent family.

National Resource Center (NRC) Lead: Catholic Community Services of Western Washington, as consultants with Stephanie Boyd-Serafin of the National Resource Center on Permanency and Family Connections. Technical assistance was provided on March 15 and 16, 2010 in Lansing. Thirty-four staff participated, including permanency resource managers, supervisors, social workers and adoption staff.  
**Status:** Complete March 15, 2010.

**Outcome:** Safety, permanency and well-being through data-driven decision-making.  
**Activities:** The state requested help to use data reports effectively to improve outcomes for Michigan’s children.
NRC lead: Linda Arnold, National Resource Center for Child Welfare Data and Technology. Technical assistance was coordinated by Ann Turnlund-Carver. The key to achieving the outcomes required in the consent decree is the ability to use data on a day-to-day basis in the field to make decisions. Understanding data and making data-driven decisions will improve the safety, permanency and well-being of children. Two days of on-site consultation took place September 16 and 17, 2010 with John McInturf and Larry Brown, who met with several central office and county staff to discuss how to use data to make programmatic decisions and to assist supervisors in managing staff.

Status: Complete.

Outcome: Strategic planning.

Activities: The state requested assistance to create policy and practice for extending foster care to age 20 and develop coordinated independent living services. This addresses areas the CFSR identified as needing improvement, as well as requirements of the consent decree, and will result in systemic changes and development of a statewide educational campaign. A plan will emerge to align policy, practice and training for the extension of independent living services. The National Resource Center facilitated a stakeholder meeting on June 10, 2010 to plan implementation.

NRC lead: Dorothy Ansell, National Resource Center for Youth Development. Technical assistance was coordinated by JoAnn Simmons.

Status: Complete.

MICHIGAN CHILD WELFARE DISASTER PLAN

Michigan participated in disaster planning, response and recovery activities required by the Child and Family Services Improvement Act of 2006 and Section 422 (b)(16) of the Social Security Act through the development and drafting of a new child welfare disaster plan. The new draft Michigan Child Welfare Disaster Plan outlined below addresses the following federal requirements:

- To identify, locate and continue services for children under state care or supervision who are displaced or adversely affected by a disaster.
- To respond, as appropriate, to new child welfare cases in areas adversely affected by a disaster, and provide services in those cases.
- To remain in communication with caseworkers and other essential child welfare personnel who are displaced because of a disaster.
- To preserve essential program records.
- To coordinate services and share information with other states.
The Michigan Department of Human Services (DHS) holds the primary state responsibility to perform human service functions in the event of a disaster. The DHS Emergency Management Coordinator is responsible for conducting emergency planning and management, and interfaces with DHS local directors and central office staff to ensure adequate planning. For this plan, the terms “emergency” and “disaster” are used to describe situations in which the prescribed response is mobilized.

Roles and Responsibilities in the DHS Child Welfare Disaster Plan

- **Michigan Governor** – Responsible to apply for federal disaster assistance as necessary, mobilize state emergency management procedures and access to federal funds for rescue, cleanup and recovery efforts.
- **DHS** – Provides direction, coordination and assistance to plan and prepare for human services to disaster victims. DHS also manages local office emergency procedures and local decision-making authority regarding emergency management.
- **DHS Emergency Management Coordinator** – Coordinates inter-agency state emergency management efforts and mobilizes responsible parties and resources to maintain DHS operations. Serves as liaison to county offices for emergency management activities.
- **DHS Field Operations Administration and Child Welfare Field Operations** – Assists local DHS offices to fulfill their responsibilities in emergencies and disasters and keep them apprised of changes in laws, policies, procedures and resources. Ensures DHS local offices participate in state and local emergency management activities and assures consistent implementation in all counties.
- **DHS Children’s Protective Services Centralized Intake Director** - In collaboration with the emergency management coordinator and the DHS Child Welfare Field Operations director, the CPS Centralized Intake Director monitors the operational needs of CPS centralized intake during emergencies and activates backup plans if necessary.
- **DHS local director or designee** – Responsible to implement human service programs during a disaster, in coordination with local governments, agencies and organizations providing assistance. The local director or designee assists local jurisdictions on request. If the county/local Emergency Operations Center is activated, the DHS local director or designee may report there per local procedure to identify and coordinate with agencies and organizations that can best accomplish these tasks. DHS local office directors and designees must be knowledgeable of the resources and capabilities of the local agencies and organizations involved, and familiar with local procedures for mobilizing assistance.
- **Private Agency Foster Care (PAFC) Provider/Institution Chief Executive Officer or designee** – In areas affected by a disaster, the PAFC Provider/Institution CEO or designee maintains contact with the DHS CWCCU manager or local office director as necessary.
The CEO will ensure staff follow DHS disaster procedures to maintain contact with foster parents who have evacuated, informing birth parents of the safety of their children and maintaining services to clients.

- **Child Welfare Contract Compliance Unit (CWCCU) Manager** – The CWCCU Manager maintains communication with PAFC providers that provide services to DHS clients. The CWCCU Manager ensures PAFC provider agencies follow DHS policy and licensing regulations in emergency planning.

- **DHS or PAFC provider licensing certification worker** – The DHS or PAFC provider licensing certification worker maintains an updated list of local resources to assist during a disaster, including those for shelter, food, clothing, diapers and other emergency assistance. The licensing certification worker disseminates the list as directed by agency policy and as necessary during a disaster.

- **Child Welfare Caseworker (DHS and PAFC)** – DHS and PAFC caseworkers maintain contact information for all children on their caseload on the Services Worker Support System (for DHS only) or SACWIS (following implementation in 2012), as well as a non-automated list, in case computer systems are inoperable. In areas affected by a disaster, the caseworker will contact foster parents to ascertain the whereabouts and well-being of the children in their care. The caseworker is responsible to contact legal parents and inform them of the safety of their children, maintain service provision to children and families on their caseload, as well as to provide services to newly referred clients.

- **Foster, adoptive, relative and unrelated caregivers** – All caregivers are responsible to develop an emergency plan, in accordance with licensing requirements. Licensed foster parents are also responsible to communicate the whereabouts, status and service needs of the children in their care to their DHS or PAFC caseworker during emergencies when voluntary or involuntary evacuation or shelter has occurred.

### DHS Emergency Planning Licensing Requirements

**Foster Family Homes and Foster Family Group Homes for Children**

R 400.9410 Emergencies.

Rule 410.(1) A foster parent shall follow agency approved written procedures for each of the following emergencies:

(a) Fire.

(b) Tornado.

(c) Serious accident or injury.

(2) A foster parent who provides care for a person who requires assistance to evacuate the home shall follow agency approved written procedures for prompt evacuation.
(3) A foster parent shall familiarize each member of the household, including the foster child, according to the child’s ability to understand, and persons who provide substitute care with the emergency and evacuation procedures.

PROPOSED NEW RULE: Foster families shall practice drills with all family members every four months.

Child Placing Agencies
R 400.12412 Emergency policy.

Rule 412. (1) An agency’s emergency policy shall, at a minimum, contain provisions for ensuring that a foster parent has agency-approved written procedures for each of the following emergencies:
(a) Fire.
(b) Tornado.
(c) Serious action or injury.
(2) An agency shall approve the written evacuation plan for a foster home that provides care for a person who requires assistance to evacuate the home.

Child Caring Institutions
R 400.4170 Emergency and disaster procedures.

Rule 170. An institution shall establish and follow written procedures for potential emergencies and disasters, including fire, severe weather, medical emergencies, and missing persons.

R 400.4506 Fire drills and telephone.

Rule 506. (1) There shall be quarterly emergency fire drills for each staff shift. Two of the drills shall include evacuations, unless approved by the department in writing, as clinically contraindicated. Where a facility has a 24-hour staff shift, the emergency drills shall be conducted at different times of the day and night. Written records shall be maintained for each drill indicating the date and time of the drill and, where evacuation was a part of the drill, the approximate evacuation time.

(2) A telephone or other suitable means of communicating an alarm of fire to the fire department shall be provided. Pay stations are not a suitable means of communicating alarms. The telephone number of the fire department shall be posted conspicuously by all phones designated for outside service.
Emergency Response Planning for State-Level Child Welfare Functions

- **Coordinate with the Michigan Emergency Coordination Center.** The state-level Emergency Coordination Center is activated by the DHS Emergency Management Coordinator during a state-declared emergency or at the request of a local DHS local director or designee. The coordination center is a central location for coordination of services and resources to victims of a disaster.

- **Local shelter and provision of emergency supplies.** DHS requires all DHS local offices to have a plan for disasters that provides temporary lodging and distributes emergency supplies and food, as well as an emergency communication plan. This plan should use the state plan for widespread emergencies and should also address local emergencies.

- **Dual and tri-county emergency plans.** In large counties with more than one local office site or in local offices located in dual or tri-counties, each local office site is required to have an emergency or disaster plan designed to address unique local needs. Local and district DHS offices submit their emergency office procedures to the Field Operations Administration/Child Welfare Field Operations for approval and to the DHS Emergency Management Coordinator. DHS local offices review and update their disaster plans annually and re-submit updated plans.

- **Foster parent emergency plans.** In addition, according to licensing rules for foster family home and foster family group homes for children, licensed foster parents must develop and maintain an emergency plan to use in case of emergency. This plan must include a plan for relocation, if necessary, communication with DHS and PAFC caseworkers and birth parents, a plan to continue the administration of any necessary medications to foster children, and a central repository for essential child records. The plan must also include a provision for practicing drills with all family members every four months.

- **Institutions.** Similarly, according to licensing rules for child caring institutions, an institution shall establish and follow written procedures for potential emergencies and disasters including fire, severe weather, medical emergencies and missing persons.

**Local Office Emergency Procedures**

**Local office plans – required elements.** DHS local offices are each required to create their own emergency plans that address local needs and resources. The required elements of local office emergency plans include:

- Resource list - A listing of local facilities suitable for temporary lodging and local resources for emergency supplies, clothing and food. The licensing certification worker updates and distributes this list annually and as needed during an emergency.
An emergency communication plan that includes the person to contact in case of emergency. When there is an emergency or natural disaster, a communications center in a different region from the disaster area shall be established as a backup for the regional/local office. The selected site should be far enough away geographically that it is unlikely to be affected directly by the same event.

A hard copy listing of all foster care placements for children under the supervision of the local office that includes telephone numbers, addresses and alternate contact persons.

Local emergency plans are submitted to the Child Welfare Field Operations Administration and the DHS emergency management coordinator, and are reviewed and revised as necessary to ensure that all required elements are included.

**Staff Communication Protocol.** During an emergency, the local office will mobilize a protocol to communicate with staff to ascertain their safety and ability to come to the work site (or an alternative site) and perform emergency and routine duties. The local office director or designee will initiate this protocol. The local office director or designee will maintain contact with the DHS Emergency Management Coordinator to synchronize services and provide updates.

**Caregiver Communication Protocol.** During an emergency that involves evacuation, either voluntary or mandatory, all caregivers shall inform DHS of their foster children’s whereabouts and status using telephone service, cell phone, email or another means of communication when normal methods of communication are compromised. **Note:** The CPS centralized intake process is expected to be implemented in April 2012. CPS centralized intake will provide a toll-free number that caregivers may use for this purpose. Prior to implementation of CPS centralized intake, foster parents shall use telephone service, cell phone or email as a method of informing DHS of this information.

**Disaster Coordination Protocol.** Each local office will designate an individual(s) to coordinate information from the area affected by a disaster and communicate it to the Field Operations Administration/Child Welfare Field Operations. The protocol will include instructions that all staff in the affected area should call in to a locally designated communication center. The foster caregiver guidelines for responding to emergencies, as referenced, shall include the CPS centralized intake toll-free number, or another method.
The local emergency/disaster plan shall include:

1. Whom staff and clients may contact for information locally during an emergency during normal work hours as well as after hours.
2. The expectation that all staff not directly affected by an emergency shall report for work unless excused.
3. Whom clients may contact during an emergency when all normal communication channels are down.
4. The person designated to contact the legal parent to inform them of their child’s status, condition and whereabouts if appropriate.
5. The minimum frequency that all caregivers shall communicate with the designated communication site during emergencies or natural disasters.
6. The necessary information to be communicated in emergencies.
7. How and where in the case record the information is to be documented.
8. The method of monitoring the situation and the local person responsible.
9. Procedures to follow in case of voluntary or involuntary closure of facilities.
10. Any additional requirement as specified by the local or regional office.

Foster Parents’ Responsibilities Developing an Emergency Plan

- **Family emergency plan.** Licensed foster parents shall develop and display a family emergency plan that will be approved by their local office and become part of their licensing home study. Foster parents must update and review their plans annually. Their plan should include:
  1. An evacuation plan for various disasters, including fire, tornado and serious accident.
  2. A meeting place in a safe area for all family members if a disaster occurs.
  3. Contact numbers which shall include:
     a. Local law enforcement.
     b. Regional communication plan with contact personnel.
     c. Emergency contacts and telephone numbers of at least one individual who is likely to be in contact with the foster parent in an emergency. It is preferable to list one local contact and one out-of-county contact.
     d. DHS CPS centralized intake toll-free number or another emergency number to be used when no other local/regional communication channels are available.
  4. A disaster supply kit that includes special needs items for each household member (as necessary and appropriate), first aid supplies including prescription medications, a change of clothing for each person, a sleeping
bag or bedroll for each foster child, battery powered radio or television, batteries, food, bottled water and tools.

5. Each local office designates a contact person as the disaster relief coordinator. In the event of a mandatory evacuation order, foster parents must comply with the order insofar as they must ensure they evacuate foster children in their care according to the plan and procedures set forth by the State Emergency Management Agency (DHS).

- **Communication with DHS caseworkers during emergencies.** Foster parents and DHS caseworkers have a mutual responsibility to contact each other during an emergency that requires evacuation or displacement to ascertain the whereabouts, safety and service needs of the child and family, as described above.

- **School response.** As part of the disaster plan, each foster parent will identify what will happen to the child if he/she is in school when an emergency occurs, such as an arrangement for moving the child from the school to a safe, supervised location.

- **Review plan with each foster child.** Each foster home will review this plan with each of their foster children regularly and the worker will update this information in the provider’s file.

**Federal Disaster Response Procedures**

Following is a listing of the required procedures for disaster planning and Michigan’s procedures that address those requirements:

1. **To identify, locate and continue availability of services for children under state care or supervision.**

   - During an emergency that involves evacuation, either voluntary or mandatory, all caregivers shall inform DHS of their foster children’s whereabouts, status and service needs, utilizing telephone service, cell phone, email or another means of communication when normal methods of communication are compromised. **Note:** The CPS centralized intake process is expected to be implemented in April 2012. This process will provide a toll-free number that may be mobilized for caregiver communication. Prior to implementation of CPS centralized intake, all caregivers shall use telephone service, cell phone, email or another method to inform DHS of this information.

   - Following declaration of a public emergency that involves involuntary evacuation or shelter, the assigned caseworker or another designated worker will contact the legal parent to ascertain the whereabouts, condition and needs of the child and family.
The local office must provide information regarding where to seek shelter, food, and other resources and shall coordinate services with the DHS Emergency Management Coordinator. The voluntary or involuntary closure of facilities in emergencies is addressed in the licensing rules for child placing agencies (R 400.12412 Emergency Policy).

2. Respond as appropriate to new child welfare cases in areas adversely affected by a disaster and provide services in those cases.

- If current staff is displaced or unable to provide services, alternate counties designated in local DHS disaster plans shall be prepared to help provide services to new child welfare cases and to children under state care or supervision displaced or adversely affected by a disaster. Following implementation of CPS centralized intake in April 2012, the toll-free centralized intake number will be the primary means of accessing services for new child welfare cases.

3. Remain in communication with caseworkers and other essential child welfare personnel who are displaced because of a disaster.

- In an emergency, caseworkers and caregivers must first attempt to call their local office to report their status and receive information or instructions. If the local office phone lines are unavailable, caseworkers and caregivers will contact the alternate local office. In dual or triple counties, they will call the designated alternate county.
- Caseworkers may also use cell phones to remain in contact. Michigan State Police radios are located in offices without cell phone towers in order to maintain cell phone service.
- If the local Emergency Coordination Center is activated by the DHS Emergency Management Coordinator, a toll-free number may be available as a backup communication method for current and new child welfare cases.

4. Preservation of essential program records.

- DHS maintains essential records in the Services Worker Support System (SWSS) database and can access records statewide. DHS caregivers enrolled in electronic funds transfer will not have a disruption in foster care payments, since payments are made to their account electronically.
- To safeguard the database itself, the servers are located in Michigan’s secure data center. Schedules are configured to perform a full system backup for both onsite and offsite storage. The databases are also configured for live replication in case of a disaster that involves loss of the primary server. The Department of Technology, Management and Budget keeps one quarterly update per year and maintains an annual backup indefinitely. That code base is backed up as well, so in case of a
catastrophic event that affects the computer system, the application can be rebuilt with minimal loss of time.

5. **Coordinate services and share information with other states.**
   - In the event of an emergency, the DHS Emergency Management Coordinator is responsible, under the direction of the Michigan governor and in coordination with the state DHS director, to mobilize and coordinate the statewide emergency response including sharing information with other states.
   - The DHS Office of Communication will coordinate communication on the DHS emergency response to the news media, DHS executive staff and human resources, persons served and the public.

**State and local resources for disaster planning.** Michigan makes several resources available to local offices to assist them in local planning efforts. These resources include:

- **The DHS Emergency Planning Coordinator** who assists local DHS offices to develop, document and rehearse local disaster plans.

- **State disaster-planning web site** [www.michigan.gov/michiganprepares](http://www.michigan.gov/michiganprepares). Topics include:
  - Family and Community Disaster Planning.
  - Biological Emergency.
  - Chemical Emergency.
  - Radiological Emergency.
  - Natural Disaster and Severe Weather.
  - Preparedness Partners.

- **A booklet titled “Family Preparedness Guide”** is available on the Michigan Homeland Security web site: [http://www.michigan.gov/homeland/0,1607,7-173-23583-25233--,00.html](http://www.michigan.gov/homeland/0,1607,7-173-23583-25233--,00.html). This guide was created to help families develop an emergency plan, provide information on how to assemble an emergency supply kit, and provides specific contact telephone numbers and websites for emergency assistance.

- **Other useful resources for child welfare disaster planning:**
  - Annie E. Casey Foundation Disaster Preparedness Resource Guide for Child Welfare Agencies – A comprehensive guide to resources for disaster planning for child welfare agencies (69 pages): [http://www.aecf.org/KnowledgeCenter/Publications.aspx?pubguid=%7B56AD3324-B60C-418F-8F8C-96A43650413C%7D](http://www.aecf.org/KnowledgeCenter/Publications.aspx?pubguid=%7B56AD3324-B60C-418F-8F8C-96A43650413C%7D)
  - American Public Human Services Association: Crisis Communications Plan; Disaster Communications Plan. Provides formal and informal interactions regarding crisis and
emergency situations in public human service agencies: 

**Goal:** DHS will implement the disaster plan described above in collaboration with the Field Operations Administration and the CPS and foster care program offices.

**Status:** Michigan was not affected by a disaster in the past year. The revised child welfare disaster plan is currently in draft status. Specific implementation strategies will be devised collaboratively in FY 2011 and 2012.

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**MONTHLY CASEWORKER VISIT DATA**

Michigan continues to improve the rate of children in foster care visited by their caseworkers every month. The targets for the percentage of children visited each month by fiscal year are:

- **FY 2008:** 20 percent (Michigan achieved 27 percent).
- **FY 2009:** 40 percent (Michigan achieved 43 percent).
- **FY 2010:** 70 percent (Michigan achieved 71 percent).
- **FY 2011:** 90 percent.

Efforts in the last year to improve the rate of monthly visitation include:

- Reducing foster care workers’ caseloads.
- Clarifying policy.
- Providing statewide training to DHS and private agency staff.
- Modifying the Services Worker Support System (SWSS FAJ) data collection to ensure every visit made to children in foster care is counted.

CPS policy was revised in October 2009 to require at least one monthly visit by the CPS worker with the family; visits by service contractors, including Families First of Michigan and Family Reunification Program workers, cannot replace all of the monthly visits. A field instruction incorporated into DHS policy set periods for private agency workers to submit caseworker contacts to DHS, and for DHS workers to enter data into SWSS.

DHS revised adoption policy on June 1, 2010 to require the adoption worker to have a face-to-face visit with the child a minimum of once each calendar month during the period of adoptive placement supervision until the court signs the adoption order.

Foster care, adoption and juvenile justice policy was updated in summer 2010 to ensure uniform requirements regarding caseworker visits. A caseworker must make a face-to-face visit with the child a minimum of once each calendar month and the visit must take place in the
Michigan Annual Progress and Services Report 2011

child’s placement at least every other month. DHS revised management reports to help supervisors track performance. The reports include:
- The number of monthly visits to the children.
- The number of visits that occurred in the child’s residence.
- The timeliness of entering visitation data in SWSS.

**Goal:** Michigan will report the monthly caseworker visit data each fiscal year by December 15.

**Technical Assistance Provided to Counties and Local and Regional Entities**

**Caseworker Visit Enhancement Funding**

Michigan used title IV-B caseworker visit enhancement funds to train 2,200 DHS and private agency foster care, children’s protective services, adoption workers and supervisors on the importance of caseworker visitation in improving case outcomes in the areas of safety, permanency and well-being. The training:
- Reviewed DHS policy on caseworker/child visitation requirements.
- Linked federal and state requirements on risk and safety assessments to address child and family well-being.
- Focused on strengthening caseworker assessment and communication skills.
- Strengthened caseworkers’ abilities to ascertain family needs and strengths to plan services effectively.
- Emphasized correct case record documentation of visits in SWSS to ensure accurate data collection and reporting.

DHS Federal Compliance Division staff interviewed several former foster youth on their experience with their caseworkers. The youth described what their caseworkers did that helped them to understand and grow through their experiences in foster care and gave recommendations to caseworkers regarding visits and interactions with children. From these interviews, staff produced a short video used in the training to focus discussion on the needs of children and youth in foster care. Participants attending training by position and affiliation are:

<table>
<thead>
<tr>
<th>DHS</th>
<th>*Anticipated Number</th>
<th>Number Attended</th>
<th>Percentage of Attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor</td>
<td>296</td>
<td>295</td>
<td>99%</td>
</tr>
<tr>
<td>Foster care</td>
<td>766</td>
<td>698</td>
<td>91%</td>
</tr>
<tr>
<td>CPS</td>
<td>895</td>
<td>760</td>
<td>85.5%</td>
</tr>
<tr>
<td>Adoption</td>
<td>35</td>
<td>56</td>
<td>160%</td>
</tr>
<tr>
<td>Total</td>
<td>1,992</td>
<td>1,809</td>
<td>91%</td>
</tr>
</tbody>
</table>

* Anticipated number was based on local office self-report of staffing allocations.
<table>
<thead>
<tr>
<th>Private Agency</th>
<th>Anticipated Number</th>
<th>Number Attended</th>
<th>Percentage of Attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adoption</td>
<td>168</td>
<td>98</td>
<td>58%</td>
</tr>
<tr>
<td>Adoption supervisor</td>
<td>49</td>
<td>21</td>
<td>43%</td>
</tr>
<tr>
<td>Foster care</td>
<td>457</td>
<td>216</td>
<td>47%</td>
</tr>
<tr>
<td>Foster care supervisor</td>
<td>110</td>
<td>58</td>
<td>53%</td>
</tr>
<tr>
<td>Total</td>
<td>784</td>
<td>393</td>
<td>50%</td>
</tr>
</tbody>
</table>

Since DHS staff (rather than private agency caseworkers) are responsible for entering data on visits into case records in SWSS, their receipt of this training should have an impact on visit frequency data.

**Family Engagement Conference**

DHS and the State Court Administrative Office held “Fostering Change: A New Vision for Family Engagement” in September 2010 for judges, court personnel, child welfare administrators, service providers and caseworkers. It emphasized the importance of collaboration within the child welfare community in assisting families to safely care for their children. DHS evaluated the training effectiveness through attendance and participant ratings. Fifty-seven percent of attendees submitted ratings and those results affirmed that the training was effective in focusing attention on family engagement.

The impact of this training on casework in the field will be measured through quality assurance case reviews where we would expect to see evidence of the following:

- Increased participation by absent parents.
- Improvement in the individualization of case plans.
- Increased effectiveness of service selection and provision to families.

**Additional Online Training**

DHS is developing two caseworker visit training videos on policy requirements for CPS, foster care, adoption and juvenile justice case visits and how to enter data in SWSS. These trainings will be available in May 2011.

**Private Agency SWSS Interface Application**

In July 2011, DHS will pilot a SWSS interface so private agency caseworkers can enter data, minimizing the opportunity for lost information and delays in data entry.

**INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN**

The uniform law enacted in all 50 states establishes procedures for interstate placement of children and assigns responsibility for those placing the child. Michigan’s Interstate Compact Office is liaison between DHS offices and other states to ensure compliance with compact regulations and effective coordination for timely and safe interstate placements.
Children may be sent to other states for placements:
- Preliminary to an adoption and for an adoption.
- For foster care including foster homes, group homes, residential facilities and institutions.
- With parents and relatives when a parent or relative is not making the placement.
- For adjudicated delinquents that need placement in another state’s institution.

**Number of Michigan Youth Placed Out-of-State**
April 2011 data indicates there have been home studies approved that allow 700 Michigan youth to be placed across state lines. The breakdown is:
- Relative 47
- Adoption 103
- Private Adoptions 172
- Parent 99
- Foster Care 30
- Court Residential 136
- Abuse/Neglect Residential 4
- Relative Foster Care 108
- Group Home 1

**Number of Out-of-State Youth Placed in Michigan**
April 2011 data indicates there have been home studies approved so 429 youth from other states can be placed in Michigan. The breakdown is:
- Relative 64
- Adoption 43
- Private Adoptions 62
- Parent 83
- Foster Care 96
- Court Residential 25
- Abuse/Neglect Residential 2
- Relative Foster Care 54

**The Safe and Timely Interstate Placement of Foster Children Act**
Michigan implemented the Safe and Timely Interstate Placement of Foster Children Act of 2006 to improve child protection and to hold states accountable for safe and timely placement across state lines. The act requires foster care and adoptive home studies be completed within 60 days after the state receives a request from another state. Michigan Interstate Compact staff completed home study requests within the 60-day requirement for:
- FY 2008: 79% (385 of 785).
- FY 2009: 64% (320 of 499).
- FY 2010: 56% (272 of 481).
For the 44 percent of home studies not completed by Michigan within 60 days in FY 2010, the reasons most often given include:

- Delays in the licensing process.
- Obtaining fingerprinting and background check information.
- Receiving family members’ medical information.

By comparison, Michigan sent 376 requests for home studies to other states in 2010, and only 82 (22 percent) were completed in the 60-day requirement.

**Interstate Compact for Juveniles**
The Interstate Compact for Juveniles regulates proper placement, supervision or return of juveniles, delinquents, and status offenders who are on probation or parole and who have absconded, escaped or run away from supervision and control, and in doing so, have endangered their own safety or the safety of others. The DHS office:

- Ensures supervision and services for adjudicated juveniles and status offenders coming from other states.
- Returns juveniles who have run away, absconded or escaped to the state and request their return.
- Tracks and supervises juveniles.
- Establishes policy and procedure to manage movement between states of juvenile offenders released to the community.
- Monitors compliance with rules governing interstate movement of juveniles.

There are 115 Michigan juveniles placed in other states with parents, relatives and guardians and 145 from other states placed in Michigan through the process. Additionally, the DHS office helped return 56 runaways, escapees or absconders.

**Goals and Objectives**
Michigan initiatives include:

- Working with the legislature to revise the current Interstate Compact on the Placement of Children to incorporate the new, nationally enhanced compact.
- Reviewing the supporting documentation in court orders so it verifies the criteria for placing juveniles out of state. Staff will update office procedures to ensure verification criteria are met before processing court orders.
- Developing a training curriculum to court personnel, DHS staff and private providers.
- Ensuring interstate policy has greater clarity, is more efficient and results in effective compliance.
- Establishing a state council to advise and advocate in response to requirements of the Interstate Compact for Juveniles.
- Updating and maintaining the DHS website to allow easier access to information on the Interstate Compact Unit.
<table>
<thead>
<tr>
<th></th>
<th>Irene Carrillo’s comments from email</th>
<th>Response/Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>This should be APSR FY2011, see PI 11-06, page 6, under Service Description the first bullet: Report on the specific accomplishments and progress achieved to date in the past fiscal year... The document should be the 2011 APSR, since you are reviewing FY2011 performance and reporting on changes for the next fiscal year FY2012, and since you submitted MI 2010 APSR last year?</td>
<td>Cover page and header corrected.</td>
</tr>
<tr>
<td>2</td>
<td>Page 15 – For the record, page 15 does not accurately reflect the official IV-E Review Findings, the Official Findings are always provided to the State via official correspondence. The initial official correspondence found the State out of compliance, then reversed the finding as a result of the DAB finding which found the State in compliance.</td>
<td>Corrected. See highlighted area in the title IV-E section on page 14.</td>
</tr>
<tr>
<td>3</td>
<td>Page 30-43 – CTF, it is not clear how the DHS collaborates with the CTF. It is clear what the CTF does.</td>
<td>See additional information in the highlighted area on page one of the Children’s Trust Fund section on page 29.</td>
</tr>
<tr>
<td>4</td>
<td>Page 43-53 – Are there any updates of the Prevention Pilot for FY11?</td>
<td>See DHS Prevention Pilot FY 2011 Monitoring Report (Attachment F). The pilot is being funded in FY 2012. Changes for FY 2012 include the addition of Post Adoption Support Services and the target population will be birth to ten, not birth to eighteen. Funding has been reduced by 1.92% for FY 2012.</td>
</tr>
<tr>
<td>5</td>
<td>Page 45-51 – IV-B, Subpart II program – There are many goals without objectives or measures in this section.</td>
<td>See goal clarification in the highlighted areas in the Community Based Services section on page 43.</td>
</tr>
<tr>
<td>6</td>
<td>Page 52 – Safety, it is stated during the FY, not sure which FY??? Later there is a report about FY10, but what about progress in FY11??</td>
<td>See the highlighted area in the Permanency: Foster Care section where the following narrative was added on page 50: “During FY 2010, 583 exceptions were approved; 345 kept siblings together. Numerical data for FY 2011 is not available at this time and will be reported in the 2012 Annual Progress and Services Report. Exceptions have been approved at approximately at the same rate at FY 2010 so far.”</td>
</tr>
<tr>
<td>7</td>
<td>Page 63 – Regarding Well-Being for FY10, there are no results.</td>
<td>See the highlighted area in the Permanency: Foster Care section, where the following narrative was added on page 61: “As the result of the Michigan’s CFSR in FY 2009, the state is...”</td>
</tr>
</tbody>
</table>
### Attachment A - 2011 Michigan Annual Progress and Services Report Additional Information

<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>Pages 64-69 – Chafee/ETV See PI 11-06 , last bullet on page 18. States are to report on the specific accomplishments achieved to date in FY2011 and planned for FY2012. Please review your report and revise it to meet the required timeframes, in all sections. Additionally, Staff should review the bullets on pages 19 and 20 to assure all required areas are included in the Report.</td>
<td>See additional information in highlighted areas in the CFCIP/ETV section on page 62.</td>
</tr>
<tr>
<td>9</td>
<td>100-107 – Recruitment and Retention plan, please describe planned activities for recruiting foster and adoptive families in FY 2012.</td>
<td>See additional information in highlighted areas in the Adoptive and Foster Parent Recruitment Plan section on page 98.</td>
</tr>
</tbody>
</table>
| 10   | 144- 152 - States are required to review their previously submitted disaster plan to determine if changes are needed. If the State determines changes are necessary, describe the changes the State is making in the APSR or include an updated disaster plan. If the State determines that no changes are necessary, note this fact in the APSR. I could not find this, also was the State affected by a disaster in the past year, if so describe how the plan was used and assess its effectiveness. If not, please say that. | The latest draft of the DHS Child Welfare Disaster Plan is included in APSR 2011. Please see Child Welfare Disaster Plan section on page 141.  
Michigan was not affected by a disaster in the past year, as noted in the plan. |
| 11   | Tribal Attachment - State agencies and Tribes must also exchange copies of their CFSP and their APSR. Describe how the State is meeting this requirement. Also, please let us know whether and how the State has negotiated in good faith with any Tribe that requested to develop an agreement to administer or supervise the CFCIP or an ETV program with respect to eligible Indian children and to receive an appropriate portion of the State's allotment for such administration or supervision. Describe the outcome of that negotiation. | See highlighted area in the Tribal Consultation section on page 28 where the following narrative was added: “The DHS title IV-B plan/2011 APSR was created collaboratively with tribal members at the April 2011 Tribal State Partnership meeting. The exchange of tribal/DHS IV-B plans did not occur at the July meeting as planned, as not all tribes participated. The DHS IV-B plan will be sent/requested individually to Michigan tribes in September, 2011. The DHS title IV-B Plan is available for review on the DHS public website.” |
| 12   | Program Section - Describe the State technical assistance provided to counties and other local or regional entities that operate State programs and its impact on the achievement of CFSP/APSR goals and objectives. Describe training and technical assistance that will be | Headings and highlighting added to mark technical assistance provided in various program areas. |
| 13 | ETV Section - Describe the specific accomplishments and progress to establish, expand, or strengthen the State’s postsecondary educational assistance program to achieve the purpose of the ETV program. | See additional information in highlighted areas in the ETV section on page 67. |
| 14 | Fiscal Comments forwarded by Anthony Sullivan, Regional Office of Grants Management, to Deborah Christopherson and Mary Mehren:  
CFS 101 Part 1:  
- Actual Expenditure amount for line 5 does not match the amount shown in OLDC.  
- Concerns as to why Michigan did not expend any Case Worker funds (line 7)?  
Payment limitations and non-supplantation (section G of the PI):  
- There are no figures listed for the 2005 payment limitation amounts.  
- There are no figures listed for the 1992 nonsupplantation base.  
IV-E training plan narrative:  
These issues are not addressed as required by the latest program instruction:  
- Indication of the specifically allowable title IV-E administrative functions the training activity addresses;  
- Whether any amount allocable to a title IV-E program is to be claimed at the regular FFP rate of 75% or at the transitional FFP rate (70% in FY 2012) applicable to Relative Guardian and Professional Partner training;  
- Description of estimated total cost; and  
- Cost allocation methodology.  
- Indication of the audience to receive the training  
- Paragraph descriptions of courses offered. | See corrected CFS 101, Part III (Attachment B).  
See Title IV-B(1) 2012 match compared 2005 (Attachment C).  
See IV-B part 2 MOE FY09 report (Attachment D). |
| 15 | Training Plan – As discussed in earlier e-mails, the PI includes details of the following elements that must be included in States’ title IV-E training plans in order to be considered eligible for FFP:  
- A description of the initial in-service training program for new or reassigned | See APSR Training Overview (Attachment G). |
employees that includes a description of the content and scope of the
classroom and work experience components of the training, as well as the
duration of the initial in-service training period and the specific supports
provided during this period.

- For all types of training (e.g., training for individuals preparing for
employment, initial in-service training, ongoing in-service training,
foster/adoptive provider training, and the new categories of short-term
training authorized by P.L. 110-331) include the following:

1. a brief, one-paragraph syllabus of the training activity;
2. indication of the specifically allowable title IV-E administrative
   functions the training activity addresses;
3. indication of the setting/venue for the training activity;
4. indication of the duration category of the training activity (i.e.,
   short-term, long-term, part-time, full-time);
5. indication of the proposed provider of the training activity;
6. specification of the approximate number of days/hours of the
   training activity;
7. indication of the audience to receive the training (see discussion
   above expanding the list of eligible trainees);
8. description of estimated total cost; and
9. cost allocation methodology.

| 16 | For Training please discuss this, since the State opted into GAP. P.L. 110-351 amended section 474(a)(3)(B) of the Act to create new trainee groups under title IV-E. Title IV-E agencies may claim the costs of short-term training of relative guardians provided the State has opted in its title IV-E plan to provide kinship guardianship assistance payments to relatives; staff members of State-licensed or State-approved child welfare agencies providing services to children receiving title IV-E assistance; staff members of child abuse and neglect courts personnel; agency attorneys, attorneys representing children or parent; guardians ad litem, or other court-appointed special advocates representing children in proceedings of such courts, in ways that increase the ability of such current or prospective parents, guardians, staff members, institutions, attorneys, and advocates to provide support and assistance to foster and adopted children and children living with relative guardians, whether incurred directly

See highlighted area on page 5 of the APSR Training Overview (Attachment G).
by the State or by contract. The Federal financial participation (FFP) rate of Federal reimbursement for such training costs changes each year over a five-year period, as follows: 55 percent in FY 2009; 60 percent in FY 2010; 65 percent in FY 2011; 70 percent in FY 2012; 75 percent in FY 2013 and thereafter (section 203(b) of P.L. 110-351). The training plan must identify whether and how the agency will train persons in these new trainee groups consistent with the elements above. To the extent that any such training was or is planned to be accomplished during FY 2009 and was not included in the FY 2009 training plan, the State must include this information as part of its new training plan submission, as well.
DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION for CHILDREN and FAMILIES
Administration on Children, Youth and Families
1250 Maryland Avenue, S.W.
Washington, D.C. 20024

NOV - 1 2011

Maura Corrigan, Director
Michigan Department of Human Services
235 South Grand Avenue
P. O. Box 30037
Lansing, Michigan 48909

Dear Ms. Corrigan:

Thank you for submitting Michigan’s new Child Abuse Prevention and Treatment Act (CAPTA) State Plan, the Annual Progress and Services Report (APSR), and the CFS-101 requesting funding for fiscal year (FY) 2012 to address the following programs:

- CAPTA State Grant;
- Title IV-B, Subpart 1 (Stephanie Tubbs Jones Child Welfare Services);
- Title IV-B, Subpart 2 (Promoting Safe and Stable Families);
- Chafee Foster Care Independence Program (CFCIP); and
- Education and Training Vouchers (ETV) Program.

These programs provide important funding to help State child welfare agencies ensure safety, permanency, and well-being for children, youth and their families. The APSR planning process facilitates continued development and assessment of a comprehensive continuum of services for children and families and ties planning for the use of these funds into assessment and program improvement activities, including those of the Child and Family Services Reviews.

The Children’s Bureau (CB) has reviewed your CAPTA State Plan and your APSR for FY 2012 funding and finds Federal statutory and regulatory requirements at 45 CFR 1357.15 and 1357.16 to be in compliance. The State has indicated that in order to fully comply with three of the new CAPTA assurances at section 106(b)(2)(B) of CAPTA it must seek legislation. The State has submitted a plan that will bring the State into compliance with these CAPTA requirements by April 30, 2012. We approve this plan as the State’s CAPTA Program Improvement Plan (PIP) and require the State to provide progress reports on efforts made towards achieving compliance. Therefore, we approve FY 2012 funding under the CAPTA State grant; title IV-B, subpart 1; title IV-B, subpart 2; CFCIP; and ETV programs.

Please note that while the State will no longer need to submit a new CAPTA State Plan every five years with the Child and Family Services Plan, to facilitate coordination between the CAPTA State plan and title IV-B, CB will continue to require that the annual report describing use of CAPTA funds be submitted with the APSR.
A counter-signed copy of the CFS-101 is enclosed for your records. CB may ask for a revised CFS-101, Part I, should the final allotment for any of the approved programs be more than that requested in the Annual Budget Request. The Administration for Children and Families’ (ACF) Office of Grants Management (OGM) will issue a grant notification award letter with pertinent grant information. Please note that OGM requires grantees to submit additional financial reports, using the SF-425, at the close of the expenditure period according to the terms and conditions of the award.

The State has indicated that it will need legislative changes before it can fully comply with assurances at CAPTA sections 106(b)(2)(B)(xiii), (xvi), and (xvii) and has set forth a PIP that is approved. The Regional Office (RO) will monitor the implementation of the State’s CAPTA PIP. The State is required to provide the RO with a status report quarterly. The first progress report will be due December 31, 2011.

This approval for the FY 2012 funding for title IV-B, subpart 1; title IV-B, subpart 2; CAPTA; CFCIP; and ETV programs does not release the State from ensuring that the training costs included in the training plan and charged to title IV-E comply with the requirements at 45 CFR 1356.60(b) and (c) and 45 CFR 235.63 through 235.66(a), including properly allocating costs to all benefiting programs in accordance with the State’s approved cost allocation plan.

Pursuant to Section 424(c)(1) of the Social Security Act, States are required to collect and report on caseworker visits with children in foster care. The FY 2011 caseworker visit data must be submitted to the Regional Office by December 15, 2011.

CB looks forward to continuing to work with you and your staff. Should you have any questions or concerns, please contact Angela Green, Child Welfare Regional Program Manager in Region V, at (312) 353-9672 or by e-mail at angela.green@acf.hhs.gov. You also may contact Irene Carrillo, Children and Families Program Specialist, at (312) 886-4934 or by e-mail at irene.carrillo@acf.hhs.gov.

Sincerely,

Joseph J. Bock
Acting Associate Commissioner
Children’s Bureau

Enclosures

cc: Steve Yager, Deputy, Children’s Services; Michigan DHS; Lansing, MI
Mary Mehren, Federal Compliance Office Director; Michigan DHS; Lansing, MI
Gail Collins, Director; CB, Division of Program Implementation; Washington, DC
Deborah M. Bell, Financial Management Specialist; ACF, OA, OGM; Washington, DC
Angela Green, Child Welfare Regional Program Manager; CB, Region V;
Chicago, IL
**Attachment B**

CFS-101, Part I
U.S. Department of Health and Human Services
Administration for Children and Families

### CFS-101, Part I: Annual Budget Request for Title IV-B, Subpart 1 & 2 Funds, CAPTA, CFcip, and ETV

**Fiscal Year 2012, October 1, 2011 through September 30, 2012**

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>State or Indian Tribal Organization (ITO): Michigan</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Address: 235 S. Grand Avenue, Lansing, MI 48909</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Total estimated title IV-B Subpart 1, Child Welfare Services (CWS) Funds</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(a) Total administration (not to exceed 10% of title IV-B Subpart 1 estimated allotment)</td>
<td>$8,695,795</td>
</tr>
<tr>
<td></td>
<td>(b) Total estimated title IV-B Subpart 2, Provides Safe and Stable Families (PSSF) Funds</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(a) Total administration</td>
<td>$390,809</td>
</tr>
<tr>
<td></td>
<td>(b) Total Family Preservation Services</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(c) Total Family Support Services</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(d) Total Time-Limited Family Reunification Services</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(e) Total Adoption Promotion and Support Services</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(f) Total for Other Service Related Activities (e.g., planning)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(g) Total administration (FOR STATES ONLY: not to exceed 10% of title IV-B Subpart 2 estimated allotment)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(h) Total estimated Monthly Caseworker Visit (MCV) Funds (FOR STATES ONLY)</td>
<td>$765,946</td>
</tr>
<tr>
<td></td>
<td>(a) Total administration (FOR STATES ONLY: not to exceed 10% of estimated MCV allotment)</td>
<td>$76,595</td>
</tr>
<tr>
<td>8.</td>
<td>Re-allocation of title IV-B subparts 1 &amp; 2 funds for States and Indian Tribal Organizations:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(a) Indicate the amount of the State's/Tribes' allotment that will not be required to carry out the following programs:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(i) CWS $0, PSSF $0, and/or MCV(States only)$0</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(b) If additional funds become available to States and ITOS, specify the amount of additional funds the States or Tribes requesting: CWS $<strong><strong><strong><strong>, PSSF $</strong></strong></strong></strong>, and/or MCV(States only)$________</td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Child Abuse Prevention and Treatment Act (CAPTA) State Grant (no State match required): Estimated Amount plus additional allocation, as available. (FOR STATES ONLY)</td>
<td>$785,736</td>
</tr>
<tr>
<td>10.</td>
<td>Estimated Chafee Foster Care Independence Program (CFcip) funds</td>
<td>$5,591,145</td>
</tr>
<tr>
<td>11.</td>
<td>Estimated Education and Training Voucher (ETV) funds</td>
<td>$1,864,453</td>
</tr>
</tbody>
</table>

### Certified by State Agency and/or Indian Tribal Organization:

The State agency or Indian Tribe submits the above estimates and request for funds under Title IV-B, subpart 1 and/or 2 of the Social Security Act, CAPTA State Grant, CFcip and ETV programs, and agrees that expenditures will be made in accordance with the Child and Family Services Plan, which has been jointly developed with, and approved by, the Children's Bureau, for the Fiscal Year ending September 30, 2012.

Signature and Title of State/Tribal Agency Official: [Signature]  [Title]

Signature and Title of Central Office Official: [Signature]  [Title]

**SHARED FY12:CFS101 Part I**
<table>
<thead>
<tr>
<th>Date</th>
<th>Signature and Title of Central Office Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/9/2012</td>
<td></td>
</tr>
</tbody>
</table>

**Expenditures**

- **2017**: $75,569.90
- **2018**: $72,943.28
- **2019**: $62,617.00
- **2020**: $52,695.20
- **2021**: $42,967.60

**Total Education and Training Voucher (ETV) funds**

- 2017: $80,919.99
- 2018: $88,643.28
- 2019: $90,000.00
- 2020: $94,907.40
- 2021: $102,178.00

**Additional Information**

- **Other Services and Activities (e.g., training)**
  - **2017**: $7,091.66
  - **2018**: $7,250.00
  - **2019**: $7,500.00
  - **2020**: $7,900.00
  - **2021**: $8,500.00

- **Special Education and Support Services**
  - **2017**: $8,998.87
  - **2018**: $10,000.00
  - **2019**: $11,595.95
  - **2020**: $14,000.00
  - **2021**: $17,797.00

- **Expenditures**
  - **2017**: $59,944.80
  - **2018**: $60,944.80
  - **2019**: $62,944.80
  - **2020**: $65,944.80
  - **2021**: $69,944.80

**Description of Funds**

- **State and Local Organization (TIO) - Child Support**
- **Child Care and Education and Training Voucher**
- **Administration and Revenue**
- **Other Services**

**Fiscal Years**

- **2017**: October 1, 2016 to September 30, 2017
- **2018**: October 1, 2017 to September 30, 2018
- **2019**: October 1, 2018 to September 30, 2019
- **2020**: October 1, 2019 to September 30, 2020
- **2021**: October 1, 2020 to September 30, 2021
### State of Michigan
### Department of Human Services
### Comparison of FFY 2012 and FFY 2005 Title IV-B, Subpart 1 Expenditures
### Dated: 5-18-11


<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration &amp; Other Services</td>
<td>$7,567,068</td>
<td>$10,993,304</td>
<td>$18,560,372</td>
<td>$0</td>
<td>$10,993,304</td>
</tr>
<tr>
<td>Foster Care Board &amp; Care (Maintenance)</td>
<td>$2,169,185</td>
<td>$62,810,809</td>
<td>$64,979,994</td>
<td>$3,245,418</td>
<td>$59,565,391</td>
</tr>
<tr>
<td>Child Care</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Adoption Assistance Payments</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>$9,736,253</td>
<td>$73,804,113</td>
<td>$83,540,366</td>
<td>$3,245,418</td>
<td>$70,558,695</td>
</tr>
</tbody>
</table>

(1) Total Title IV-B, Subpart 1 funds spent for foster care maintenance = $2,169,185, child care = $0, adoption assistance payments = $0.

(2) Estimated FFY 2012 match amount from State spending on foster care maintenance payments ($2,898,598) does not exceed the FFY 2005 match amount ($3,245,418).

(3) Prior to FFY 2008, ACF required distinctive tracking and reporting of foster care maintenance expenditures only. All other expenditures, services and administrative, were reported in a second category. Beginning FFY 2008, expenditures are broken-down between administration and service areas. Estimated FFY 2012 administrative costs do not exceed 10% of grant.

#### Michigan Department of Human Services estimated expenditures for Title IV-B Child Welfare Program, period ended September 30, 2012 (FFY 2012):

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>$390,809</td>
<td>$130,270</td>
<td>$521,079</td>
<td>$0</td>
<td>$130,270</td>
</tr>
<tr>
<td>Foster Care Board &amp; Care (Maintenance)</td>
<td>$2,169,185</td>
<td>$44,527,224</td>
<td>$46,745,409</td>
<td>$2,898,598</td>
<td>$41,677,626</td>
</tr>
<tr>
<td>Prevention &amp; Family Support Services</td>
<td>$2,229,472</td>
<td>$11,488,525</td>
<td>$13,717,997</td>
<td>$0</td>
<td>$11,488,525</td>
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<tr>
<td>Protective Services</td>
<td>$36,261</td>
<td>$25,938</td>
<td>$62,199</td>
<td>$0</td>
<td>$25,938</td>
</tr>
<tr>
<td>Family Preservation-Crisis Intervention</td>
<td>$1,028,038</td>
<td>$10,629,128</td>
<td>$11,657,166</td>
<td>$0</td>
<td>$10,629,128</td>
</tr>
<tr>
<td>Adoption Promotion &amp; Support Services</td>
<td>$2,842,030</td>
<td>$2,032,931</td>
<td>$4,874,961</td>
<td>$0</td>
<td>$2,032,931</td>
</tr>
<tr>
<td>Child Care</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Adoption Assistance Payments</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>$8,695,795</td>
<td>$68,883,016</td>
<td>$77,578,811</td>
<td>$2,898,598</td>
<td>$65,984,418</td>
</tr>
</tbody>
</table>

(1) Total Title IV-B, Subpart 1 funds spent for foster care maintenance = $2,169,185, child care = $0, adoption assistance payments = $0.

(2) Estimated FFY 2012 match amount from State spending on foster care maintenance payments ($2,898,598) does not exceed the FFY 2005 match amount ($3,245,418).

(3) Prior to FFY 2008, ACF required distinctive tracking and reporting of foster care maintenance expenditures only. All other expenditures, services and administrative, were reported in a second category. Beginning FFY 2008, expenditures are broken-down between administration and service areas. Estimated FFY 2012 administrative costs do not exceed 10% of grant.
<table>
<thead>
<tr>
<th>Funding Source</th>
<th>Family Preservation Services</th>
<th>Family Support Services</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>STATE</strong></td>
<td><strong>FEDERAL</strong></td>
</tr>
<tr>
<td>Title IV B, Subpart 1</td>
<td>$0.0</td>
<td>$0.0</td>
</tr>
<tr>
<td>Title IVA / TANF</td>
<td>$0.0</td>
<td>$66,942.3</td>
</tr>
<tr>
<td>Title XX</td>
<td>$0.0</td>
<td>$6,965.8</td>
</tr>
<tr>
<td>Other (please list)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct charged or cost</td>
<td>$1,624.3</td>
<td>$3,932.7</td>
</tr>
<tr>
<td>allocated via worker</td>
<td></td>
<td></td>
</tr>
<tr>
<td>time study to the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>following Federal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>funding sources:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IV-E, XIX, Food Stamps,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CCDF, Refugee Assistance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delinquency Prevention,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Early On, Healthy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marriage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Abuse and Neglect</td>
<td>$0.0</td>
<td>$1,017.8</td>
</tr>
<tr>
<td>Grants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community-Based Family</td>
<td>$0.0</td>
<td>$0.0</td>
</tr>
<tr>
<td>Resource Program Grant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Temporary Child Care for</td>
<td>$0.0</td>
<td>$0.0</td>
</tr>
<tr>
<td>Children with Disabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>and Crisis Nursery Grants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>100% State Funds</td>
<td>$55,754.1</td>
<td>$0.0</td>
</tr>
<tr>
<td>100% County Funds</td>
<td>$75,195.5</td>
<td>$0.0</td>
</tr>
<tr>
<td>Private Donations</td>
<td>$0.0</td>
<td>$0.0</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td>$132,573.9</td>
<td>$80,858.6</td>
</tr>
</tbody>
</table>

(1) The FY2009 Title IVB subpart 2 match requirement (25%) totaled $4,391,282. This requirement was met through State Ward foster care expenditures, which are not included in this report.

(2) The FY2009 Title IVB subpart 1 match requirement (25%) totaled $3,039,080. The majority of this requirement was met through State Ward foster care expenditures, but also included State spending for prevention, preservation and support services.

(3) The reduction in state funds expended does not represent supplantation of state general fund by Title IVB P2 funding. TANF was used to fund Title IVB P2 eligible programs. TANF does not have a non supplantation clause and States are encouraged to use TANF for these types of programs.

(4) Federal and State funding sources, in addition to those specifically identified above, include:
   - Federal Community Based Family Services CAPTA grant
   - State Children's Trust Fund
   - State funded Adult Medical and Assistance programs
   - Part H Grant
   - Skillman Foundation Grant
State Chief Executive Officer's Certification
for the
Education and Training Voucher Program
Chafee Foster Care Independence Program

As Chief Executive Officer of the State of Michigan, I certify that the State has in effect and is operating a Statewide program relating to Foster Care Independent Living:

1. The State will comply with the conditions specified in subsection 477(i).
2. The State has described methods it will use to:
   - ensure that the total amount of educational assistance to a youth under this and any other Federal assistance program does not exceed the total cost of attendance; and
   - avoid duplication of benefits under this and any other Federal assistance program, as defined in section 477(b)(3)(J).

[Signature]
Signature of Chief Executive Officer

07/22/11
Date
New Certification for the Chafee Foster Care Independence Program

Title IV-E, Section 477 New Certification for the Chafee Foster Care Independence Program

As Chief Executive Officer of the State of Michigan, I certify that the State has in effect and is operating a Statewide program, pursuant to section 477(b) or (j)(2) of the Social Security Act relating to Foster Care Independent Living and that the following provision to effectively implement the Chafee Foster Care Independence and/or Education and Training Voucher Program is in place:

Adolescents participating in the program under this section are provided with education about the importance of designating another individual to make health care treatment decisions on behalf of the adolescent if the adolescent becomes unable to participate in such decisions and the adolescent does not have, or does not want, a relative who would otherwise be authorized under State law to make such decisions, whether a health care power of attorney, health care proxy, or other similar document is recognized under State law, and how to execute such a document if the adolescent wants to do so [Section 477(b)(3)(K)].

Signature of Chief Executive Officer

[Signature]

Governor Rick Snyder

Date: 01/22/11
Title IV-B, subpart 1 Assurances

The assurances listed below are in 45 CFR 1357.15(c) and title IV-B, subpart 1, sections 422(b)(8), 422(b)(10), and 422 (b)(14) of the Social Security Act (Act). These assurances will remain in effect during the period of the current five-year Child and Family Services Plan (CFSP).

1. The State/Tribe assures that it is operating, to the satisfaction of the Secretary:
   a. A statewide information system from which can be readily determined the status, demographic characteristics, location, and goals for the placement of every child who is (or, within the immediately preceding 12 months, has been) in foster care;
   b. A case review system (as defined in section 475(5) of the Act) for each child receiving foster care under the supervision of the State;
   c. A service program designed to help children:
      i. Where safe and appropriate, return to families from which they have been removed; or
      ii. Be placed for adoption, with a legal guardian, or, if adoption or legal guardianship is determined not to be appropriate for a child, in some other planned, permanent living arrangement which may include a residential educational program; and
   d. A preplacement preventative services program designed to help children at risk of foster care placement remain safely with their families.

2. The State/Tribe assures that it has in effect policies and administrative and judicial procedures for children abandoned at or shortly after birth (including policies and procedures providing for legal representation of the children) which enable permanent decisions to be made expeditiously with respect to the placement of the children.

3. The State/Tribe assures that it shall make effective use of cross-jurisdictional resources (including through contracts for the purchase of services), and shall eliminate legal barriers, to facilitate timely adoptive or permanent placements for waiting children.

4. The State/Tribe assures that not more than 10 percent of the expenditures of the State with respect to activities funded from amounts provided under this subpart will be for administrative costs.

5. The State/Tribe assures that it will participate in any evaluations the Secretary of HHS may require.
6. The State/Tribe assures that it shall administer the Child and Family Services Plan in accordance with methods determined by the Secretary to be proper and efficient.

Effective Date and Official Signature

I hereby certify that the State/Tribe complies with the requirements of the above assurances.

Certified by: [Signature]
Title: [D]IRECTOR
Agency: [Michigan] [DEPARTMENT] OF [HUMAN SERVICES]
Dated: [June 30, 2011]
Reviewed by: [Signature]
(ACF Regional Representative)
Dated:
Title IV-B, subpart 2 Assurances

The assurances listed below are in 45 CFR 1357.15(c) and title IV-B, subpart 2, sections 432(a)(2)(C), 432(a)(4), 432 (a)(5), 432(a)(7) and 432(a)(9) of the Social Security Act (Act). These assurances will remain in effect during the period of the current five-year CFSP.

1. The State/Tribe assures that after the end of each of the 1st 4 fiscal years covered by a set of goals, it will perform an interim review of progress toward accomplishment of the goals, and on the basis of the interim review will revise the statement of goals in the plan, if necessary, to reflect changed circumstances.

2. The State/Tribe assures that after the end of the last fiscal year covered by a set of goals, it will perform a final review of progress toward accomplishments of the goals, and on the basis of the final review:

   a. Will prepare, transmit to the Secretary, and make available to the public a final report on progress toward accomplishment of the goals; and

   b. Will develop (in consultation with the entities required to be consulted pursuant to subsection 432(b)) and add to the plan a statement of the goals intended to be accomplished by the end of the 5th succeeding fiscal year.

3. The State/Tribe assures that it will annually prepare, furnish to the Secretary, and make available to the public a description (including separate descriptions with respect to family preservation services, community-based family support services, time-limited family reunification services, and adoption promotion and support services) of:

   a. The service programs to be made available under the plan in the immediately succeeding fiscal year;

   b. The populations which the programs will serve; and

   c. The geographic areas in the State in which the services will be available.

4. The State/Tribe assures that it will perform the annual activities in the 432(a)(5)(A) in the first fiscal year under the plan, at the time the State submits its initial plan, and in each succeeding fiscal year, by the end of the third quarter of the immediately preceding fiscal year.

5. The State/Tribe assures that Federal funds provided under subpart 2 will not be used to supplant Federal or non-Federal funds for existing services and activities which promote the purposes of subpart 2.

6. The State/Tribe will furnish reports to the Secretary, at such times, in such format, and containing such information as the Secretary may require, that demonstrate the State’s/Tribe’s compliance with the prohibition contained in 432(a)(7)(A) of the Act.
7. The State/Tribe assures that in administering and conducting service programs under the subpart 2 plan, the safety of the children to be served shall be of paramount concern.

8. The State/Tribe assures that it will participate in any evaluations the Secretary of HHS may require.

9. The State/Tribe assures that it shall administer the Child and Family Services Plan in accordance with methods determined by the Secretary to be proper and efficient.

STATE ONLY:

10. The State assures that not more than 10 percent of expenditures under the plan for any fiscal year with respect to which the State is eligible for payment under section 434 of the Act for the fiscal year shall be for administrative costs, and that the remaining expenditures shall be for programs of family preservation services, community based support services, time limited family reunification services, and adoption promotion and support services, with significant portions of such expenditures for each such program.

Effective Date and Official Signature

I hereby certify that the State/Tribe complies with the requirements of the above assurances.

Certified by: **Mariana O. Crawford**

Title: **DIRECTOR**

Agency: **DEPARTMENT OF HUMAN SERVICES**

Dated: **June 30, 2011**

Reviewed by: _________________________________

(ACF Regional Representative)

Dated: _______________________________
Appendix 4: Title IV-E, Section 477 Certification

Certifications for the Chafee Foster Care Independence Program

As Chief Executive Officer/Tribal Leader of the State/Tribe of Michigan, I certify that the State/Tribe has in effect and is operating a Statewide or areawide program pursuant to section 477(b) or (j)(2) relating to Foster Care Independent Living and that the following provisions to effectively implement the Chafee Foster Care Independence Program are in place:

1. The State/Tribe will provide assistance and services to youth who have left foster care because they have attained 18 years of age, and have not attained 21 years of age [Section 477(b)(3)(A)];
2. Not more than 30 percent of the amounts paid to the State/Tribe from its allotment for a fiscal year will be expended for room and board for youth who have left foster care because they have attained 18 years of age, and have not attained 21 years of age [Section 477(b)(3)(B)];
3. None of the amounts paid to the State/Tribe from its allotment will be expended for room or board for any child who has not attained 18 years of age [Section 477(b)(3)(C)];
4. The State/Tribe will use training funds provided under the program of Federal payments for foster care and adoption assistance to provide training to help foster parents, adoptive parents, workers in group homes, and case managers understand and address the issues confronting adolescents preparing for independent living, and will, to the extent possible, coordinate such training with the independent living program conducted for adolescents [Section 477(b)(3)(D)];
5. The State/Tribe will adequately prepare prospective foster parents with the appropriate knowledge and skills to provide for the needs of the child before a child, under the supervision of the State, is placed with prospective foster parents and that such preparation will be continued, as necessary, after the placement of the child. [Section 471(a), as amended];
6. The State/Tribe has consulted widely with public and private organizations in developing the plan and has given all interested members of the public at least 30 days to submit comments on the plan [Section 477(b)(3)(E)];
7. The State/Tribe will make every effort to coordinate the State/Tribal programs receiving funds provided from an allotment made to the State/Tribe with other Federal, State and Tribal programs for youth (especially transitional living youth projects funded under part B of title III of the Juvenile Justice and Delinquency Prevention Act of 1974); abstinence education programs, local housing programs, programs for disabled youth (especially sheltered workshops), and school-to-work programs offered by high schools or local workforce agencies [Section 477(b)(3)(F)];
8. Adolescents participating in the program under this section will participate directly in designing their own program activities that prepare them for independent living and the adolescents will be required to accept personal responsibility for living up to their part of the program [Section 477(b)(3)(H)]; and
9. The State/Tribe has established and will enforce standards and procedures to prevent fraud and abuse in the programs carried out under the plan [Section 477(b)(3)(F)].

STATE ONLY:

10. The State has consulted each Tribe in the State about the programs to be carried out under the plan; there have been efforts to coordinate the programs with such Tribes; and benefits and services under the programs will be made available to Indian youth in the State/Tribe on the same basis as to other youth in the State; and that the State negotiates in good faith with any Indian tribe, tribal organization, or tribal consortium in the State that does not receive an allotment under 477(j)(4) for a fiscal year and that requests to develop an agreement with the State to administer, supervise, or oversee the programs to be carried out under the plan with respect to the Indian children who are eligible for such programs and who are under the authority of the tribe, organization, or consortium and to receive from the State an appropriated portion of the State allotment for the cost of such administration, supervision or oversight [Section 477(b)(3)(G)];

[Signature of Chief Executive Officer or Tribal Leader]

Date 6/22/11
The Michigan Department of Human Services Prevention Pilot Project
Fiscal Year 2011 Monitoring Report (October 1, 2010 to June 30, 2011)

Comprehensive child abuse & neglect prevention services for at-risk families serving the following geographic areas:
Grand Rapids, Flint, Pontiac, N.E. Detroit, Osborn, S.W. Detroit including Dearborn & Western Wayne County.

Prepared by the Michigan Children’s Trust Fund. For more information contact Jeff Sadler at sadlerm@michigan.gov
Executive Summary: The Michigan Department of Human Services has initiated a Prevention Pilot Project for child abuse and neglect prevention programs in the following communities: the N.E. Detroit, Osborn area - Wayne County, the S.W. Detroit including Dearborn area - Wayne County, the Flint area - Genesee County, the Grand Rapids area - Kent County and the Pontiac area - Oakland County. The purpose of this Prevention Pilot is for the implementation services designed to prevent the child abuse and neglect of children ages birth through eighteen years of age from occurring, to strengthen families and to prevent them from entering the child welfare system. The Prevention Pilot has been designed to give priority for activities and services to Children’s Protective Services (CPS) Category III and IV cases for families with one or more children under eighteen years of age. In addition, families that have three (3) or more of the identified child abuse and neglect risk factors, but who may not have yet come to the attention of CPS, are also eligible for these services. The initiative is providing services through a continuum of interventions beginning with the initial referral and assessment and continuing until the identified risk factors are eliminated and/or reduced to an acceptable level. The overarching goal is to provide the families referred with comprehensive, appropriate and timely support services to address the challenges in their lives, to avoid future contact with CPS, and foster care or other out of home placements. Prevention Pilot contractors are delivering an array services to at-risk families and children that 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 and relevant to their needs. Contractors have also developed sub-contractual and collaborative partnerships to assure that the specific needs of each family served are addressed through a comprehensive compliment of locally coordinated services. These services have proven to be valuable resource for CPS Workers and Supervisors and the feedback from local DHS-CPS offices has been unequivocally positive (Attachment A).

The cost of foster care and other out of home placements cost is in excess of $57 per child per day and residential placement for youth ranges from $128 to $139 per day. The Prevention Pilot project has a capacity to serve 1,462 families per year and the average cost per child day has been about $14. As of June 30th, 99.28% 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 or been placed in foster care or other out of home placements while participating in services. It is estimated that for every $1 invested in evidence based - evidence informed child abuse and neglect prevention home visitation services, more than $6 is saved on the direct consequences of child maltreatment. The following data illustrates activities and services from October 1, 2010 through June 30, 2011 (Fiscal Year 2011). The children and families served include those that have completed services, those continuing in services and those newly enrolled in services and include duplicated counts (Table 1). Estimated unduplicated counts are illustrated in Table 4 and Figure 4.

<table>
<thead>
<tr>
<th>Contractors (Actual Cost Contracts)</th>
<th>Annual Budget</th>
<th>Billings (YTD)</th>
<th>% of Budget</th>
<th>Families</th>
<th>Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCESS, S.W. Detroit &amp; Dearborn area</td>
<td>$1,427,110</td>
<td>$840,265</td>
<td>59%</td>
<td>608</td>
<td>1,877</td>
</tr>
<tr>
<td>Spectrum Child &amp; Family Services, S.W. Detroit &amp; Dearborn area</td>
<td>$399,888</td>
<td>$199,247</td>
<td>50%</td>
<td>181</td>
<td>369</td>
</tr>
<tr>
<td>Spaulding for Children, N.E. Detroit, Osborn area</td>
<td>$556,000</td>
<td>$325,839</td>
<td>59%</td>
<td>225</td>
<td>780</td>
</tr>
<tr>
<td>Lutheran Social Services, N.E. Detroit, Osborn area</td>
<td>$341,390</td>
<td>$184,856</td>
<td>54%</td>
<td>183</td>
<td>481</td>
</tr>
<tr>
<td>Orchards Children’s Services, Flint area</td>
<td>$409,386</td>
<td>$291,508</td>
<td>71%</td>
<td>266</td>
<td>446</td>
</tr>
<tr>
<td>Ennis Center for Children, Flint area</td>
<td>$597,822</td>
<td>$404,956</td>
<td>68%</td>
<td>178</td>
<td>400</td>
</tr>
<tr>
<td>Spectrum Child &amp; Family Services, Flint area</td>
<td>$398,332</td>
<td>$180,128</td>
<td>45%</td>
<td>166</td>
<td>403</td>
</tr>
<tr>
<td>Wedgewood Christian Services, Grand Rapids area</td>
<td>$339,000</td>
<td>$207,539</td>
<td>61%</td>
<td>448</td>
<td>1,131</td>
</tr>
<tr>
<td>Child &amp; Family Resource Council, Grand Rapids area</td>
<td>$555,352</td>
<td>$328,378</td>
<td>59%</td>
<td>517</td>
<td>1,204</td>
</tr>
<tr>
<td>Oakland County Health Division, Pontiac area</td>
<td>$250,645</td>
<td>$133,462</td>
<td>53%</td>
<td>300</td>
<td>498</td>
</tr>
<tr>
<td>CARE House, Pontiac area</td>
<td>$753,355</td>
<td>$540,690</td>
<td>72%</td>
<td>670</td>
<td>1,295</td>
</tr>
<tr>
<td>TOTALS:</td>
<td>$6,028,280</td>
<td>$3,644,050</td>
<td>59% (avg.)</td>
<td>3,742 (YTD)</td>
<td>8,884 (YTD)</td>
</tr>
<tr>
<td>Contractor</td>
<td>Geographic Area</td>
<td>Population</td>
<td>Providers</td>
<td>Service Model</td>
<td>Capacity</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>-----------------------------------------------------</td>
<td>-----------------</td>
<td>---------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------</td>
<td>-------------------------------</td>
</tr>
<tr>
<td>ACCESS</td>
<td>S.W. Detroit, Western Wayne County &amp; Dearborn area</td>
<td>Age 3 to 18</td>
<td>ACCESS, Orchards, S.W. Counseling Solutions</td>
<td>Strengthening Families Curriculum</td>
<td>240 Families per Year</td>
</tr>
<tr>
<td>Spectrum Child &amp; Family Services</td>
<td>S.W. Detroit, Western Wayne County &amp; Dearborn area</td>
<td>Birth to 18</td>
<td>Spectrum Child &amp; Family Services</td>
<td>Nurturing Parenting Program</td>
<td>97 Families per Year</td>
</tr>
<tr>
<td>Spaulding for Children</td>
<td>N.E. Detroit, Osborn area</td>
<td>Birth to 18</td>
<td>Spaulding, Family Care Network, N.E. Guidance Center, Youth Ville of Detroit</td>
<td>Healthy Families America, Love &amp; Logic, Nurturing Parenting, Caring for My Family</td>
<td>99 Families per Year</td>
</tr>
<tr>
<td>Lutheran Social Services of Michigan</td>
<td>N.E. Detroit, Osborn area</td>
<td>Birth to 5</td>
<td>Lutheran Social Services of Michigan</td>
<td>Modified Families First, Families Together Building Solutions, Wraparound (blended)</td>
<td>103 Families per Year</td>
</tr>
<tr>
<td>Orchards Children’s Services</td>
<td>Flint area</td>
<td>Birth to 12</td>
<td>Orchards Children’s Services</td>
<td>Families First of Michigan</td>
<td>85 Families per Year</td>
</tr>
<tr>
<td>Ennis Center for Children</td>
<td>Flint area</td>
<td>3 to 18</td>
<td>Ennis Center for Children</td>
<td>Strengthening Families Curriculum</td>
<td>73 Families per Year</td>
</tr>
<tr>
<td>Spectrum Child &amp; Family Services</td>
<td>Flint area</td>
<td>Birth to 18</td>
<td>Spectrum Child &amp; Family Services</td>
<td>Nurturing Parenting Program</td>
<td>96 Families per Year</td>
</tr>
<tr>
<td>Wedgewood Christian Services</td>
<td>Grand Rapids area</td>
<td>Birth to 18</td>
<td>Wedgewood Christian Services</td>
<td>Oregon Family Case Management Model</td>
<td>60 Families per Year</td>
</tr>
<tr>
<td>Child &amp; Family Resource Council</td>
<td>Grand Rapids area</td>
<td>Birth to 18</td>
<td>Arbor Circle, Catholic Charities, Bethany Christian Service, CFRC, First Steps Kent, D.A. Blodgett for Children</td>
<td>Health Families America, Cognitive Behavioral Therapy</td>
<td>189 Families per Year</td>
</tr>
<tr>
<td>Oakland County Health Division</td>
<td>Pontiac area</td>
<td>Birth to 18</td>
<td>Oakland County Health Division</td>
<td>Nurturing Parenting Program</td>
<td>77 Families per Year</td>
</tr>
<tr>
<td>Oakland County Secondary Prevention Collaborative d/b/a CARE House of Oakland County</td>
<td>Pontiac area</td>
<td>Birth to 18</td>
<td>CARE House, Catholic Social Services of Oakland County, Oakland ISD, Oakland County Community Coordinated Child Care Council &amp; Oakland Family Services</td>
<td>Nurturing Parenting Program, Life Skills Curriculum, Strengthening Families Curriculum, Second Step Program - Violence Prevention Curriculum, Parents as Teachers</td>
<td>343 Families per Year</td>
</tr>
</tbody>
</table>
### Table 3: Prevention Pilot CPS & Community Based Referrals October 1, 2010 through June 30, 2011 (Fiscal Year 2011)

<table>
<thead>
<tr>
<th>Referral Type</th>
<th>October</th>
<th>November</th>
<th>December</th>
<th>January</th>
<th>February</th>
<th>March</th>
<th>April</th>
<th>May</th>
<th>June</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category III</td>
<td>31</td>
<td>29</td>
<td>43</td>
<td>33</td>
<td>42</td>
<td>57</td>
<td>59</td>
<td>45</td>
<td>42</td>
<td>381</td>
</tr>
<tr>
<td>Category IV</td>
<td>33</td>
<td>45</td>
<td>76</td>
<td>77</td>
<td>87</td>
<td>103</td>
<td>93</td>
<td>88</td>
<td>84</td>
<td>686</td>
</tr>
<tr>
<td>3 + Risk Factors</td>
<td>86</td>
<td>105</td>
<td>79</td>
<td>73</td>
<td>54</td>
<td>84</td>
<td>50</td>
<td>65</td>
<td>43</td>
<td>639</td>
</tr>
<tr>
<td>Totals</td>
<td>150</td>
<td>179</td>
<td>198</td>
<td>183</td>
<td>183</td>
<td>244</td>
<td>202</td>
<td>198</td>
<td>169</td>
<td>1,706</td>
</tr>
</tbody>
</table>

### Figure 1: Prevention Pilot Referrals as of June 30, 2011

- **Category III**
- **Category IV**
- **3 + Risk Factors**
- **Total Referrals**
Prevention Pilot referrals and enrollments are increasing each month at a significant rate. This has enabled many Prevention Pilot contractors to meet their projected capacity to serve at-risk families and children and overall the economies of scale and scope was realized in the 3rd quarter. Figure 2 illustrates fiscal year 2011 referral and enrollments projections for the 4th quarter based on the monthly percent changes analyzed from October 1st to June 30th. It is estimated that by the 4th quarter of fiscal year 2011, all Prevention Pilot contractors will be operating at 100% of total capacity. Forty percent (40%) of Prevention Pilot contractors were operating at capacity as of June 30, 2011 and currently have "waiting lists" for enrollments. It is likely that there may not be the capacity to meet the need for services without continued investment in this pilot project. As of June 30, 2011, 99.28% of the families enrolled in Prevention Pilot services have not had a CPS referral, re-referral, substantiated case of child abuse or neglect or have been placed in foster care or other out of home placement while participating in services.
Figure 3: Prevention Pilot Contractor Summary as of June 30, 2011
YTD Total (families & children newly enrolled, continuing in services & completed services; duplicated counts)

- ACCESS: 1,877 Families, 608 Children
- Spectrum: 1,295 Families, 369 Children
- Spaulding: 1,204 Families, 498 Children
- LSSM: 1,131 Families, 517 Children
- Orchards: 1,115 Families, 448 Children
- Ennis: 1,052 Families, 446 Children
- Spectrum: 1,003 Families, 446 Children
- Wedgewood: 953 Families, 448 Children
- OCHD: 876 Families, 300 Children
- CARE House: 790 Families, 300 Children

Figure 4: Prevention Pilot Contractor Summary as of June 30, 2011
Monthly Averages & per Diem Costs (families & children newly enrolled, continuing in services & completed services; unduplicated counts)

- ACCESS: 209 Families, 68 Children, Average Cost per Child per Day: $14.73
- Spectrum: 41 Families, 20 Children, Average Cost per Child per Day: $6.66
- Spaulding: 87 Families, 25 Children, Average Cost per Child per Day: $13.72
- LSSM: 53 Families, 20 Children, Average Cost per Child per Day: $12.77
- Orchards: 50 Families, 20 Children, Average Cost per Child per Day: $12.77
- Ennis: 45 Families, 18 Children, Average Cost per Child per Day: $14.67
- Spectrum: 50 Families, 18 Children, Average Cost per Child per Day: $14.67
- Wedgewood: 45 Families, 18 Children, Average Cost per Child per Day: $14.67
- CFRC: 126 Families, 45 Children, Average Cost per Child per Day: $5.79
- OCHD: 134 Families, 57 Children, Average Cost per Child per Day: $8.98
- CARE House: 74 Families, 55 Children, Average Cost per Child per Day: $8.79

Attachment F
### Table 4: Prevention Pilot Activities & Services Dashboard as of June 30, 2011

<table>
<thead>
<tr>
<th>Activities &amp; Services (Monthly Averages)</th>
<th>Q-1</th>
<th>Q-2</th>
<th>% ↑(↓)</th>
<th>Q-3</th>
<th>% ↑(↓)</th>
<th>Matrix</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Families from Previous Month Continuing in Services</td>
<td>138</td>
<td>243</td>
<td>76%</td>
<td>316</td>
<td>30%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Children from Previous Month Continuing in Services</td>
<td>266</td>
<td>501</td>
<td>88%</td>
<td>665</td>
<td>33%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of New DHS Category III Cases Referred (YTD TOTAL)</td>
<td>29</td>
<td>235</td>
<td>710%</td>
<td>381</td>
<td>62%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of New DHS Category IV Cases Referred (YTD TOTAL)</td>
<td>45</td>
<td>421</td>
<td>836%</td>
<td>686</td>
<td>63%</td>
<td>↑</td>
</tr>
<tr>
<td>Total Number of New Category III &amp; IV Cases Referred (YTD TOTAL)</td>
<td>74</td>
<td>656</td>
<td>787%</td>
<td>1,067</td>
<td>63%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of New Families with 3 or more Risk Factors Referred (YTD TOTAL)</td>
<td>84</td>
<td>481</td>
<td>473%</td>
<td>639</td>
<td>33%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Families Screened (YTD TOTAL)</td>
<td>164</td>
<td>1,137</td>
<td>593%</td>
<td>1,706</td>
<td>50%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Families Assessed Monthly (YTD TOTAL)</td>
<td>110</td>
<td>785</td>
<td>614%</td>
<td>1,153</td>
<td>47%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Newly Enrolled Category III Cases Monthly</td>
<td>16</td>
<td>23</td>
<td>44%</td>
<td>25</td>
<td>9%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Newly Enrolled Category IV Cases Monthly</td>
<td>26</td>
<td>43</td>
<td>65%</td>
<td>42</td>
<td>(2%)</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Newly Enrolled Category III &amp; IV Cases Monthly</td>
<td>43</td>
<td>66</td>
<td>54%</td>
<td>67</td>
<td>2%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Newly Enrolled Families with 3 or more Risk Factors Monthly</td>
<td>52</td>
<td>55</td>
<td>6%</td>
<td>49</td>
<td>(11%)</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Families Served per Month</td>
<td>230</td>
<td>352</td>
<td>53%</td>
<td>416</td>
<td>19%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Children Served per Month</td>
<td>543</td>
<td>793</td>
<td>46%</td>
<td>987</td>
<td>25%</td>
<td>↑</td>
</tr>
<tr>
<td>New Pregnant Women Referred in the reporting month (DHS &amp; Non DHS)</td>
<td>9</td>
<td>8</td>
<td>(11%)</td>
<td>8</td>
<td>0%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Newly Enrolled Pregnant Women per Month.</td>
<td>7</td>
<td>8</td>
<td>14%</td>
<td>8</td>
<td>0%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Families that had an attempted Face to Face Contact within 72 hours Monthly</td>
<td>68</td>
<td>108</td>
<td>59%</td>
<td>116</td>
<td>7%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Enrolled Families Served that Completed a Service Plan Monthly</td>
<td>96</td>
<td>112</td>
<td>6%</td>
<td>111</td>
<td>(1%)</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Enrolled Families that had 1 or more Home Visits per Week Monthly</td>
<td>167</td>
<td>219</td>
<td>31%</td>
<td>252</td>
<td>15%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Families Completing Services Monthly</td>
<td>14</td>
<td>31</td>
<td>121%</td>
<td>46</td>
<td>48%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Enrolled Families Served Referred to Mental Health Services Monthly</td>
<td>20</td>
<td>35</td>
<td>75%</td>
<td>42</td>
<td>20%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Enrolled Families Served Referred to Substance Abuse Services Monthly</td>
<td>4</td>
<td>10</td>
<td>150%</td>
<td>12</td>
<td>20%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Enrolled Families Served Referred to D V Prevention Services Monthly</td>
<td>9</td>
<td>10</td>
<td>11%</td>
<td>12</td>
<td>20%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Enrolled Families Served Referred to Other Community Based Services Monthly</td>
<td>26</td>
<td>96</td>
<td>269%</td>
<td>103</td>
<td>8%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Families who Dropped Out of Services Monthly</td>
<td>18</td>
<td>19</td>
<td>6%</td>
<td>25</td>
<td>32%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Families that Declined or Were No Longer Interested in Services Monthly</td>
<td>26</td>
<td>47</td>
<td>81%</td>
<td>48</td>
<td>2%</td>
<td>↑</td>
</tr>
<tr>
<td>Number of Families that were Unable to be Located Monthly</td>
<td>8</td>
<td>13</td>
<td>63%</td>
<td>15</td>
<td>15%</td>
<td>↑</td>
</tr>
<tr>
<td>Total Number of Families that had a CPS referral or re-referral while enrolled in services per Quarter</td>
<td>4</td>
<td>9</td>
<td>125%</td>
<td>10</td>
<td>11%</td>
<td>↑</td>
</tr>
<tr>
<td>Total Number of Home Visits</td>
<td>2,191</td>
<td>4,004</td>
<td>83%</td>
<td>4,634</td>
<td>16%</td>
<td>↑</td>
</tr>
<tr>
<td>Total Number of Parenting Classes, Counseling (Individual &amp; Group) &amp; Parent Support Groups</td>
<td>313</td>
<td>1,357</td>
<td>334%</td>
<td>2,443</td>
<td>80%</td>
<td>↑</td>
</tr>
<tr>
<td>Total Service Coordination on Behalf of Families</td>
<td>411</td>
<td>1,369</td>
<td>233%</td>
<td>2,406</td>
<td>76%</td>
<td>↑</td>
</tr>
<tr>
<td>Total Transportation Services for Families</td>
<td>267</td>
<td>698</td>
<td>161%</td>
<td>1,188</td>
<td>70%</td>
<td>↑</td>
</tr>
<tr>
<td>Total Additional Services Provides to Families (e.g., Specific Assistance, Phone Contacts, etc.)</td>
<td>7,778</td>
<td>19,950</td>
<td>157%</td>
<td>26,143</td>
<td>31%</td>
<td>↑</td>
</tr>
</tbody>
</table>

Data values are monthly averages unless specified total or YTD TOTAL

Key: Continued Progress ↑; Stable or about the same ⇐; Improvement Needed ↓
Attachment A: DHS-CPS Feedback

The S.W. Detroit, Dearborn & Western Wayne County Area

South Central DHS

I feel the program is very innovative for families because it puts skills & services in place to prevent at-risk families from coming to the attention of CPS. I refer all of my Category II, III & IV’s to this program & I hope these services are a permanent fixture at DHS to help our needy families.
Summer Shanklin, S.C. DHS-CPS

Western Wayne DHS

The referral process has been very accommodating to us as CPS investigators. We appreciate the availability of the prevention pilot as it provides an opportunity for our families who need education & assistance but may not need more formal interventions. I truly believe that these services help educate our families & reduce the risk to children as well as reduce the amount of re-referrals we get. Kelly Alexander, W.W. DHS-CPS

I recently met with a family who was very happy to receive in-home family services from you agency. The customer indicated that the assigned worker enhanced her parenting skills & also helped her to develop a better relationship with her children. Nicole Parker, MSW Program Manager, W.W. DHS-CPS

The Family Skills program helps a multitude of our families presently involved with CPS. The feedback I have heard is all positive & the families feel better about themselves & their parenting skills. There is a huge correlation between successful completion of the program & not being a repeat referral to CPS. James Bellamy, CPS Investigator

I am a Children’s Protective Services Specialist for the State of Michigan, Department of Human Services in Wayne County. I am very gratuitous for this program because it increased the availability of necessary services for children & families. Andre Nash, DHS WWCFS, CPS

The Family Skills prevention pilot program is very prompt, responsive, effective and efficient. All of my families have praised the clinicians and supervisors. My Families feel a lot of hope after they have benefited from the program. Jennifer L. DeMars, CPS Investigator, 25350 Ecorse Rd., Taylor, MI 48180
The prevention program at ACCESS was very beneficial to the students & their families that I have referred. The families gave me wonderful feedback about the services they received. I strongly support the program for helping at-risk families in our community. Rola Bazzi-Gates, ACSW, LMSW, Salina Elementary School

North Central DHS

The Parents and Children United Program has served as a excellent prevention resource for the in investigations I’ve completed for the Department of Human Services. Most of the families that I have referred for services, with your organization have benefited from your program immensely.

I love your program and I feel it is very beneficial to our clients. The program is a great extension of prevention services to hopefully keep referrals of families out of the system. I believe the staff is great and really cares about their clients. I would very much like the program to continue. Hill-Kvicala, Holly-Ann (DHS)

The N.E. Detroit, Osborn Area

My name is tiffany Barber and I am a CPS Worker for the Wayne County North Central District. The LSSM Family Connections program has been very helpful with my clients. Ms. Gibbons could have had her son removed but the Family Connections services assisted CPS with keeping her and her son in the home. I would love to see the services expanded to the entire Detroit area. These services assist clients in rectifying issues and improving their quality of life.

In regard to the McCarver case that was referred to your agency I feel that the worker and the agency did a wonderful job. The resources provided to the family were awesome and the McCarver family really benefitted from the program. , Andrea Massingille, Wayne County Children’s Protective Services

This type of program is a proactive effort to connect families with the resources they need and prevent unnecessary placement of children in foster care. This program empowers a family and allows them to realize that they a situation that seems hopeless can be turned around so that families stay intact. It is hoped that this valuable program is extended as an available resource to help strengthen families and enhance the lives of children. Traci Lee-Brown, M.A., Section Program Manager, North Central Child and Family Services, 13233 Hamilton Rd., Highland Park, MI 48203
The Flint Area

I wanted to take this opportunity to express my gratitude and appreciation for the efforts and successes the Orchard’s Prevention Pilot Program have made with the families of Genesee County. You and your staff have been available to DHS and the families we serve on a 24/7 basis. The feedback that I have received from front line CPS workers has been nothing but positive regarding this program. This program is not only a true asset to DHS, but has been imperative in providing prevention services to the Genesee County community, resulting in a positive impact in the community. Steve Atwell, Genesee County, Children’s District, Services Program Manager, 125 E. Union St., Flint, MI 48502

As a CPS Investigator in Genesee County, I wanted to share how successful the Prevention Pilot Program through Orchards Children’s Services has been for the families in this community. I have made an estimated 20-30 referrals to the Prevention Pilot Program for both category IV and III Cases that meet the risk criteria. Lindsay Vogt, CPS Investigator, Genesee County DHS

Jordan has been working with the Middleton family. This was a very risky case but it was determined that mom would be allowed to be with baby despite past removals due to DHS policy. Jordan has helped support and strengthen the family in ways that I never dreamed possible. I know that this family will be forever grateful for the opportunity to raise this child and will never forget Jordan and the importance he has played in their lives. Michelle Sparks, Social Services Specialist-Genesee County, Children’s Protective Services

I love the prevention program, it is an easy referral to make and I feel I get a good response from my clients because it’s voluntary so they don’t feel like they are forced to complete the program. It has been a good addition to our community resources. Kelly Millar, Children’s Protective Services, Genesee County

I have really enjoyed working with your staff and find the program extremely helpful for the clients on my caseload. I have been a CPS for over 8 years and know that we need services like this in our community. Kelly Palmer-Albin, Children’s Protective Services, Genesee County

I think this Pilot Prevention Program is one of the best out there that specializes in family relationships, parenting skills, and improving social and life skills for the children. In fact, I will be making two more referrals to this program tomorrow. Marble Dicks, Children’s Protective Services, Genesee County

Ms. Goggins shared that she has gained a lot of support through the Parents and Children United Program, through Spectrum Child and Family Service. Ms. Goggins met her parenting goals that she established through the program. Ms. Goggins shared that she felt as though she has been able to gain more control over her child’s behavior and is glad that she has addressed the behaviors now before Terrence “slipped through the cracks”. Sincerely, LaVerna N. King, M.A. Spectrum Child and Family Services

This is by far one of the best programs I have ever utilized doing CPS. I make a point of making every referral I can to you guys! Kelly Millar, CPS Genesee County
The Pontiac Area

Referral sources have given feedback to staff that they see the Prevention Pilot Project as a valuable resource for families with highly needed visiting (as well as group) support crucial to servicing at-risk families. Kevin S. Zoromski, MSEd., Early Childhood Services Manager

I appreciate the referrals that you made to help me with clothing, food, and furniture. I love when people like you come into my life.
Tonika Shelton, Parent

Several months later, you were able to close this case and move on, but I want you to know that I interact with the referred parent on occasion when I see her in the community, and she has told me that your services were very helpful to her family, and she felt supported and safe as a result of your staff’s hard work. I will continue to refer families to CSSOC, and I truly appreciate your direction, insight, and dedication. Mark H. Reed, Children’s Protective Services Specialist (Oakland County). Mark H, Reed, 51111 Woodward Ave, Pontiac, MI.

The Nurturing Parent Program provides a place for our population, school, psychologist, social workers and other social services organizations such as S.T.I.P to have a consolidated place to seek community resource assistance. I would like to see this program continue to make the difference that it has this year. Raquel K. Welch-Johnson, S.T.I.P Coordinator, Jefferson/Whittier Elementary

The Grand Rapids Area

The Alternative for Families program has been a value to CPS as it focuses on the parent and children. So many of our current programs only focus on the parent but the Alternative for Families program focuses on the child, parent and the family. This program is a great resource for CPS. The parent learns appropriate communication skills and discipline and this is helpful in preventing future incidents that may lead to another CPS intervention. Overall, this program fills in the gap that is missed with so many of our prevention programs. Sarah Kimball, Kent County DHS, Health Liaison Officer

THE PROGRAM HAS HELPED MY DAUGHTER AND I COMMUNICATE AT A BETTER LEVEL. IT HAS HELPED CONTROL HER ANGER AND MINE. IT HAS HELPED HER TO LEARN TO DO HER CHORES, THE FOOD IS GOOD ALSO. THE PEOPLE ARE VERY NICE TOO.

Robert J. Marion
Attachment B
The Prevention Pilot Project
Children’s Protective Services Baseline Data
Fiscal Years 2008, 2009, 2010
(Source: DHS Data Management Unit)
<table>
<thead>
<tr>
<th>CPS Category Dispositions</th>
<th>Age &amp; Number of Child Victims Removed</th>
<th>Gender of Child Victims</th>
<th>Race of Child Victims</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>I</td>
<td>II</td>
<td>III</td>
</tr>
<tr>
<td></td>
<td>108</td>
<td>66</td>
<td>262</td>
</tr>
<tr>
<td></td>
<td>74</td>
<td>25</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>81</td>
<td>68</td>
<td>86</td>
</tr>
</tbody>
</table>

Pontiac Area, FY 2008

Pontiac Area, FY 2009

Pontiac Area, FY 2010
Pre-Service Institute
The Pre-Service Institute is a nine-week competency based new employee training offered by the Child Welfare Training Institute (CWTI) for all public and private child welfare caseworkers in child protective services, foster care and adoption. Pursuant to the Michigan child welfare consent decree, (Dwayne B. v. Snyder Modified Settlement Agreement) the Pre-Service Institute training must consist of at least 270 hours of classroom and experiential learning combined. Pre-Service Institutes that exceed 270 hours often have additional days built into the schedule to meet the minimum hours required by the consent decree during institutes that include holidays. For example, if the Pre-Service Institute schedule includes a holiday during the 9 weeks, an additional day (or several days) is added, usually as structured on-the-job training in the field, in order to meet the required 270 hours. Due to the size of the state and the distances that caseworkers may travel for training, an additional field week is added rather than additional classroom hours.

Program-Specific Transfer Training
Program Specific Transfer Training is designed for child welfare caseworkers who have previously completed the Pre-Service Institute in a specific program area (child protective services, foster care or adoption), but who are transferring to new child welfare responsibilities, or who are responsible for a mixed caseload. Program-Specific Transfer Training provides 18 day core training, embedded in the program-specific Pre-Service Institute, covering the specific policies, procedures and casework of the program to which the employee is transferring. For example, a CPS caseworker who is transferring to a foster care position would be required to complete the Foster Care Program-Specific Transfer Training. This training is embedded in the foster care Pre-Service Institute.

Instructional Design
The training instructors for Pre-Service Institute and Program-Specific Transfer Training are in-house trainers with CWTI or subject matter experts with whom we contract to train specific topics. The subject matter experts provide training in half to full day segments. As an example, Providing Testimony in Court is conducted by attorneys from the Michigan Attorney General’s Office; Indian Child Welfare is taught by the DHS Director of Native American Affairs.

The Pre-Service Institute and Program-Specific Transfer Training is a combination of instructor-led classroom training and fieldwork. “Field activities” developed for the field weeks are designed to support and reinforce topics covered during the classroom training. Pre-Service Institute and Program-Specific Transfer Training classroom training begins at 9:00 A.M. and ends at 4:00 P.M. Trainees are given two 15 minute breaks and have an hour for lunch. When the trainees are in the local office setting, their schedules are established within the office to
cover eight hours; for example, a typical schedule may be 8:00 AM - 5:00 PM, allowing for an hour lunch.

The mandatory Pre-Service Institute and Program-Specific Transfer Training provide workers with an opportunity to engage in learning through a variety of methods. The venues used for training are:

- **Large group classroom**, primarily lecture-based, using videos, PowerPoint based lecture, workplace simulation exercises and role plays as learning reinforcement
- **Computer lab**, provides simulated case activities and hands-on documentation experience through the use of SWSS (the state SACWIS), on line manuals research for policy guidance, structured decision-making templates, creation of case-related word documents,
- **On-the-job training** provides an opportunity for the new hire or newly transferred worker to return to their local county office (or child-placing agency) to put into practice some of the skills they have learned in the classroom training (see-attached grids).

One common field activity for foster care, CPS and adoption workers, for example, is completing the “Bench Exercise: How to Succeed in Court”. This exercise involves a series of questions for the Judge or designee. The trainee must interview the judge or designee in order to answer the questions. It provides an excellent opportunity for both the staff and the judge to dialogue about expectations related to court processes or judicial findings. Sample questions from this exercise include:

- What do you see as the caseworker’s role in your court?
- What should be included in caseworker testimony?
- What documents should the caseworker bring to court to support the case?
- Could you give some examples of what you would expect to see as evidence of reasonable efforts?
- What should the caseworker know about how you manage the courtroom?

Upon completion of Pre-Service Institute and Program-Specific Transfer Training, participants are expected to pass a competency-based exam and be able to:

- Determine eligibility for services and funding. Process all required forms and open a case successfully.
- Process SWSS and all structured decision making requirements appropriately.
- Conduct a home call including demonstrating Solution Focused, Forensic Interviewing and Child Abuse Investigation techniques as appropriate.
- Negotiate a Parent-Agency Agreement utilizing a strength-based approach and incorporating factors cited in the Initial and Updated Service Plans (ISP/USP).
- Write an ISP/USP following the online manual format, which is focused on the strengths and needs of the client, including a plan to meet those needs.
- Demonstrate safety awareness skills.
- Write a court petition based on the law and case findings.
- Testify effectively in court.
Child and Family Service Review
All child welfare training offered by CWTI is developed to support the Child and Family Services Review Outcomes. Training objectives and field activities are developed to assure Pre-Service Institute and Program-Specific Transfer Training participants are able to demonstrate initial competence in the designated outcome areas:

Safety
1. Children are, first and foremost, protected from abuse and neglect.
2. Children are safely maintained in their homes whenever possible and appropriate.

Permanency
1. Children have permanency and stability in their living situations.
2. The continuity of family relationships and connections is preserved for children.

Child and Family Well-Being
1. Families have enhanced capacity to provide for their children’s needs.
2. Children receive appropriate services to meet their educational needs.
3. Children receive adequate services to meet their physical and mental health needs.

In-Service Training
In-service training, initial and ongoing, is provided by either CWTI training instructors or subject matter experts. Both public and private agency staff is required to attend to attend in-service trainings as required by the Modified Consent Decree, as follows:

- By October 1, 2010, at least 16 hours;
- For the state fiscal year beginning October 1, 2011, at least 24 hours;
- For the state fiscal year beginning October 1, 2012, at least 32 hours.
- By October 2012, the monitors shall meet with parties to discuss in-service training and in consultation with parties, shall establish the minimum number of in-service training hours.

The previous settlement agreement required forty hours of in-service training to be completed annually. The Child Welfare Training Institute, the universities and private agencies offered a wide variety of in-service training topics throughout the past three years.

The majority of in-service trainings are instructor led classroom trainings, which vary in length from 3-6 hours. Training is offered via e-learning also wherever practicable. When applicable, continuing education credits are pursued by the Child Welfare Training Institute and authorized by the Michigan Chapter of the National Association of Social Workers (NASW).

In-service trainings are offered to child welfare workers, including supervisors, throughout the state of Michigan. The Child Welfare Training Institute is developing a comprehensive in-service
training curriculum to provide specific topics as core training offered each year, enabling continued professional development of child welfare staff.

The Child Welfare Training Institute plans to host a series of webinars focused on clinical supervision and home visitation skills. Objectives include focusing on results, self-awareness, de-escalation techniques, goal setting, creating mutual respect/purpose, and approaches to addressing high stress conversations

**University Provided In-Service Training**

DHS training has entered into a three-year contract with a consortium of social work schools throughout Michigan to provide in-service training for public and private child welfare workers who have already attended the Pre-Service Institute. Over three years the consortium will provide a minimum of 150 in-service classroom based trainings. Each class must be at least three hours in length. Capacity for each class is limited to 35 participants. An additional 30 online classes (10 per year) will be offered over the three years. The Child Welfare Training Institute staff is currently working with the consortium to determine the specific subject matter of the trainings.

Topics will be chosen based on gaps revealed through the Child and Family Service Review, DHS Quality Assurance reports, other external and internal evaluations of child welfare performance, and subjects identified by field practitioners. Most consortium offerings will be located at geographically diverse universities throughout Michigan.

The following topics have been identified by field staff as desired in-service training. This list is not intended to reflect the specific classes that will be offered, only a listing of needs the field has indicated so far:

- Application of practice/applicable tools for the field.
- De-escalation techniques
- School/Special education issues/IEP
- Sensitivity to children’s needs in care
- Trauma/loss/impact of removal on children
- How to complete a good assessment (parent and child)
- Working with families who exhibit chronic neglect
- Environmental issues-environmental neglect
- Secondary trauma to workers
- Understanding poverty and the impact on children’s well-being
- Understanding patterns of abuse/neglect
- Family engagement
- Court testimony
- Cultural competence in child welfare, culturally responsive practice

**Training Caseload Progression**
Michigan’s Modified Settlement Agreement was entered into the record at court on July 18, 2011. As the result of the Modified Settlement Agreement, the Child Welfare Training Institute revised the nine-week Pre-Service Institute training to maintain the 270 hour training requirement and build its curriculum around a minimum of four weeks of classroom training and five weeks of field training. By October 2011, Pre-Service Institute trainees will be required to shadow an experienced child welfare caseworker and progressively build case practice knowledge through intensive classroom and field training.

As part of the Pre-Service Institute, a trainee may be assigned specific field activities with a case that is the primary responsibility of an experienced caseworker and may, under appropriate supervision, be assigned responsibility for a “training caseload” which is may be progressively assigned at varying points depending on the specifically assigned child welfare program (foster care, CPS and adoption).

**Children’s Protective Services Training Caseload Progression**

No training cases will be assigned to CPS caseworkers in Pre-Service Institute until the completion of the first four weeks of training. Upon completing week four of the Pre-Service Institute and following successful completion of Competency Test One, up to five total cases may be assigned with supervisory approval. The first five cases assigned at this time cannot include an investigation of children under eight years of age or children who are unable to communicate. An additional five cases may be assigned at the end of week eight of the Pre-Service Institute, if Competency Test Two is passed. The last remaining cases may be assigned on the Monday following the successful completion of the nine-week Pre-Service Institute training.

**Foster Care and Adoption Caseload Progression**

Foster care and adoption caseworkers in Pre-Service Institute may be assigned no more than three training cases on or after day one of Pre-Service Institute training. Upon completion of week three of pre-service training and completion of competency test one, the supervisor may assign two additional cases, up to five total cases, using guidelines provided by CWTI. Upon completion of week nine of pre-service training, including successful completion of Competency Test Two, and satisfactory evaluation in consultation with the Trainer and Supervisor, a full caseload may be assigned.

CWTI managers are currently working with child welfare program and field office staff to develop guidelines for supervisors regarding the types of cases that may be assigned as training cases with appropriate supervision. These guidelines will be distributed to all child welfare supervisors in DHS and private agencies.

**Impact of PL-110-351 – Fostering Connections to Success and Increasing Adoptions Act of 2008**

This legislation permits states to provide training using title IV-E dollars for prospective relative guardians and for the training of court personnel. The federal matching rate can be claimed on an increasing basis up to 70% in FY 2012. Michigan has not yet implemented this provision of
PL-110-351, so no federal claim has been made for these additional groups. We anticipate implementing this training in FY 2012.
<table>
<thead>
<tr>
<th>Course Title</th>
<th>Trainer</th>
<th>Training venue/setting</th>
<th>Length of Course</th>
<th>Course Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Specific (core)</td>
<td>CWTI trainer</td>
<td>Computer room</td>
<td>18 days</td>
<td>Participants will:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>● Determine eligibility for services and funding.*</td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td>● Process all required forms and open a case successfully.*</td>
</tr>
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<td></td>
<td></td>
<td></td>
<td>● Process SWSS and all structured decision making requirements appropriately.</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>● Conduct a home call including demonstrating Strength Based Family Engagement, Forensic Interviewing and Child Abuse Investigation techniques as appropriate.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>● Negotiate a Parent Agency Agreement utilizing a strength-based approach and incorporating factors cited in the Initial and Updated Service Plans (ISP/USP).</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>● Write an ISP/USP following the online manual format, which is focused on the strengths and needs of the client, including a plan to meet those needs.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>● Demonstrate safety awareness skills.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>● Write a court petition based on the law and case findings.*</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>● Testify effectively in court.*</td>
</tr>
<tr>
<td>Forensic Interviewing</td>
<td>CWTI trainer</td>
<td>Classroom</td>
<td>2 days</td>
<td>Participants will:</td>
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<td>● Understand the requirements to use the Forensic Interviewing Protocol while talking to children as mandated by the State of Michigan Child Protection Law.</td>
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<td>● Understand that the goal of the Forensic Interview is to obtain statements from children in a developmentally sensitive, unbiased and truth seeking manner that will support fair and accurate decisions within the children welfare and criminal justice systems.</td>
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<td>● Learn and understand each phase of the Forensic Interview.</td>
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<td>● Learn about basic aspects of children’s linguistics*.</td>
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<td>● Gain information about interviewing children special topics and/or children with special needs.</td>
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</table>
| Interviewing & Investigation | CWTI trainer | Classroom | Full day | Participants will:  
| | | | | - Demonstrate their ability to successfully complete a Forensic Interview by practice interviews and role playing.  
- Develop alternative hypothesis prior to completing a Forensic Interview.  
- Learn that the Forensic Interview is a child centered interview.  
| | | | | - Identify field investigation techniques that will aid in their ability to make preponderance decisions during allegations of CA/N.  
- Learn about how their approach to clients can influence the outcome of the investigation process.  
- Identify communication skills and de-escalation techniques that can be used in a field setting.  
- Identify field safety techniques such as dealing with hostile clients or unsafe situations.  
- Identify the importance of “pre-interview” preparation, including working with law enforcement and other agencies to prepare for the meeting the client in the field.  
- Learn to identify evidence during field investigations.  
- Learn basic interview techniques beyond their current expertise  
- Learn advanced interview techniques including the Reid method of confrontational interviewing in order to elicit truthful statements from reluctant clients.  
- Learn to recognize signs of deception when interviewing clients.  
| Legal | Attorney Generals Office | Classroom | Full day | Participants will:  
| | | | | - Learn the skills necessary to testify effectively in court  
- Receive an overview of petition writing  
- Receive a detailed overview of the statues governing Child Welfare  
- Receive a detailed overview of the Child Welfare legal process  
| Constitutional Rights | CWTI trainer | Classroom | ½ day | Participants will:  
| | | | | - Learn to identify families’ rights and how to interact with them in a way that does not violate their legal rights or create liability for staff or DHS.  
- Learn a basic overview of the Constitution and how it relates to working with families in Child Welfare.
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<td>- Identify the gifts that they bring from their own family/culture to their daily practice.<em>&lt;br&gt;- Gain insight into about how their worldviews have been shaped by all of their experiences.</em>&lt;br&gt;- Gain knowledge to help them identify their own values, attitudes and beliefs which lead them to recognizing and accepting the values, attitudes and beliefs of the people to whom they are offering services*.&lt;br&gt;- Gain knowledge on how to individualize services to meet the cultural needs of service recipients. <em>&lt;br&gt;- Gain insight into how their cultural gifts are challenged in their work and daily life.</em>&lt;br&gt;- Learn how to reflect on how their values, attitudes and beliefs have impacted the Child Welfare process in which they have been engaged.*</td>
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<td>- Receive an overview of SRM 131.&lt;br&gt;- Gain knowledge on confidentiality related issues relating to DHS/private agencies.&lt;br&gt;- Understand potential liability issues and concerns for workers.&lt;br&gt;- Learn confidentiality law and policy to avoid potential liability and to protect client’s rights.</td>
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| Family Preservation | CWTI trainer | Classroom | ½ day | Participants will:  
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|                     |             |           |       | • Learn about the history of FPS services in Michigan.  
|                     |             |           |       | • Learn about and identify where FPS services fit in the service continuum.*  
|                     |             |           |       | • Learn to develop an understanding of each FPS program.*  
|                     |             |           |       | • Learn, identify and practice assessing for and making appropriate FPS referrals.*  
|                     |             |           |       | • Foster appropriate expectations FPS service providers.  
| Childhood Trauma    | Subject Matter Expert | Classroom | ½ day | Participants will:  
|                     |             |           |       | • Understand general dynamics associated with children who experience trauma (prenatal and postnatal) through maltreatment, including how trauma and complex trauma impact children’s neurodevelopment, social/emotional and relational functioning*.  
|                     |             |           |       | • Recognize the dynamics of childhood attachment and separation and the relational consequences of insecure attachment.*  
|                     |             |           |       | • Understand how child abuse and neglect contribute to challenging behaviors in children and compromise their ability to trust.*  
|                     |             |           |       | • Learn how to assist caretakers with strategies they can use to develop and sustain environmental and personal safety for children.*  
|                     |             |           |       | • Learn how to provide caretakers with techniques to create supportive relationships with traumatized children.*  
|                     |             |           |       | • Identify interventions that address the needs of traumatized children to promote their future wellbeing.*  
|                     |             |           |       | • Understand and strategize on how to implement the Essential Elements for trauma informed child welfare practice*.  
| Permanency Planning | Subject Matter Expert | Classroom | ½ day | Participants will:  
|                     |             |           |       | • Learn to understand permanency planning requirements and case practice skills and techniques.  
| DV & The Effects on Children | Subject Matter Expert | Classroom | Full day | Participants will:  
|                     |             |           |       | • Learn to define and identify Domestic Violence and identify worker/client responses to victimization.*  
|                     |             |           |       | • Identify assessment techniques for survivors and children.  
|                     |             |           |       | • Identify appropriate resources/services for family members.  

### ICWA

**Subject Matter Expert**

**Classroom**

**½ day**

**Participants will:**
- Understand U.S. Native American history and culture.
- Understand the history and culture of Michigan’s 12 federally recognized tribes.
- Understand the legal and policy requirements of the Indian Child Welfare Act and DHS Native American policy.

### Sexual Abuse

**CWTI trainer**

**Classroom**

**½ day**

**Participants will:**
- Utilize policy and Child Protection Law to assist in sexual abuse cases.
- Identify perpetrator characteristics including grooming techniques.
- Demonstrate knowledge of child victim characteristics and behaviors that indicate sexual abuse.

### Substance Abuse

**CWTI trainer**

**Classroom**

**½ day**

**Participants will:**
- Recognize indicators of substance abuse/dependency in adults.
- Gain an understanding of the role that substance abuse and or dependency of a caretaker plays in child abuse and/or neglect.
- Learn the dynamics of substance misuse programs including treatment, screening process, and how to assess for appropriate treatment resources.
- Learn the effect parental substance misuse has on a child’s development and behavior.
- Learn how to observe a family’s environment and behaviors that can indicate substance misuse is an issue.
- Learn how to formulate goals, treatment plans and parent agency agreement regarding substance affected clients and families.
- Learn how to use solution five question techniques to engage substance affected clients.

### MAFAK

**Foster Parents**

**Classroom**

**2 hours**

**Participants will:**
<table>
<thead>
<tr>
<th>Panel</th>
<th>CWTI trainer</th>
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</table>
| Mental Health | | | | • Develop a working knowledge of the signs, symptoms and behavioral manifestations of mental disorders common to clients in the child welfare system.*  
• Develop an understanding of the benefits and pitfalls of diagnosis.*  
• Develop an understanding of the stigma that can sometimes be associated with various psychiatric labels.*  
• Identify specific protective processes and resources that serve to neutralize risks associated with mental disorders.  
• Learn to value collaborative efforts and working associations with other professionals that will benefit the overall well-being of the clients they serve. |
| Poverty | CWTI Trainer | Classroom | ½ day | Participants will: |
| | | | | • Learn to recognize the difference between “Poverty and Neglect”  
• Gain insight into their own values and beliefs regarding poverty and how they impact the ability to service families.  
• Gain insight into how poverty impacts children who are living in the situation and how they can assist in preventing some of the negative effects.  
• Obtain tools that will then locate and match resources for families living in poverty. |
| Medical Findings in CA/N | Subject Matter Expert | Classroom | Full day | Participants will: |
| | | | | • Gain knowledgeable regarding the various forms of child abuse, including but not limited to physical abuse, medical-skin findings, fractures, abusive head trauma, and sexual abuse.  
• Be able to identify injuries in the field concerning physical abuse which warrant a medical evaluation.  
• Learn to understand the spectrum of neglect and what constitutes neglect and that neglect is the form of maltreatment which leads to the greatest number of child fatalities.  
• Gain knowledgeable about the various aspects of Pediatric Condition
<table>
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<tr>
<th>Attachment H  CPS Pre-Service Institute</th>
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<td><strong>Falsification (“Munchausen’s Syndrome By Proxy”)</strong></td>
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<td>• Become more familiar with some of the “mimics” of child physical abuse and sexual abuse.</td>
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<td><strong>Working Safe Working Smart</strong></td>
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<td>• Increase the knowledge, skills, and attitudes of staff in the recognition and early detection of emotionally charged situations (reports or cases)*</td>
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<td>• Learn brief risk assessment techniques.</td>
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<td>• Improve the knowledge, skills and attitude of staff members in the use of crisis intervention methods to defuse or channel client's aggressive or hostile behaviors into more productive and therapeutic non-physical actions.</td>
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<tr>
<td>• Improve/enhance safety awareness skills</td>
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<tr>
<td><strong>Mock Trial</strong></td>
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<td>Judges</td>
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<td>• Gain an understanding of the adversarial process during court testimony.</td>
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<tr>
<td>• Gain insight in how to prepare for testifying</td>
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<td>• Gain insight into the direct examination procedure of testimony.</td>
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<td>• Gain insight into the cross examination process of testimony.</td>
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<td>• Gain insight of the reasons that an attorney may object during court testimony.</td>
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<td><strong>Youth Panel</strong></td>
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<td>Former FC Youth</td>
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<tr>
<td>• Gain insight in to how to handle cases with dignity and respect based on actual case scenarios provided by youth whom have aged out of the system.</td>
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<tr>
<td><strong>Field Activities</strong></td>
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<td>Trainee/Supervisor</td>
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<td>• Become acclimated to local office policy/procedures</td>
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<tr>
<td>• Complete computer based Online Manual activity</td>
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<tr>
<td>• Shadow home calls- client engagement</td>
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<tr>
<td>• Complete shadowing guide</td>
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<tr>
<td>• Complete perspectives from the bench exercise</td>
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<tr>
<td>• Identify/learn about community resources</td>
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<tr>
<td>• Complete ICWA exercise</td>
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<tr>
<td>• Contact Tribe and identify tribal resources</td>
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</table>
Upon completion of the Child Welfare Institute, participants will be able to:

1. Determine eligibility for services and funding. Process all required forms and open a case successfully.

2. Process SWSS and all structured decision making requirements appropriately.

3. Conduct a home call including demonstrating Solution Focused, Forensic Interviewing and Child Abuse Investigation techniques as appropriate.


5. Write an ISP/USP following the online manual format, which is focused on the strengths and needs of the client, including a plan to meet those needs.

6. Demonstrate safety awareness skills.

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</table>

- Complete policy study guides (intake, investigations, risk, safety, 5 category, on-going and removal)
- Develop a field kit
- Visit Children’s Assessment Center (CAC)
- Observe court hearings
- Shadow worker taking complaints
- With supervisor approval take complaints
- Observe Forensic Interviews
- Observe neglect, physical and sexual abuse home calls
- Attend Permanency Planning Conference
- Meet with supervisor
7. Write a court petition based on the law and case findings.

8. Testify effectively in court.

Child and Family Services Review Outcomes

Each of the following federal outcomes is supported by specific training objectives and performance measures to assure new hires are able to demonstrate initial competence in the designated outcome areas.

Safety

1. Children are, first and foremost, protected from abuse and neglect.
2. Children are safely maintained in their homes whenever possible and appropriate.

Permanency Outcomes

1. Children have permanency and stability in their living situations.
2. The continuity of family relationships and connections is preserved for children.

Child and Family Well-Being Outcomes

1. Families have enhanced capacity to provide for their children’s needs.
2. Children receive appropriate services to meet their educational needs.
3. Children receive adequate services to meet their physical and mental health needs.
<table>
<thead>
<tr>
<th>Course Title</th>
<th>Trainer</th>
<th>Training venue/setting</th>
<th>Length of Course</th>
<th>Course Description</th>
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</table>
| Program Specific (core) | CWTI trainer | Computer room | 18 days | Participants will:  
  - Gain insight and knowledge regarding current Michigan Child Welfare policy  
  - Acquire the skills necessary to engage and assess children and families using a strength-based approach (incl. the use/completion of required assessment tools).*  
  - Understand the process of CPS transfer to FC.  
  - Learn the Absent Parent/Incarcerated Parent Protocols.  
  - Learn to read and understand court documents.  
  - Learn to differentiate (child’s) legal status (wardship).  
  - Learn the policy/procedure and case practice requirements regarding placement/replacement.  
  - Learn the policy and case practice requirements for education (incl. federal legislation).  
  - Learn the policy/procedure and case practice requirements for meeting the medical needs of children.  
  - Understand the policy/procedure and case practice requirements of permanency/concurrent permanency planning (incl. the purpose and function of Permanency Planning Conferences).  
  - Learn the components of structured decision making, and learn to develop, implement and evaluate efforts to achieving a permanency plan for children and families.*  
  - Effectively write Initial, Updated, and Permanent Ward Service Plans as well as Parent-Agency Treatment Plan/Service Agreement and Safety Assessment (per policy).*  
  - Gain an understanding of the various funding sources and payments as it relates to foster care and other governmental benefits.*  
  - Learn the policy/procedure and case practice requirements for case change/case maintenance:  
    1. Absent Without Legal Permission.  
    2. Return Home. |

*Courses that are fully or partially title IV-E allowable for FFP pursuant to 45 CFR 1356.60(c) (1) and (2), based on the MDHS approved cost allocation plan.
| Forensic Interviewing for FC/Adoption | CWTI trainer | Classroom | ½ day | Participants will:  
|---|---|---|---|---|
| 3. Replacement.  
4. Termination of Parental Rights.  
5. Transfer to Adoption.  
| - Learn policy/procedure and case practice requirements for working with older youth transitioning to adulthood (incl. IL Plans, available funds, resources and services).  
- Gain an understanding with the Child and Family Services Review Outcomes, including which federal outcomes is supported by specific training objectives and performance measures to assure competence.*  
- Complete all required inputs and case functions/requirements in SWSS.  
|  
| Learn the basic principles and techniques.  
Learn the limitations (legal and practical) of FC/Adoption workers’ utilization of Forensic Interviewing skills.  
|  
| FC Legal | Attorney General’s Office | Classroom | Full Day | Participants will:  
|---|---|---|---|---|
| 3. Replacement.  
4. Termination of Parental Rights.  
5. Transfer to Adoption.  
| - Learn to identify and narrate legal and factual allegations.*  
- Learn to identify witnesses and evidence for their case.*  
- Learn to write a comprehensive petition and establish legal grounds*  
- Learn to understand court documents, court findings/orders.*  
- Understand state/federal laws guiding child welfare.*  
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| Learn to identify and narrate legal and factual allegations.*  
Learn to identify witnesses and evidence for their case.*  
Learn to write a comprehensive petition and establish legal grounds*  
Learn to understand court documents, court findings/orders.*  
Understand state/federal laws guiding child welfare.*  
|  
| LGTBQ | CWTI trainer | Classroom | ½ day | Participants will:  
|---|---|---|---|---|
| 3. Replacement.  
4. Termination of Parental Rights.  
5. Transfer to Adoption.  
| - Explore how to work with Lesbian, Gay, Bisexual, Transgender, and Questioning Clients*  
- Explore how to utilize engagement and inclusive language techniques*  
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| Constitutional Rights | CWTI trainer | Classroom | ½ day | Participants will:  
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| 3. Replacement.  
4. Termination of Parental Rights.  
5. Transfer to Adoption.  
| - Learn to identify families’ rights and how to interact with them in a way that does not violate their legal rights or create liability for staff or DHS.  
- Learn a basic overview of the Constitution and how it relates to working with  
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### Attachment I - Foster Care Pre-Service Institute

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<th>Instructor Type</th>
<th>Setting</th>
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<th>Participants will:</th>
</tr>
</thead>
</table>
| ICWA         | Subject Matter Expert | Classroom | ½ day | - Identify appropriate resources/services for family members.  
- Learn to the guiding principles for work with domestic violence in families, assessment skills and ways to support the non-offending parent and the children.*  
- Experience the strength-based perspective as applied to domestic violence.* |
| Sexual Abuse | CWTI trainer | Classroom | ½ day | - Utilize policy and Child Protection Law to assist in sexual abuse cases.  
- Identify perpetrator characteristics including grooming techniques.  
- Demonstrate knowledge of child victim characteristics and behaviors that indicate sexual abuse. |
| Substance Abuse | CWTI trainer | Classroom | ½ day | - Recognize indicators of substance abuse/dependency in adults.*  
- Gain an understanding of the role that substance abuse and or dependency of a caretaker plays in child abuse and/or neglect.*  
- Learn the dynamics of substance misuse programs including treatment, screening process, and how to assess for appropriate treatment resources.  
- Learn the effect parental substance misuse has on a child’s development and behavior.*  
- Learn how to observe a family’s environment and behaviors that can indicate substance misuse is an issue.*  
- Learn how to formulate goals, treatment plans and parent agency agreement regarding substance affected clients and families.  
- Learn how to use solution five question techniques to engage substance affected clients. |
| MAFAK Panel | Guest speakers | ½ day | Classroom | Understand the roles and responsibilities of Foster, Adoptive and Kinship adults in caring |
Attachment I - Foster Care Pre-Service Institute

<table>
<thead>
<tr>
<th>Mental Health</th>
<th>CWTI trainer</th>
<th>Classroom</th>
<th>½ day</th>
<th>Participants will:</th>
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<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td>• Develop a working knowledge of the signs, symptoms and behavioral manifestations of mental disorders common to clients in the child welfare system.*</td>
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<td>• Develop an understanding of the benefits and pitfalls of diagnosis.*</td>
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<td>• Develop an understanding of the stigma that can sometimes be associated with various psychiatric labels.*</td>
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<td>• Identify specific protective processes and resources that serve to neutralize risks associated with mental disorders.</td>
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<td>• Learn to value collaborative efforts and working associations with other professionals that will benefit the overall well-being of the clients they serve.</td>
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<thead>
<tr>
<th>Poverty</th>
<th>CWTI Trainer</th>
<th>Classroom</th>
<th>½ day</th>
<th>Participants will:</th>
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<td>• Learn to recognize the difference between “Poverty and Neglect”</td>
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<td>• Gain insight into their own values and beliefs regarding poverty and how they impact the ability to service families.</td>
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<td>• Gain insight into how poverty impacts children who are living in the situation and how they can assist in preventing some of the negative effects.</td>
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<td>• Obtain tools that will then locate and match resources for families living in poverty.</td>
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<table>
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<tr>
<th>Medical Findings in CA/N</th>
<th>Subject Matter Expert</th>
<th>Classroom</th>
<th>Full day</th>
<th>Participants will:</th>
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<tr>
<td></td>
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<td></td>
<td>• Gain knowledgeable regarding the various forms of child abuse, including but not limited to physical abuse, medical-skin findings, fractures, abusive head trauma, and sexual abuse.</td>
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<td>• Be able to identify injuries in the field concerning physical abuse which warrant a medical evaluation.</td>
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<td>• Learn to understand the spectrum of neglect and what constitutes neglect and that neglect is the form of maltreatment which leads to the greatest number of child fatalities.</td>
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<td>• Gain knowledgeable about the various aspects of Pediatric Condition Falsification (“Munchausen’s Syndrome By Proxy”)</td>
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<td></td>
<td>• Become more familiar with some of the “mimics” of child physical abuse and sexual abuse.</td>
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</tbody>
</table>
## Attachment I - Foster Care Pre-Service Institute

<table>
<thead>
<tr>
<th>Program</th>
<th>Instructor</th>
<th>Location</th>
<th>Duration</th>
<th>Participants will:</th>
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</thead>
<tbody>
<tr>
<td><strong>Working Safe</strong></td>
<td>CWTI trainer</td>
<td>Classroom</td>
<td>Full day</td>
<td>- Increase the knowledge, skills, and attitudes of staff in the recognition and early detection of emotionally charged situations (reports or cases)*</td>
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<td>- Learn brief risk assessment techniques.</td>
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<td>- Improve the knowledge, skills and attitude of staff members in the use of crisis intervention methods to defuse or channel client's aggressive or hostile behaviors into more productive and therapeutic non-physical actions.</td>
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<td></td>
<td>- Improve/enhance safety awareness skills</td>
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<tr>
<td><strong>Mock Trial</strong></td>
<td>Judges</td>
<td>Classroom</td>
<td>Full day</td>
<td>- Gain an understanding of the adversarial process during court testimony.</td>
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<td>- Gain insight in how to prepare for testifying.</td>
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<td>- Gain insight into the direct examination procedure of testimony.</td>
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<td>- Gain insight into the cross examination process of testimony.</td>
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<td>- Gain insight of the reasons that an attorney may object during court testimony.</td>
</tr>
<tr>
<td><strong>Youth Panel</strong></td>
<td>Former FC Youth</td>
<td>Classroom</td>
<td>2 hours</td>
<td>- Gain insight in to how to handle cases with dignity and respect based on actual case scenarios provided by youth whom have aged out of the system.</td>
</tr>
<tr>
<td><strong>Field Activities</strong></td>
<td>Trainee/Supervisor</td>
<td>Local Office/Agency</td>
<td>120 hours</td>
<td>Participants with direction/oversight of supervisor will:</td>
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<tr>
<td></td>
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<td>- DHS Online Orientation Assignment.</td>
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<td>- In the Community – Identifying local community resources.</td>
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<td>- DHS-Net/Web site Orientation. DHS-net/web site Scavenger Hunt Quiz.</td>
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<td>- Local Office/Agency Orientation.</td>
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<td>- On Line/Web Based policy manual introduction.</td>
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<td>- Shadowing Guide.</td>
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Attachment I - Foster Care Pre-Service Institute

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- Trainee Guidelines Questionnaire – Administrative Handbook questions.
- Understanding Department of Human Services Resources.
- Field Assignment for Tribal Contact. Native American Affairs. Tribal Service Area Matrix. Counties Included in Tribes’ Service Delivery Area.
- Perspectives from the Bench: How to Succeed in Court.
- Cultural Competent Child Welfare Service – Casey (web based training).
- Shadowing – Continue Relevant Shadowing.
- Case Review Assignment.
- Law Enforcement Information Network (DHS FC only)
- Organization is the Key – Interview Senior workers regarding organizational/time management tips.

Upon completion of the Child Welfare Institute, participants will be able to:

1. Determine eligibility for services and funding. Process all required forms and open a case successfully.
2. Process SWSS and all structured decision making requirements appropriately.
3. Conduct a home call including demonstrating Solution Focused, Forensic Interviewing techniques as appropriate.
5. Write an ISP/USP following the online manual format, which is focused on the strengths and needs of the client, including a plan to meet those needs.
Attachment I - Foster Care Pre-Service Institute

6. Demonstrate safety awareness skills.

7. Write a court petition based on the law and case findings.

8. Testify effectively in court.

Child and Family Services Review Outcomes

Each of the following federal outcomes is supported by specific training objectives and performance measures to assure new hires are able to demonstrate initial competence in the designated outcome areas.

Safety

1. Children are, first and foremost, protected from abuse and neglect.

2. Children are safely maintained in their homes whenever possible and appropriate.

Permanency Outcomes

1. Children have permanency and stability in their living situations.

2. The continuity of family relationships and connections is preserved for children.

Child and Family Well-Being Outcomes

1. Families have enhanced capacity to provide for their children’s needs.

2. Children receive appropriate services to meet their educational needs.

3. Children receive adequate services to meet their physical and mental health needs.
### Program Specific (core)

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Trainer</th>
<th>Training venue/setting</th>
<th>Length of Course</th>
<th>Course Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>CWTI trainer</td>
<td>Computer room</td>
<td>18 days</td>
<td>Participants will:</td>
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<td>Gain an understanding of the basic elements of DHS Adoption Program which is inclusive of:</td>
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<td>- Historical Perspective - Trainees will be provided with a basic foundation on the state/federal laws impacting their work with families and children.</td>
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<td>- Multiple Transitions - Trainees will understand the impact of the Adoption process on families and children.</td>
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<td>- Adoption Philosophy - Trainees will have a philosophical foundation for the Adoption program.</td>
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<td>- Confidentiality - Trainees will have a greater understanding of the issues and policy regarding confidentiality specific to the Adoption Program.</td>
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<td>- Child and Family Service Review (CFSR) - Trainees will have a basic understanding of the impact of the CFSR on the Adoption Program.</td>
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<td>- Consent Decree - Trainees will have a basic understanding of the impact of the consent decree on the Adoption Program.</td>
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<td>- Federal and State Laws - Trainees will have a basic understanding, from a casework perspective, of state and federal laws impacting the Adoption Program.</td>
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<td>- Termination of Parental Rights (TPR) - Trainees will understand the policy, procedures, impact on families and children and the casework implications of the termination process.</td>
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<td>- Voluntary Release of Parental Rights/Safe Delivery Act - Trainees will understand the law, policy, procedures, impact on families and children and casework implications.</td>
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<td>- Referral to Adoption (from FC) - Trainees will understand the FC and Adoption policy and procedure requirements of the transition to Adoption.</td>
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<td>- Child Adoption Assessment - Trainees will understand the purpose of, policy requirements for completion/documentation and utilization.</td>
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<td>Attachment J - Adoption Pre-Service Institute</td>
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</table>
| - Genograms - Trainees will be given a basic refresher in the use of genograms with adoptive families.  
- Child Adoption Addendums - Trainees will understand the necessity for, purpose of, policy requirements for, completion and utilization.  
- Quarterly Progress Reports - Trainees will understand the reporting and documentation requirements as outlined in policy.  
- Recruitment - Trainees will understand the importance of, and methods for ongoing recruitment of prospective adoptive families.  
- Application for Adoption - Trainees will understand the importance of the policy and documentation requirements of the application process.  
- Orientation/Parent Resources for Information, Development and Education (PRIDE) - Trainees will understand the importance of the orientation and training phases of the prospective adoptive families.  
- Characteristics of Successful Adoptive Parents - Trainees will understand the relationship between family characteristics and increased likelihood of a successful adoption.  
- Preliminary Adoption Family Assessment - Trainees will understand the policy, procedure, documentation and conditions requiring a preliminary adoptive family assessment.  
- Michigan Adoption Resource Exchange (MARE) - Trainees will learn about MARE, it's purpose and benefits.  
- Bureau of Child and Adult Licensing/BCAL-3130 – (Adoptive Family Assessments) – Trainees will understand the multiple uses, requirements for (the BCAL-3130), and accurate completion of the document.  
- Adoptive Family Addendums – Trainees will understand the necessity for an addendum to the BCAL-3130.  
- Background Checks and Clearances - Trainees will learn the policy and procedural requirements for adoptive families' background and criminal history checks.  
- Exclusions – Trainees will understand the requirements/criteria for, response to, and documentation requirements for families excluded from adopting.  
- Approval/Denial Process - Trainees will learn the policy and procedural criteria for applicant denial/approval.  
- Family Selection (Match) - Trainees will learn and understand the requirements for comprehensive information gathering, assessments which
results in an optimal child and prospective adoptive family match.

- **Placement Decisions** - Trainees will understand, in policy, the various criteria for placement decisions, and how placement supports successful adoptions.
- **Preparing Children and Families for Adoption/Transitioning** - Trainees will understand the casework implications. Trainees will understand their role in the process for and impact of transitioning children and families in the adoption process.
- **Visitation Guidelines** - Trainees will understand the purpose, benefits, policy, criteria and guidelines for pre-adoptive visits.
- **Subsidy** - Trainees will have a comprehensive understanding of policy/procedure, requirements, and criteria, as it applies to the various types of subsidy.
- **Michigan Children’s Institute (MCI) – Consent Process** - Trainees will understand the legal basis for and role and responsibilities of the MCI Superintendent and the MCI Office. Trainees will understand the requirements in law and policy that allows or authorizes MCI consent.
- **Denial of Consent** - Trainees will understand the requirement and criteria for denial or withdrawal of consent.
- **Legal Risk Adoptions** - Trainees will understand the criteria for and conditions under which a parent appeal can occur, and will understand the court's role and options.
- **Filing the Petition** - Trainees will learn what the legal, policy, procedural and casework requirements for the petition process.
- **Supervisory Period/Supervision Longer than 12 Months** - Trainees will understand the requirements of the supervisory period. Trainees will understand the requirements and conditions warranting an extended supervisory period.
- **Finalization** - Trainees will learn what is required in law and policy for an Adoption to be finalized.
- **Closing Documents** - Trainees will understand the documentation and reporting requirements for the closing of an Adoption case.
- **Post Adoption Services** - Trainees will learn about the various types of fund sources and services available to adoptive families post adoption.

<p>| Forensic Interviewing | CWTI trainer | Classroom | ½ day | Participants will: |</p>
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<th>Course</th>
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<th>Duration</th>
<th>Description</th>
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</table>
| Adoption Pre-Service Institute | Attorney General’s Office | Classroom | Full day | - Learn the basic principles and techniques.  
- Learn the limitations (legal and practical) of FC/Adoption workers’ utilization of Forensic Interviewing skills.                                                                                       |
| Adoption Legal               | Attorney General’s Office | Classroom | Full day | Participants will:  
- Gain a historical perspective of adoptions through reviewing major laws that govern the adoption process in Michigan including an in-depth review of the Michigan Adoption Code, the Indian Child Welfare Act, MEPA and the Interstate Compact on the Placement of Children*  
- Complete a sample packet of adoption forms*  
- Read and analyze important Michigan Appellate Court decisions that have impacted adoption law and practice.*  
- Learn to justify placement decisions and identify potential legal risks in placement based on the law* |
| LGBTQ                        | CWTI trainer           | Classroom | ½ day    | Participants will:  
- Explore how to work with Lesbian, Gay, Bisexual, Transgender, and Questioning Clients*  
- Explore how to utilize engagement and inclusive language techniques* |
| Constitutional Rights         | CWTI trainer           | Classroom | ½ day    | Participants will:  
- Learn to identify families’ rights and how to interact with them in a way that does not violate their legal rights or create liability for staff or DHS.  
- Learn a basic overview of the Constitution and how it relates to working with families in Child Welfare. |
| Engaging the Family           | CWTI Trainer           | Classroom | Full day | Participants will:  
- Learn to define 21 Skills for Not Knowing*  
- Learn how child development affects engaging skills*  
- Identify how an individual’s Frame of Reference influences how they interact |
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<tr>
<th>Cultural Diversity</th>
<th>CWTI trainer</th>
<th>Classroom</th>
<th>½ day</th>
<th>Participants will:</th>
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<tr>
<td>Confidentiality and Ethics</td>
<td>CWTI Trainer</td>
<td>Classroom</td>
<td>½ day</td>
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<td>Confidentiality and Ethics</td>
<td>CWTI trainer</td>
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<td>½ day</td>
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<tr>
<td>Family Preservation</td>
<td>CWTI trainer</td>
<td>Classroom</td>
<td>½ day</td>
<td>Participants will:</td>
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- Identify how to establish a Well Formed Goal.*
- Describe the Formulating Feedback Process*.
- Identify how to use Scaling Skills to engage families*.
- Identify how to use Miracle Question to engage families.*
- Identify client strengths by Exploring for Exceptions.*
- Identify the gifts that they bring from their own family/culture to their daily practice.*
- Gain insight into about how their worldviews have been shaped by all of their experiences.*
- Gain knowledge to help them identify their own values, attitudes and beliefs which lead them to recognizing and accepting the values, attitudes and beliefs of the people to whom they are offering services*. 
- Gain knowledge on how to individualize services to meet the cultural needs of service recipients. *
- Gain insight into how their cultural gifts are challenged in their work and daily life.*
- Learn how to reflect on how their values, attitudes and beliefs have impacted the Child Welfare process in which they have been engaged.*
- Receive an overview of SRM 131.
- Gain knowledge on confidentiality related issues relating to DHS/private agencies.
- Understand potential liability issues and concerns for workers.
- Learn confidentiality law and policy to avoid potential liability and to protect client’s rights.
- Learn about the history of FPS services in Michigan.
- Learn about and identify where FPS services fit in the service continuum.*
- Learn to develop an understanding of each FPS program.*
- Learn, identify and practice assessing for and making appropriate FPS
<table>
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<tr>
<th>Topic</th>
<th>Subject Matter Expert</th>
<th>Venue</th>
<th>Duration</th>
<th>Participants will:</th>
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</table>
| **Childhood Trauma**         |                       | Classroom       | ½ day    | - Understand general dynamics associated with children who experience trauma (prenatal and postnatal) through maltreatment, including how trauma and complex trauma impact children’s neurodevelopment, social/emotional and relational functioning.*  
- Recognize the dynamics of childhood attachment and separation and the relational consequences of insecure attachment.*  
- Understand how child abuse and neglect contribute to challenging behaviors in children and compromise their ability to trust.*  
- Learn how to assist caretakers with strategies they can use to develop and sustain environmental and personal safety for children.*  
- Learn how to provide caretakers with techniques to create supportive relationships with traumatized children.*  
- Identify interventions that address the needs of traumatized children to promote their future wellbeing.*  
- Understand and strategize on how to implement the Essential Elements for trauma informed child welfare practice*                                                                 |
| **Permanency Planning**      |                       | Classroom       | ½ day    | - Learn to understand permanency planning requirements and case practice skills and techniques.                                                                                                           |
| **DV & The Effects on Children** |                       | Classroom       | Full day | - Learn to define and identify Domestic Violence and identify worker/client responses to victimization.*  
- Identify assessment techniques for survivors and children.  
- Identify appropriate resources/services for family members.  
- Learn to the guiding principles for work with domestic violence in families, assessment skills and ways to support the non-offending parent and the children.*  
- Experience the strength-based perspective as applied to domestic violence.*                                                                 |
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<tr>
<th>Program</th>
<th>Instructor/Resource</th>
<th>Type</th>
<th>Duration</th>
<th>Participants will:</th>
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</thead>
</table>
| ICWA                    | Subject Matter Expert | Classroom  | ½ day    | - Understand U.S. Native American history and culture.  
- Understand the history and culture of Michigan’s 12 federally recognized tribes.  
- Understand the legal and policy requirements of the Indian Child Welfare Act and DHS Native American policy. |
| Sexual Abuse            | CWTI trainer          | Classroom  | ½ day    | - Utilize policy and Child Protection Law to assist in sexual abuse cases.  
- Identify perpetrator characteristics including grooming techniques.  
- Demonstrate knowledge of child victim characteristics and behaviors that indicate sexual abuse. |
| Substance Abuse         | CWTI trainer          | Classroom  | ½ day    | - Recognize indicators of substance abuse/dependency in adults.*  
- Gain an understanding of the role that substance abuse and or dependency of a caretaker plays in child abuse and/or neglect.*  
- Learn the dynamics of substance misuse programs including treatment, screening process, and how to assess for appropriate treatment resources.  
- Learn the effect parental substance misuse has on a child’s development and behavior.*  
- Learn how to observe a family’s environment and behaviors that can indicate substance misuse is an issue.*  
- Learn how to formulate goals, treatment plans and parent agency agreement regarding substance affected clients and families.  
- Learn how to use solution five question techniques to engage substance affected clients. |
| MAFAK Panel             | Guest speakers        | ½ day      | Classroom| Understand the roles and responsibilities of Foster, Adoptive and Kinship adults in caring for children in out of home care. |
**Attachment J - Adoption Pre-Service Institute**

<table>
<thead>
<tr>
<th>Course Title</th>
<th>Instructor Type</th>
<th>Training Setting</th>
<th>Duration</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poverty</td>
<td>CWTI Trainer</td>
<td>Classroom</td>
<td>½ day</td>
<td>Participants will:</td>
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<td></td>
<td>- Learn to recognize the difference between “Poverty and Neglect”</td>
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<td>- Gain insight into their own values and beliefs regarding poverty and how they impact the ability to service families.</td>
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<td>- Gain insight into how poverty impacts children who are living in the situation and how they can assist in preventing some of the negative effects.</td>
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<td>- Obtain tools that will then locate and match resources for families living in poverty.</td>
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<tr>
<td>Medical Findings in CA/N</td>
<td>Subject Matter Expert</td>
<td>Classroom</td>
<td>Full day</td>
<td>Participants will:</td>
</tr>
<tr>
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<td></td>
<td>- Gain knowledgeable regarding the various forms of child abuse, including but not limited to physical abuse, medical-skin findings, fractures, abusive head trauma, and sexual abuse.</td>
</tr>
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<td>- Be able to identify injuries in the field concerning physical abuse which warrant a medical evaluation.</td>
</tr>
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<td></td>
<td>- Learn to understand the spectrum of neglect and what constitutes neglect and that neglect is the form of maltreatment which leads to the greatest number of child fatalities.</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>- Gain knowledgeable about the various aspects of Pediatric Condition Falsification (“Munchausen’s Syndrome By Proxy”)</td>
</tr>
<tr>
<td></td>
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<td></td>
<td></td>
<td>- Become more familiar with some of the “mimics” of child physical abuse and sexual abuse.</td>
</tr>
<tr>
<td>Working Safe</td>
<td>CWTI Trainer</td>
<td>Classroom</td>
<td>Full day</td>
<td>Participants will:</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>- Develop a working knowledge of the signs, symptoms and behavioral manifestations of mental disorders common to clients in the child welfare system.*</td>
</tr>
<tr>
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<td></td>
<td>- Develop an understanding of the benefits and pitfalls of diagnosis.*</td>
</tr>
<tr>
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<td>- Develop an understanding of the stigma that can sometimes be associated with various psychiatric labels.*</td>
</tr>
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<td></td>
<td>- Identify specific protective processes and resources that serve to neutralize risks associated with mental disorders.</td>
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<td></td>
<td>- Learn to value collaborative efforts and working associations with other professionals that will benefit the overall well-being of the clients they serve.</td>
</tr>
<tr>
<td>Activity</td>
<td>Role</td>
<td>Setting</td>
<td>Duration</td>
<td>Description</td>
</tr>
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<td>--------------------------</td>
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</tr>
<tr>
<td><strong>Working Smart</strong></td>
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<td>- Increase the knowledge, skills, and attitudes of staff in the recognition and early detection of emotionally charged situations (reports or cases)*&lt;br&gt;- Learn brief risk assessment techniques.&lt;br&gt;- Improve the knowledge, skills and attitude of staff members in the use of crisis intervention methods to defuse or channel client's aggressive or hostile behaviors into more productive and therapeutic non-physical actions.&lt;br&gt;- Improve/enhance safety awareness skills</td>
</tr>
<tr>
<td><strong>Mock Trial</strong></td>
<td>Judges</td>
<td>Classroom</td>
<td>Full day</td>
<td>Participants will:&lt;br&gt;- Gain an understanding of the adversarial process during court testimony.&lt;br&gt;- Gain insight in how to prepare for testifying&lt;br&gt;- Gain insight into the direct examination procedure of testimony.&lt;br&gt;- Gain insight into the cross examination process of testimony.&lt;br&gt;- Gain insight of the reasons that an attorney may object during court testimony.</td>
</tr>
<tr>
<td><strong>Youth Panel</strong></td>
<td>Former FC Youth</td>
<td>Classroom</td>
<td>2 hours</td>
<td>Participants will:&lt;br&gt;- Gain insight in how to handle cases with dignity and respect based on actual case scenarios provided by youth whom have aged out of the system.</td>
</tr>
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</table>
Upon completion of the Child Welfare Institute, participants will be able to:

1. Determine eligibility for services and funding. Process all required forms and open a case successfully.
2. Process SWSS (DHS only) and all structured decision making requirements appropriately.
3. Conduct a home call including demonstrating Solution Focused Interviewing techniques as appropriate.
5. Make appropriate adoption placements, monitor placement, and following adoption finalization, and assure that the children and family have access to adoption funding and resources.
6. Demonstrate safety awareness skills.
7. Adhere to federal/state law, DHS adoption policy, and court requirements and processes.
8. Testify effectively in court.
Attachment J - Adoption Pre-Service Institute

Child and Family Services Review Outcomes

Each of the following federal outcomes is supported by specific training objectives and performance measures to assure new hires are able to demonstrate initial competence in the designated outcome areas.

Safety

1. Children are, first and foremost, protected from abuse and neglect.
2. Children are safely maintained in their homes whenever possible and appropriate.

Permanency Outcomes

1. Children have permanency and stability in their living situations.
2. The continuity of family relationships and connections is preserved for children.

Child and Family Well-Being Outcomes

1. Families have enhanced capacity to provide for their children’s needs.
2. Children receive appropriate services to meet their educational needs.
3. Children receive adequate services to meet their physical and mental health needs.
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Attachment L


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<th>Tribal Attorney(s)</th>
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<td>Darwin “Joe” McCoy</td>
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</tr>
</tbody>
</table>
# STATE OF MICHIGAN
## DHS Indian Outreach Program

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<thead>
<tr>
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<th>Phone</th>
<th>FAX</th>
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</tr>
</thead>
<tbody>
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<td>P.O. Box 30037</td>
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<table>
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<th>Phone</th>
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<tbody>
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<table>
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<th>Phone</th>
<th>FAX</th>
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</thead>
<tbody>
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</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
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<tbody>
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<thead>
<tr>
<th>Name</th>
<th>Phone</th>
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<tbody>
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<th>FAX</th>
</tr>
</thead>
<tbody>
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<thead>
<tr>
<th>Name</th>
<th>Phone</th>
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<tbody>
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<thead>
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<td>Mark Stevens</td>
<td>(989) 772-8400</td>
<td></td>
</tr>
<tr>
<td>County Director</td>
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<tr>
<td><a href="mailto:StevensM2@michigan.gov">StevensM2@michigan.gov</a></td>
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</table>
## STATE OF MICHIGAN
### DHS Indian Outreach Program

<table>
<thead>
<tr>
<th>County</th>
<th>Name</th>
<th>Phone Number</th>
<th>Fax Number</th>
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</thead>
<tbody>
<tr>
<td><strong>Kent County DHS</strong></td>
<td>Grace Boda</td>
<td>(616) 248-1428</td>
<td>(616) 247-6058</td>
<td>415 Franklin, SE Grand Rapids, MI 49507</td>
</tr>
<tr>
<td></td>
<td>Indian Outreach Worker</td>
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<td></td>
<td><a href="mailto:BodaG@michigan.gov">BodaG@michigan.gov</a></td>
<td></td>
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<tr>
<td></td>
<td>Shelley Bultsma</td>
<td>(616) 247-6121</td>
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<tr>
<td></td>
<td>IOW Supervisor</td>
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<td></td>
<td>BultsmaS@michigan.</td>
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<tr>
<td></td>
<td>Savator Selden-Johnson</td>
<td>(616) 247-6001</td>
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<td>County Director</td>
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<td></td>
<td><a href="mailto:Selden-JohnsonS@michigan.gov">Selden-JohnsonS@michigan.gov</a></td>
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<tr>
<td><strong>Luce County DHS</strong></td>
<td>Barbara Sharp</td>
<td>(906) 293-0121</td>
<td>(906) 293-3857</td>
<td>P.O. Box 27 500 W. McMillan Newberry, MI 49868</td>
</tr>
<tr>
<td></td>
<td>Indian Outreach Worker</td>
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<tr>
<td></td>
<td><a href="mailto:SharpB@michigan.gov">SharpB@michigan.gov</a></td>
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<tr>
<td></td>
<td>Christopher Stabile</td>
<td>(906) 293-0112</td>
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<td></td>
<td>County Director</td>
<td></td>
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<tr>
<td></td>
<td><a href="mailto:StabileC@michigan.gov">StabileC@michigan.gov</a></td>
<td></td>
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</tr>
<tr>
<td><strong>Mackinac County DHS</strong></td>
<td>Ronda Engle</td>
<td>(906) 643-6115</td>
<td>(906) 643-7467</td>
<td>199 Ferry Lane St. Ignace, MI 49781</td>
</tr>
<tr>
<td></td>
<td>Indian Outreach Worker</td>
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<tr>
<td></td>
<td><a href="mailto:EngleR@michigan.gov">EngleR@michigan.gov</a></td>
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<tr>
<td></td>
<td>Terri Bush</td>
<td>(906) 643-6109</td>
<td></td>
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<tr>
<td></td>
<td>Social Services Program Manager</td>
<td></td>
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<tr>
<td></td>
<td><a href="mailto:BushT@michigan.gov">BushT@michigan.gov</a></td>
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<tr>
<td></td>
<td>Christopher Stabile</td>
<td>(906) 293-0112</td>
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<td></td>
<td>County Director</td>
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<td></td>
<td><a href="mailto:StabileC@michigan.gov">StabileC@michigan.gov</a></td>
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</tbody>
</table>
### Marquette County DHS

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone Number</th>
<th>Fax Number</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wendy Evans</td>
<td>Indian Outreach Worker</td>
<td>(906) 228-0749</td>
<td>(906) 228-3393</td>
<td>234 W. Baraga Avenue, Marquette, MI 49855</td>
</tr>
<tr>
<td>Rob Mattia</td>
<td>IOW Supervisor</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doug York</td>
<td>County Director</td>
<td>(906) 228-9691</td>
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### Menominee County DHS

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wendy Dionne</td>
<td>Indian Outreach Worker</td>
<td>(906) 863-1406</td>
<td>(906) 863-7426</td>
<td>2612 Tenth Street, Menominee, MI 49858</td>
</tr>
<tr>
<td>Mark Kwarciany</td>
<td>IOW Supervisor</td>
<td>(906) 863-1420</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Russ Sexton</td>
<td>County Director</td>
<td>(906) 863-1419</td>
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</tr>
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### Van Buren County DHS

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone Number</th>
<th>Fax Number</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greg Morsaw</td>
<td>Indian Outreach Worker</td>
<td>(269) 621-2802</td>
<td>(269) 621-2962</td>
<td>P.O. Box 7, CR. 681, Hartford, MI 49057</td>
</tr>
<tr>
<td>Rose Solis</td>
<td>IOW Supervisor</td>
<td>(269) 621-2821</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Angel D. (David) Fernandez</td>
<td>County Director</td>
<td>(269) 621-2825</td>
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</tbody>
</table>
## Wayne County DHS

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone Number</th>
<th>Email</th>
<th>Address</th>
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</thead>
<tbody>
<tr>
<td>Michelle White</td>
<td>(313) 396-0375</td>
<td><a href="mailto:WhiteM2@michigan.gov">WhiteM2@michigan.gov</a></td>
<td>2929 Russell</td>
</tr>
<tr>
<td>Ron Corlew</td>
<td>(313) 396-5034</td>
<td><a href="mailto:CorlewR@michigan.gov">CorlewR@michigan.gov</a></td>
<td>Detroit, MI 48207</td>
</tr>
<tr>
<td>Dwayne Haywood &amp;</td>
<td>(313) 456-1025</td>
<td><a href="mailto:Dhaywood@michigan.gov">Dhaywood@michigan.gov</a></td>
<td>Cadillac Place</td>
</tr>
<tr>
<td>Margaret Warner</td>
<td></td>
<td><a href="mailto:Mwarner@michigan.gov">Mwarner@michigan.gov</a></td>
<td>Detroit, MI</td>
</tr>
<tr>
<td>County Director</td>
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<tr>
<td>Central Operations</td>
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<td>Child and Family</td>
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<td>Services</td>
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### Note

- The document contains contact information for various individuals and departments related to the DHS Indian Outreach Program in Wayne County, MI. It lists names, phone numbers, and email addresses along with addresses for the central operations and Cadillac Place offices. The table provides a clear and organized way to present this information.
| Child and Family Services Plan  
ICWA Specific Topics  
(Mandatory for Native American Affairs) | Tribal Consultation and Implementation for FY 2010-2014 | FY2010 Benchmarks & Progress |
|---|---|---|
| Notification of Indian parents and Tribes of State proceedings involving Indian children and their right to intervene. | **1) Training:**  
a) All Children’s Services Supervisors and staff will attend mandatory ICWA Training by 4th quarter FY 2013. **Updated.**  
b) Mandatory pre-service ICWA Training will be a full (8-hour) day; currently 2.45 hours or 3.45 hours respectively for new staff and new supervisors. **Updated.**  
c) ICWA Training will be approved by the Tribal State Partnership (TSP) Training Subcommittee by 1st quarter FY 2012. **Updated.**  
d) Long-term or tenured worker ICWA training will be addressed by FY 2013. **New.** | **1) Training**  
a.) The Child Welfare Training Institute provided 2.45 hour ICWA training to 788 new caseworkers and 3.45 hour ICWA training to 378 new caseworker supervisors in FY 2010.  
b.) i) The review is ongoing into FY11; expected date of completion is June 2011.  
i) Tribes were invited to Co-Facilitate ICWA Training with CWTI or NAA staff; reimbursement for Tribal participation is available through CWTI training funds.  
iv) New worker tools/desk aides/flow charts are being developed for the Native American Affairs (NAA) policy manual (PIP Item 14. 3.3).  
d) Long-term or Tenured worker ICWA training was added as an item for development (April Tribal State Partnership Meeting, 2011). **New.** |

| 2) Data Management:  
a) Quality assurance of ICWA will be ensured through quantifiable data demonstrating compliance in all American Indian cases per program, ICWA data measures and case plan services will be captured from monthly ICWA case records from FY 2010-2012.  
b) By 4th quarter FY 2012, there will be a process to extract American Indian ICWA case totals and ICWA data measures reports electronically (reports will be per county and reflect gender, ages, and Tribal | 2) Data Management  
a) Data reports will undergo quality assurance upon TSP completion of ICWA QA process. Four quarterly data reports were provided to the Tribes in FY2010.  
ii. Data reports were presented to Michigan Tribes quarterly via NAA Director at the TSP meetings until March 2010. Starting April, 2010 NAA received Tribal approval to disseminate all reports |
<table>
<thead>
<tr>
<th>Child and Family Services Plan ICWA Specific Topics (Mandatory for Native American Affairs)</th>
<th>Tribal Consultation and Implementation for FY 2010-2014</th>
<th>FY2010 Benchmarks &amp; Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>ii) Race code corrections will be made to code a Tribal child by 4th quarter FY 2011. <strong>New.</strong></td>
<td>ii) Recommendation for data management to address correct codes for Tribal child (Race code); and to remove “unknown” from the race code options (April Tribal State Partnership 2011). <strong>New.</strong></td>
<td></td>
</tr>
<tr>
<td>iii) A survey will be developed &amp; disseminated to parents to determine if they were asked if they have Tribal ancestry by 4th quarter FY 2012. <strong>New.</strong></td>
<td>iii) Recommendation to have a survey developed &amp; disseminated to ask parents if they have been asked if they have Tribal ancestry (April Tribal State Partnership 2011). <strong>New.</strong></td>
<td></td>
</tr>
<tr>
<td>3) Quality Assurance:</td>
<td>3) Quality Assurance</td>
<td></td>
</tr>
<tr>
<td>a) Quality Assurance Plan development and implementation will occur by 4th quarter FY 2012 (includes: standards, case reads, self-assessment and reporting). <strong>Updated.</strong></td>
<td>a) i) The Children’s Bureau Quality Assurance unit submitted the case review tool to Tribal Social Services Directors and NAA to begin the planning for American Indian case quality assurance plan (October, 2009). <strong>New.</strong></td>
<td></td>
</tr>
<tr>
<td>i) Quality Assurance process will be developed to code Tribal children (Race Code) by 4th quarter FY 2011. <strong>New.</strong></td>
<td>ii) Recommendation for a Quality Assurance process to correctly code a Tribal child (Race Code) by 4th quarter FY 2011 (April Tribal State Partnership 2011) <strong>New.</strong></td>
<td></td>
</tr>
<tr>
<td>ii) A survey will be developed &amp; disseminated to parents to determine if they have Tribal ancestry by 4th quarter FY2012. <strong>New.</strong></td>
<td>iii) Recommendation for a survey to be developed &amp; disseminated to parents to</td>
<td></td>
</tr>
<tr>
<td>iii) Form will be created requiring signature of client indicating they have been asked if they have Tribal ancestry for client packets by 1st quarter FY 2012. <strong>New.</strong></td>
<td></td>
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</tr>
<tr>
<td>Child and Family Services Plan ICWA Specific Topics (Mandatory for Native American Affairs)</td>
<td>Tribal Consultation and Implementation for FY 2010-2014</td>
<td>FY2010 Benchmarks &amp; Progress</td>
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<tr>
<td>vi. Attention will be given to political status in the SACWIS project by 4th quarter FY 2012. New.</td>
<td></td>
<td>determine if they’ve been asked if they have Tribal ancestry by 4th quarter FY2012 (April Tribal State Partnership 2011). New.</td>
</tr>
<tr>
<td>vii. Add inquiry to Permanency Planning Conference form regarding Tribal affiliation by 1st quarter FY 2012. New.</td>
<td></td>
<td>iv) Form will be created requiring signature of client indicating they have been asked if they have Tribal ancestry for client packets by 1st quarter FY 2012 (April Tribal State Partnership 2011). New.</td>
</tr>
<tr>
<td>v. Recommendation to have a separate color folder for ICWA cases to flag them by 1st quarter FY 2012. New.</td>
<td></td>
<td>vi. Attention will be given to political status in the SACWIS project. New.</td>
</tr>
<tr>
<td>b) A Tribal ICWA Compliance Review Board will be created by 4th quarter FY 2012. Updated.</td>
<td></td>
<td>viii. Recommendation to have a separate color folder for ICWA cases to flag them (April Tribal State Partnership 2011). New.</td>
</tr>
<tr>
<td>c) DHS and Tribes will define Tribal Consultation by FY 2010. Completed for six Tribes.</td>
<td></td>
<td>x. Recommendation to add identification protocol to the SCAO Absent Parent Protocol April Tribal State Partnership 2011). New.</td>
</tr>
<tr>
<td>i) Collaboration with the Tribal Coalition will occur as defined by Tribal Consultation Agreement(s). New.</td>
<td></td>
<td>xi. Recommendation to have clients run through the 3 screening systems (April Tribal State Partnership 2011).</td>
</tr>
<tr>
<td>ii) Tribal recommendations for the Child Welfare Improvement Task Force will be monitored through the Tribal Consultation Process regarding improving Indian child welfare in Michigan:</td>
<td></td>
<td>xii. Recommendation for new</td>
</tr>
<tr>
<td>1) Tribes are not involved as critical decision-makers, although that is the legal requirement.</td>
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<tr>
<td>2) Timely assessments.</td>
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<tr>
<td>4) Designate competent ICWA staff.</td>
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<tr>
<td>5) Fully utilize the Bureau of Indian Affairs funding.</td>
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<tr>
<td>6) Report number of Native individuals on central registry.</td>
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<tr>
<td>7) Include issues related to sovereignty in training curriculum.</td>
<td></td>
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</tr>
<tr>
<td>8) Use Gogebic County as an example of best practice; partnerships between DHS and the Tribes are very positive in this region (<a href="http://www.michigan.gov/cwitf">http://www.michigan.gov/cwitf</a>). Updated.</td>
<td></td>
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<tr>
<td>i. Race code utilization reviews</td>
<td></td>
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<tr>
<td>ii. ICWA specific Parent Surveys</td>
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</table>

Note: New, Updated, Completed for six Tribes.
<table>
<thead>
<tr>
<th>Child and Family Services Plan</th>
<th>Tribal Consultation and Implementation for FY 2010-2014</th>
<th>FY2010 Benchmarks &amp; Progress</th>
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</thead>
</table>
| ICWA Specific Topics (Mandatory for Native American Affairs) | iii. ICWA specific additions to Client Forms iv. Centralized Intake Unit Policy for Tribal cases v. Absent Parent Protocol additions for Tribal cases (SCAO) vi. Mandatory run of client names through three screening systems (LEIN, etc.) | performance evaluation methods for ICWA implementation (April Tribal State Partnership 2011). xiii. Contract unit added ICWA law to Contract language and will review all ICWA cases for placement agency foster care by September 2010. xiv. NAA has implemented new policy listed in the CFSR PIP Goal: To ensure American Indian Children maintain connections to their community and heritage for Item 14. Development of tools/desk aides/flow charts are in the formative stages. xx. The Centralized Intake Unit (CIU) American Indian Coordination Committee met monthly in 2010 to assist with the implementation of CIU by October 2011. Projects include data compilation and county/Tribal surveys to seek best-practice models. b) The TSP developed new subcommittees to review policy initiatives for Indian children in care through recommendations from the new Tribal coalition in April 2011. c) An agreement defining Tribal consultation with the department in Michigan was developed from July, 2010 – November, 2010 in collaboration with the Tribal community of Michigan. Six agreements were signed April 2011 (Hannahville, Lac Vieux Desert Band, Little Traverse Bay Band, Little River Band, Nottawaseppi Band, Saginaw Chippewa Indian Tribe and Sault Ste. Marie Tribe of
<table>
<thead>
<tr>
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<th>Tribal Consultation and Implementation for FY 2010-2014</th>
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<tbody>
<tr>
<td>ICWA Specific Topics (Mandatory for Native American Affairs)</td>
<td></td>
<td>Chippewa Indians); Agreements with remaining Tribes will be ongoing as requested.</td>
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<tr>
<td></td>
<td></td>
<td>i. New engagement of Tribal Coalition as collaborators in Indian child welfare with the department.</td>
</tr>
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<td></td>
<td></td>
<td>ii. Tribal recommendations for the Child Welfare Improvement Task Force will be monitored through the Tribal Consultation Process (April Tribal State Partnership 2011).</td>
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<td></td>
<td></td>
<td>4) Recommendation to create a new category of Identification (April Tribal State Partnership 2011).</td>
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</table>

**Placement preferences of Indian children in foster care, pre-adoptive, and adoptive homes.**

1) **Quality Assurance:**
   - a) 25 Percent of all ICWA cases will be reviewed for compliance annually by 4th quarter FY 2012. *Updated.*
   - b) DHS and Tribes will define Tribal Consultation by FY 2010. *Completed for six Tribes.*

2) **Data Management:**
   - a) Reports tabulating 1) Placement via ICWA, 2) Placement outside of ICWA with Tribal approval and 3) Placement outside of ICWA without Tribal approval will be developed from hand-counted ICWA cases from FY 2010-2012.
   - b) By FY 2012, there will be a process to extract Indian Placement Priority Reports electronically to reflect gender, age and Tribal affiliation.

1) **Quality Assurance**
   - a) Family Engagement Model and Case Review Tools will be established in FY 2011 (April Tribal State Partnership 2011).
   - ii. The Director of Native American Affairs (NAA) will be a case reviewer for quality assurance (PIP/CFSR).
   - iii. Tribal Social Service Directors were invited to participate in QA case reviews (April Tribal State Partnership 2011).
   - v. NAA CFSR PIP Goal: To ensure American Indian Children maintain connections to their community and heritage. Strategy: To preserve the child’s connections to neighborhood, community, heritage, extended family,
### Child and Family Services Plan ICWA Specific Topics (Mandatory for Native American Affairs)

<table>
<thead>
<tr>
<th>Tribal Consultation and Implementation for FY 2010-2014</th>
<th>FY2010 Benchmarks &amp; Progress</th>
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<tbody>
<tr>
<td>faith and friends while in foster care) is ongoing.</td>
<td></td>
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<tr>
<td>b) Tribal Consultation defined November 2010 and Agreements were finalized April 2011 with 6 Tribes; remaining Tribal Agreements will occur as requested.</td>
<td></td>
</tr>
<tr>
<td>2) Data Management</td>
<td></td>
</tr>
<tr>
<td>a) DMU began quarterly Tribal specific data reports for CPS/FC/JJ/Adoption/YIT in June 2009. Data reports will undergo quality assurance upon TSP completion of ICWA QA process. Reports tabulating placement from hand-counted ICWA cases was tabled until quality assurance process is finalized.</td>
<td></td>
</tr>
<tr>
<td>b) SACWIS/FOX Gap Analysis recommendations from TSS Directors and NAA include ICWA data measures and adding Indian Outreach Services to SWSS to ensure proper data management and extraction. <strong>Ongoing.</strong></td>
<td></td>
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</tbody>
</table>

### Policy:

1. **Active efforts to prevent the breakup of the Indian family when parties seek to place a child in foster care or for adoption.**

   a. Reinstatement and implementation of an acceptable active efforts rate for Tribal contract agencies and private agencies for active efforts by FY 2010. **Completed.**
   
   b. By 4th quarter FY11, “Active Efforts” will be defined by Tribes. **Updated.**
   
   c. DHS will dedicate leadership staff to quarterly TSP meetings to ensure coordination and collaboration with Tribes and honor Tribal sovereignty.
   
   d. DHS and Tribes will define Tribal Consultation by FY 2010. **Completed for six Tribes.**

1. **Policy**

   a. The reinstatement and implementation of “active efforts” for Binogii Placement Agency was requested June 2009 and was approved April 2011.
   
   b. The Tribal State Partnership (TSP) **Ongoing.**
   
   c. **Completed.**
   
   d. See Placement 1) Quality Assurance b.
## Child and Family Services Plan
### ICWA Specific Topics
(Mandatory for Native American Affairs)

<table>
<thead>
<tr>
<th>Tribal Consultation and Implementation for FY 2010-2014</th>
<th>FY2010 Benchmarks &amp; Progress</th>
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<tbody>
<tr>
<td>Tribal right to intervene in State proceedings, or transfer proceedings to the jurisdiction of the Tribe.</td>
<td>1) Data Management: a) Monthly county report (hand count) of Tribal intervention and transfers to Tribal court cases will be generated by FY 2010; reports will reflect child age, gender and Tribal affiliation. b) By FY 2012, there will be a process to extract Tribal Intervention and Transfer to Tribal Court Reports electronically by county to reflect gender, age and Tribal affiliation. c) DHS and Tribes will define Tribal Consultation by FY 2010. <strong>Completed for six Tribes.</strong></td>
</tr>
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### Overall Child and Family Services Plan Topics
(Optional for Native American Affairs)

<table>
<thead>
<tr>
<th>Tribal Consultation and Implementation for Future 5-Year Plan</th>
<th>1) Policy: a) Minimum of one county with a Tribe should be selected for any future pilot programs occurring from FY 2010-2014. b) Tribes will be consulted regarding contract opportunities by FY 2010. c) Tribal representatives will be invited to participate in DHS Policy Committees that affect ICWA and Tribal Sovereignty by FY 2010. d) Tribal set-asides for programming will be researched by FY 2010. e) DHS and Tribes will define Tribal Consultation by FY 2010. <strong>Completed for six Tribes.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Stephanie Tubbs Jones Child Welfare Services Program (title IV-B subpart 1 – DHS Foster Care Services).</td>
<td>1) Policy a) The Bay Mills Indian Community and Inter-Tribal Council of Michigan 3 year FCAN grant contracts ended September 2010. New RFPs are being developed for Tribal specific FCAN grants. Contract Administrator for these grants is Native American Affairs (NAA) Director. b) i. Ongoing. iii. NAA and Juvenile Justice division collaborated on Tribal grant opportunities and contracts for FY11 or FY12. c) Tribal representation in DHS Committees includes the Centralized Intake Unit (CIU) Core Workgroup and CIU American Indian Coordination Subcommittee in 2010.</td>
</tr>
<tr>
<td>Child and Family Services Plan ICWA Specific Topics (Mandatory for Native American Affairs)</td>
<td>Tribal Consultation and Implementation for FY 2010-2014</td>
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</tbody>
</table>
| **Family Preservation (Includes Families First of Michigan (FFM), and Family Reunification Program (FRP))** | **1) Policy:**
   a) Minimum of one county with a Tribe should be selected for any future pilot programs occurring from FY 2010-2014.
   b) Tribes will be informed of contract opportunities by FY 2010.
   c) Tribal representatives will be invited to participate in DHS Policy Committees that affect ICWA and Tribal Sovereignty by FY 2010.
   d) Tribal set-asides for programming will be researched by FY 2010.
   e) DHS and Tribes will define Tribal Consultation by FY 2010. **Completed for six Tribes.** | **1) Policy**
   a) Ongoing.
   b) Ongoing.
   c) Ongoing.
   d) Ongoing.
   e) Ongoing. Urban Indian center and state historic Tribes provide consultation via the Urban Indian State Partnership meetings annually and monthly site visits from the NAA Director.
   **d) i. Ongoing.**  
   ii. The Tribes and NAA are currently consulting with Casey Family Programs 2020 initiative to target Indian child welfare specific improvements and disparity projects.
   **e) i. See Placement 1) Quality Assurance b.** |
| **Adoption Promotion and Support Services.** | **1) Policy:**
   a) Minimum of one county with a Tribe should be selected for any future pilot programs occurring from FY 2010-2014.
   b) Tribes will be informed of contract opportunities by FY 2010.
   c) Tribal representatives will be invited to participate in DHS Policy Committees that affect ICWA and Tribal Sovereignty by FY 2010.
   **1) Policy**
   a) Ongoing.
   b) Ongoing.
   c) Ongoing.
   d) Ongoing.
   e) Ongoing. Urban Indian center and state historic Tribes provide consultation via the annual Urban Indian State Partnership meetings and monthly site visits from the NAA Director.
   **d) Ongoing.** |
<table>
<thead>
<tr>
<th>Child and Family Services Plan</th>
<th>Tribal Consultation and Implementation for FY 2010-2014</th>
<th>FY2010 Benchmarks &amp; Progress</th>
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<td>ICWA Specific Topics</td>
<td>participate in DHS Policy Committees that affect ICWA and Tribal Sovereignty by FY 2010.</td>
<td><strong>1) Policy</strong></td>
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<tr>
<td>(Mandatory for Native American Affairs)</td>
<td>d) Tribal set-asides for programming will be researched by FY 2010.</td>
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<td>e) DHS and Tribes will define Tribal Consultation by FY 2010. <strong>Completed for six Tribes.</strong></td>
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</tr>
<tr>
<td>Caseworker Visit Funds</td>
<td>1) <strong>Policy:</strong></td>
<td>c) Ongoing.</td>
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<td>Training activities and costs to be funded through titles IV-B and IV-E of the Social Security Act.</td>
<td>1) <strong>Policy:</strong></td>
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| Child Abuse Prevention and Treatment Act (CAPTA) – DHS Child Protective Services. | 1) **Policy:**
   a) Minimum of one county with a Tribe should be selected for any future pilot programs occurring from FY 2010-2014.
   b) Tribes will be informed of contract opportunities by FY 2010.
   c) Tribal representatives will be invited to participate in DHS policy committees that affect ICWA and Tribal Sovereignty by FY 2010.
   d) Tribal set-asides for programming will be researched by FY 2010.
   e) DHS and Tribes will define Tribal Consultation by FY 2010. *Completed for six Tribes.* | 1) **Policy**
   a) Ongoing.
   b) Ongoing.
   c) Ongoing.
   d) Ongoing.
   e) Ongoing. |
| | 2) **Quality Assurance:**
   a) DHS will survey Tribes regarding their process for informing Tribal youth of Education and Training Voucher Program (ETV) eligibility and how to access services by FY 2010.
   b) Tribes will be provided technical assistance regarding ETV on an annual basis starting FY 2010.
   c) DHS and Tribes will define Tribal consultation by FY 2010. | |
| | 3) **Policy:**
   a) Minimum of one county with a Tribe should be selected for any future pilot programs occurring from FY 2010-2014. | |
| Chafee Foster Care Independence Program (CFCIP). | 1) **Quality Assurance:**
   a) DHS will survey Tribes regarding their process for informing Tribal youth of Education and Training Voucher Program (ETV) eligibility and how to access services by FY 2010.
   b) Tribes will be provided technical assistance regarding ETV on an annual basis starting FY 2010.
   c) DHS and Tribes will define Tribal consultation by FY 2010. | 1) **Quality Assurance**
   a) Stakeholder surveys to measure customer satisfaction and obtain recommendations for improving services beginning in FY 2011.
   iii. NAA monitors the CFSR PIP Goal: To ensure American Indian Children maintain connections to their community and heritage. |
| | 2) **Data Management:**
   a) Quality assurance of ICWA will be ensured through quantifiable data demonstrating all Indian cases by program, ICWA data measures and case plan services by system by county; will be captured from monthly ICWA case tabulations from FY 2010-2012.
   b) By FY 2012, there will be a process to extract ICWA case totals and data measures reports electronically (reports will be by county and reflect gender, age and Tribal affiliation). | 2) **Data Management**
   a) See Placement 2) Data a.
   b) See Placement 2) Data b. |
| | 3) **Policy:**
   a) Minimum of one county with a Tribe should be selected for any future pilot programs occurring from FY 2010-2014. | 3) **Policy**
   a) See Stephanie Tubbs Contract Administrator for these grants is NAA Director. |
| | 4) **Policy:**
   a) Minimum of one county with a Tribe should be selected for any future pilot programs occurring from FY 2010-2014. | d) Ongoing. |
| | 5) **Policy:**
   a) Minimum of one county with a Tribe should be selected for any future pilot programs occurring from FY 2010-2014. | |
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<td>d) Tribal set-asides for programming will be researched by FY 2010.</td>
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</table>
| Child Welfare Waiver Demonstrations approved under section 1130 of the Act, as appropriate. | 1) Policy: a) Minimum of one county with a Tribe should be selected for any future pilot programs occurring from FY 2010-2014. b) Tribes will be informed of contract opportunities by FY 2010. c) Tribal representatives will be invited to participate in DHS policy committees that affect ICWA and Tribal Sovereignty by FY 2010. d) Tribal set-asides for programming will be researched by FY 2010. e) DHS and Tribes will define Tribal consultation by FY 2010. | 1) Policy a) Ongoing. ii. See Stephanie Tubbs b) Ongoing. c) Ongoing. d) Ongoing. e) See Placement 1) Quality Assurance.
ALcona
Northeast Michigan Community Partnership, Inc.
3022 US 23 South, Ste. C
Alpena, MI 49707
Attn: Tamara Quick
E-Mail: quickfamily@wildblue.net
Phone: (989) 356-2880

ALLEGAn
Safe Harbor Children’s Advocacy Center
402 Trowbridge Street
Allegan, MI 49010-1231
Attn: Lori Antkoviak
Phone: (269) 673-3791
FAX: (269) 686-9481
E-Mail: lantkoviak@safeharborallegan.org
Web: http://www.safeharborallegan.org/

ALPena/Presque Isle
Alpena CAN Team, Inc.
1044 US 23 North
Alpena, MI 49707-0516
Attn: Robin Benson Clark
Phone: (989) 354-8089
E-Mail: bensonr@cfsnemi.org
Web: http://alpenapicanteam.com

ARENAC
Arenac Co. Child Protection Council
3727 Deep River Road
Standish, MI 48658
Attn: Alison Fegan
Phone: (989) 846-6541 ext. 8112
E-Mail: afegan@cmdhd.org

BARAGA/Houghton/KEWEENAW
Superior CAP Council
PO Box 832
900 W. Sharon Ave.
Houghton, MI 49931-0832
Attn: Rhys Edwards
Phone: (906) 482-4357
E-Mail: superiorcapcouncil@gmail.com
Web: http://superiorcapcouncil.org

BARRY
Child Abuse Prevention Council of Barry County
P.O. Box 304
520 S. Church St.
Hastings, MI 49058
Attn: Karen Jousma
Phone: (269) 945-6190
FAX: (269) 818-0084
E-Mail: capcbc@yahoo.com
Web: www.capcbc.org

BAY
Council for CAN
715 N. Euclid Ave.
Bay City, MI 48706-2951
Attn: Jill Krol
Phone: (989) 671-1355
FAX: (989) 671-2365
Email: kroljill@sbcglobal.net

Benzie
Benzie County CAP Council
C/O Benzine Probate Court
440 Court Place
PO Box 377
Beulah, MI 49617
Attn: Marilou Schlotterbeck
President: Nancy Kida
Phone: FAX: (231) 882-5987
E-Mail: 

BERRIEn
Council for Children
4938 Niles Rd.
Saint Joseph, MI 49085-9612
Attn: Jamie Rossow
Phone: (269) 556-9640
FAX: (269) 556-9643
E-Mail: jrossow@berrienchild.org
Web: www.berrienchild.org

Brianch
Branch County Council for C.A.N.
63 W. Washington St.
PO Box 17
Coldwater, MI 49036
Attn: Robert Wymer
Phone: (517) 278-5683
FAX: (517) 278-5683
E-Mail: bccc@cbpu.com

CALHOUN
Calhoun C.A.N. Council
PO Box 1216
16 Van Buren St.
Battle Creek, MI 49016
Attn: Karmel Puzzuoli
Phone: (269) 962-2562
E-Mail: coordinator@calhounprevention.org
Web: www.calhounprevention.org

CASS
Cass County Youth Council
PO Box 334
Cassopolis, MI 49031
Attn: Leigh Feldman
Phone: (269) 445-4444
FAX: (269) 445-4435
E-Mail: leighf@cassco.org

CHARLEvoie/emmet
Child Abuse Council of Charlevoix and Emmet Counties
PO Box 414
Petoskey, MI 49770
Attn: Lorraine Manary
Phone: (231) 582-9863
E-Mail: Imanary@charter.net

Cheboygan
Cheboygan County Child Advocacy Council
PO Box 154
595 O’Brien Drive
Cheboygan, MI 49721
Attn: Debra Turnbull
Phone: (231) 627-6015
FAX: (231) 597-0185
E-Mail: debrajtturnbull@hotmail.com

Chippewa
Chippewa Council for Youth & Families
PO Box 86
Sault Ste. Marie, MI 49783
Attn: Holly Wilkins
PD: Renee Johnson
Coordinator: (906) 440-0713
(906) 635-1655
Voicemail/FAX: (906) 635-1655
E-Mail: ccwyf@yahoo.com

CLARE
Clare County Youth Council
P.O. Box 691
Harrison, MI 48625
Attn: Betsy Wood (Chair)
Paris Philo, Executive Director
Phone: (989) 539-4229
FAX: (989) 539-4232
E-Mail: clarecountyouthcouncil@hotmail.com
CHILDREN’S TRUST FUND DESIGNATED LOCAL COUNCILS - FY 10

CLINTON
Clinton County Council for the Prevention of Child Abuse & Neglect
1000 E. Sturgis, Ste. 3
St. Johns, MI 48879
Attn: Jessica Austin
Phone: (989) 224-8845
E-Mail: Jaustin8845@gmail.com

CRAWFORD/ROSCOMMON
Child Protection Council
PO Box 834
Grayling, MI 49738
Attn: Cindy DeLadurantaye
Phone: (989) 344-9335
FAX: 989-344-1815
E-Mail: cindy.del@live.com
Web: www.crchildprotection.info

DELTA
Delta County Early Childhood Council MDS CAA/HRA Early Childhood Program
2840 College Ave.
Escanaba, MI 49829-9521
Attn: Julie Moberg
Phone: (906) 786-3032
FAX: (906) 786-2643
E-Mail: moberg@msu.edu

EATON
Child Abuse Prevention Council
325 S. Clinton, Lower Level S.E.
PO Box 301
Grand Ledge, MI 48837
Attn: Cheryl Krapf-Haddock
Phone/Fax (517) 622-4543
(517) 881-3782 (cell)
E-Mail: capcouncil@comcast.net
Web: www.capcouncil.com

GENESEE
Consortium on CAN
726 Church St.
Flint, MI 48502
Attn: Jonquil Berti
Phone: (810) 234-3680
FAX: (810) 234-2265
E-Mail: ccan-director@sbcglobal.net
Web: http://www.ccan-genesee.org/

GLADWIN
Gladwin County CAN Council
PO Box 426
Beaverton, MI 48612
Attn: Alison Fegan
Phone: (989) 426-9431 Ext 27
FAX: (989) 426-6952
E-Mail: Afegan@cmdhd.org

GOGBEC
Dove, Inc.
Gogebic Co Child Protection Council
PO Box 366
Ironwood, MI 49938
Attn: Jeanine Winkowski
Phone: (906) 932-4990
FAX: (906) 932-2040
E-Mail: Jewink16@yahoo.com

GRAND TRAVERSE/KALKASKA/LEELANAU
Tri-Co. Coalition for the Prevention of Child Abuse & Neglect
521 S. Union Street
Traverse City, MI 49684
Attn: Linda Wood
Phone: (231) 929-4166
FAX: (231) 947-3201
E-Mail: tricountycoalition@yahoo.com
Web: http://www.tccpcan.com

GRATIOT
Gratiot County Child Protection Council
150 West Center St.
Alma, MI 48801-2266
Attn: Audra Stahl
Phone: (989) 463-1422
FAX: (989) 466-2140
E-Mail: audra@linkforfamilies.org

HILLSDALE
Child Abuse Prevention & Awareness - Hillsdale
20 Care Dr.
Hillsdale, MI 49242
Attn: Jessica Adams
Phone: (517) 437-3100
FAX: (517) 437-3163
E-Mail: capahillsdale@sbcglobal.net
Web: www.capahillsdale.org

HURON
Huron County CAN Council
PO Box 332
Bad Axe, MI 48413
Attn: Kelli Braun
Phone: (989) 550-6261
E-Mail: BraunK@scheurer.org

INGHAM
Child Abuse Prevention Services
c/o Child and Family Services,
Capital Area
4287 Five Oaks Drive
Lansing, MI 48911
Attn: Jim Paparella
Phone: (517) 882-4000 Ext. 123
FAX: (517) 882-3506
E-Mail: jim@childandfamily.org
Web: http://www.childandfamily.org

IONIA
Ionia County Council for Prev. of CAN
PO Box 358
100 Main Street
Ionia, MI 48846
Attn: Dana Beech
Phone: (616) 527-4900 Ext. 1359
FAX: (616) 527-8069
E-Mail: dbeech@ioniaisd.org

IOSCO
Iosco Co Child Protection Council
P.O. Box 642
Oscoda, MI 48750
Attn: Mary Kreft
Phone: (989) 254-2426
E-Mail: Ioscokids@yahoo.com

IRON/DICKINSON
Children’s Advocacy Network
P.O. Box 98
228 Amber Street
Iron River, MI 49935
Attn: Kristina Carlson
Phone: (906) 265-4866
E-Mail: IronDickinsonCAN@aol.com

SABELLA
Child & Family Enrichment Council
3333 South Lincoln Rd
Mt. Pleasant, MI 48858
Attn: Dee Obrecht
Phone: (989) 773-6444
FAX: (989) 772-9663
E-Mail: Cafedee@hotmail.com
Web: www.cafecouncil.org
**JACKSON**
Council for the Prevention of Child Abuse and Neglect of Jackson Co.
606 Greenwood Place
Jackson, MI 49203
Attn: Keri Keck
Phone: (517) 788-4239
FAX: (517) 788-4685
E-Mail: kkeck@cpcan.net

**KALAMAZOO**
CAN Council
P.O. Box 275
3299 Gull Road
Nazareth, MI 49074-0275
Attn: Helen Otto
Phone: (269) 552-4430
FAX: (269) 552-4855
E-Mail: Mimi@Kcan.org
Web: www.kcan.org

**KENT**
Child and Family Resource Council
118 Commerce SW, Suite 220
Grand Rapids, MI 49503-4106
Attn: Susan Toman
PD: Lisa Jordon
Phone: (616) 454-4673
(616) 454-4673 Ext 141 (Lisa)
FAX: (616) 454-2059
E-Mail: stoman@childresource.cc
Web: www.childresource.cc

**LAKES**
Council for Prevention of CAN
1153 Michigan Ave.
Baldwin, MI 49304
Attn: Chad Hurrle
Phone: (231) 745-2712
FAX: (231) 745-9008
E-Mail: Cjhurrle@yahoo.com

**LAPEER**
Council for Children
1125 South Lapeer Road
Lapeer, MI 48446
Attn: Deborah Pascoe
Phone: (810) 664-9990
E-Mail: PreventionCAC@aol.com

**LIVINGSTON**
Child Abuse Prevention Council
Page 3 Updated: 05/20/10

of Livingston County
3471 E. Grand River
Howell, MI 48843
Attn: Deanna Norris
Phone: (517) 548-2200 Ext 26
FAX: (517) 548-7751
E-Mail: cap@wrc-livingston.org
Web: www.wrc-livingston.org

**LUC**
Luce County Child Protection Council
407 W. Harrie St.
Newbury, MI 49868
Attn: Nancy Victorson
Phone: (906) 293-3203
E-Mail: kipling@msu.edu

**MACKINAC**
Mackinac County Child Protection Roundtable
PO Box 56
St. Ignace, MI 49781
Attn: Mary Swiderski
Phone: (906) 643-7345
E-Mail: pemble@msu.edu

**MACOMB**
Care House/Macomb County Child Advocacy Center
131 Market St.
Mt. Clemens, MI 49043
Attn: Dorie Vazquez-Nolan
Phone: (586) 463-0123
FAX: (586) 783-3515
E-Mail: doriev@mccarehouse.org
Web: www.mccarehouse.net

**MANISTEE**
Manistee County Family Advocates
PO Box 594
Manistee, MI 49660
Attn: Mary Becker-Witt
Marilou Schlotterbeck (PD)
Phone: (231) 633-5414
Marilou (231) 882-4059
FAX: (231) 848-4628
E-Mail: mcfa@manistee.org
deaconstphillips@att.net

**MARQUETTE/ALGER**
CAN Council
706 Chippewa Square
Marquette, MI 49855
Attn: Chris Zenti
Phone: (906) 228-4050 Ext 118
E-Mail: czenti@maresa.k12.mi.us
Web: www.cfsup.org

**MASON/OCEANA**
Andre' Bosse Center
302 Hanson St.
Hart, MI 49420-1385

Mason
Marilyn Zylman
905 E. Ludington Ave.
Ludington, MI 49431
Phone: (231) 845-0506
E-Mail: marilyn@andrebossecenter.org

Oceana
Mary Hiddema
Email: maryh@oceana.net
Phone: (231) 873-1707 Ext. 225
Web: www.andrebossecenter.org

**MECOSTA**
Mecosta County Children's Council
PO Box 1132
Big Rapids, MI 49307
Attn: Shelley Izzard
Phone: (231) 580-6045
E-Mail: Mechildrencouncil@yahoo.com

**MENOMINEE**
Human Resources Authority
507 1st Avenue North
Escanaba, MI 49829
Attn: Kim Johnson
Phone: (906) 786-7080
Fax: (906) 786-9423
kjohron@mdsecp.com
MIDLAND
Safe & Sound Child Advocacy Center
2716 Jefferson Ave., Building #2
Midland, MI 48640
Attn: Karen Adams
Phone: (989) 835-9922
FAX: (989) 835-8446
E-Mail: info@mccpc.net
Web: www.mccpc.net

MONROE
Child Advocacy Network
1101 S. Raisinville Rd.
Monroe, MI 48161
Attn: Chris Todd
PD: Douglas Redding
Phone: (734) 242-5799
(734) 242-5799 Ext 1912 (PD)
FAX: (734) 242-5807
E-Mail: todd@misd.k12.mi.us

MONTGOMERY
We Care For Kids Council
P.O. Box 70
Stanton, MI 48888
Attn: Shannon Kilduff
Phone: (989) 289-7101
FAX: (989) 831-8496
E-Mail: montcalmkids@gmail.com
Web: www.wecare4kids.com

MONTMORENCY/OSCODA
Child Protection Council
PO Box 421
Atlanta, MI 49709
Attn: Maelyn Wiedbrauk
Phone: (989) 826-1160
Maelyn Wiedbrauk –(989) 785-6028
FAX: (989) 826-3961
Email: childprotectioncouncil@yahoo.com
wiedbraukm@michigan.gov

MUSKEGON
Child Abuse Council
1781 Peck St.
Muskegon, MI 49441
Attn: Vicki Price
Phone: (231) 728-6410
FAX: (231) 722-7161
E-Mail:
SCHOOLCRAFT
Schoolcraft County Child Abuse and Neglect Council
426 Chippewa Ave.
Manistique, MI 49854
Attn: Joan Ecclesine
Phone: (906) 341-6423 (work)
Phone: (906) 341-6637 (h)
Fax: (906) 341-5862
E-Mail: jecclesine@mdsecp.com

SHIAWASSEE
Council for CAN
1216 W. Main St.
Owosso, MI 48867
Attn: Rhonda Ihm
Phone: (989) 723-5877
FAX: (989) 720-5878
E-Mail: rhondaihm@yahoo.com

ST. CLAIR
St. Clair County CAN Council, Inc.
1107 Military Street
Port Huron, MI 48061-1031
Attn: Sally Straffon
Phone: (810) 966-9911
FAX: (810) 966-9933
E-Mail: Info@ssctstopchildabuse.org
Web: www.ssctstopchildabuse.org

ST. JOSEPH
Council for Prev. of CAN
17975 Centreville - Constantine Rd.
Constantine, MI 49042
Attn: Patsy Noe
Phone: (269) 435-7288
Fax: 269-435-7288
E-Mail: stjoecan@yahoo.com

VAN BUREN
Council for Prev. of CAN
P.O. Box 23
Paw Paw, MI 49079
Attn: Becky Fatzinger
Phone: (269) 427-6810
E-Mail: rfatzinger@vbcmh.com

WASHTENAW
Council for Children
3075 West Clark Road
Suite 110
Ypsilanti, MI 48197
Attn: Jyoti Gupta
Phone: (734) 434-4215
Fax: 734-434-4243
E-Mail: jyoti@washtenawchildren.org
Web: www.washtenawchildren.org

WAYNE (Out)
Child’s Hope
Fairlane Center South
University of Michigan – Dearborn
19000 Hubbard Drive, Suite 264
Dearborn, MI 48126
Attn: Ann Marie Valdez
Phone: (313) 583-6401
Fax: (313) 583-6402
E-Mail: childhpe@umd.umich.edu

WAYNE
Mayor’s Task Force on CAN/SEMHA
c/o Detroit-Wayne 4C
1151 Taylor, Bldg. 6
Detroit, MI 48202
Mayor’s Task Force on CAN
Carole Quarterman, Chair
Phone: (313) 259-4411
FAX: (313) 259-4415
E-Mail: cejqman@aol.com

SEMHA
Deborah Simmons
Phone: (313) 876-4716
E-Mail: ac8404@wayne.edu

WEXFORD/MISSAUKEE
Child Protection Council
PO Box 177
117 West Cass, Suite 4
Cadillac, MI 49601
Attn: Diane Dykstra or Alicia Mannes
Phone: (231) 775-3753
FAX: (231) 775-0169
E-Mail: ddunitedwaywex@sbcglobal.net
Baynes62@yahoo.com

MICHIGAN CHILDREN’S TRUST FUND
PO Box 30037
Lansing, MI 48909
Local Council Coordinator:
Emily S. Wachsberger
Phone: (517) 335-0671
FAX: (517) 241-7038
E-Mail: WachsbergerE@michigan.gov
Web: www.michigan.gov/ctf
1. Berrien County Health Department
   CTFDS 10-08001
   Counties: Berrien
   Address: 769 Pipestone
   Benton Harbor, MI 49023
   Phone: (269) 927-5650
   Phone: (269)927-5607
   Fax: (269) 926-8129
   Contact: Carol Klukas
   Contact: Theresa Green
   Email: tgreen@bchdmi.org
   Email:cklukas@bchdmi.org
   Period: FY10-FY12

   **Project:** The Nurse Family Partnership (NFP) program will serve 100 families annually, to work with each first-time mother from pregnancy until the child’s second birthday. NFP will help provide these first-time parents with the parenting tools needed to help them and their children avoid health and parenting problems that can lead to early development of antisocial behavior.

2. Berrien ISD
   CTFDS 08-11001-2
   Counties: Berrien
   Address: 711 St. Joseph Ave.
   Berrien Springs, MI 49103
   Phone: (269) 471-7725 x1354
   Fax: (269) 471-9731
   Contact: Claudia Vescolani
   Email: cvescola@remc11.k12.mi.us
   Period: FY08-FY10

   **Project:** The Parents as Teachers program expansion will serve an additional 80 Latino families. Two bilingual parent educators will deliver monthly home-based personal visits using the Born to Learn Curriculum. All participating parents will be encouraged to attend monthly group meetings with their children. All children will be routinely screened for developmental delays using the Brigance Screen and will also receive hearing and vision screening.

3. Canton Township
   CTFDS 09-82002-1
   County: Out Wayne
   Address: 1150 S. Canton Center Rd.
   Canton, MI 48188-1699
   Phone: (734) 394-5194
   Contact: Kristina Natoli
   Email: Kristina.Natoli@canton-mi.org
   Period: FY09-FY11

   **Project:** Building Families through Community Outreach program targets Canton at-risk families with teens living in elevated juvenile crime rate areas as identified by the Canton Police. Quarterly 90 minute Positive Youth Development Teen workshops will be provided.

4. Detroit Parent Network
   CTFDS 09-82001-1
   County: Wayne
   Address: 7375 Woodward, Ste. 1100
   Detroit, MI 48202
   Phone: (313) 309-1450
   Fax: (313) 309-1451
   Contact: Sharlonda Buckman
   Email: sbuckman@detroitparentnetwork.org
   Period: FY09-FY11

   **Project:** The Detroit Parent Network will provide two prevention services: parent education and support groups, and positive youth development programs, utilizing the Parents Anonymous program model. These programs are designed to foster positive parenting skills and improve parent/child interaction.

5. Genesee County ISD
   CTFDS 09-25001-1
   County: Genesee
   Address: 2413 West Maple Ave.
   Flint, MI 48507
   Phone: (810) 591-5118 (Gloria) or (810) 591-5119 (Aggie)
   Fax: (810) 591-4940
   Contact: Gloria Bourdon/Agnes Bedell
   Email: gbourdon@geneseeisd.org
   Email: abedell@geneseeisd.org
   Period: FY09-FY11

   **Project:** Parent education programs and support groups will be provided using the Nurturing Parenting Program Curriculum.
Parents with infants and children up to age 3 will be referred for these prevention services through the Genesee County Maltreated Infant & Toddler Treatment Court for parents who do not have open CPS cases.

6. Keweenaw Family Resource Center
CTFDS 10-31001
County: Keweenaw
Address: 203 E. Montezuma Ave.
Houghton, MI 49931
Phone: (906) 482-9363
Contact: Catherine Benda
Email: cbenda@chartermi.net
Period: FY10- FY12

Project: The First Link: Family Support Program is designed to create opportunities for families that increase protective factors while minimizing risks. This program will enhance and generate programs for parents with young children and pregnant teens by using the Hawaii Early Learning Profile and Florida State University Partners for a Healthy Baby curriculums for home visiting and support programs. The program will focus on reducing stress and increasing parenting and child development education.

7. Lutheran Child & Family Service of Michigan
CTFDS 09-41001-1
County: Kent
Address: 1715 Sutherland Drive
Kentwood, MI 49508
Phone: (616) 281-4601
Fax: (616) 281-4696
Contact: Steve Zwart
Email: szwart@lcfsmi.org
Period: FY09-FY11

Project: Parent education programs and support group curriculum will target Latino parents with children 0-18 in Kent County, referred through various community agencies. The Pailalen (meaning “bring peace”) is a violence prevention parent-training program model recognized by SAMSHA as a Promising Practice that provides strength-based prevention/intervention group experience for these Latino parents and children.

8. Marcellus Community Schools
CTFDS 08-14001-2
County: Cass
Address: PO Box 48
Marcellus, MI 49067
Phone: (269) 782-9716 x601
Fax: (269) 782-9789
Contact: Dan Price
Email: dprice@marcelluscs.org
Period: FY08-FY10

Project: The Volinia Outcomes Community Day Program will utilize the Triple P – Positive Parenting Program. Triple P is a multi-level system of parenting and family support with five distinct levels, each increasing with strength and intensity. Other services include an extended teen parenting education program, multiple types of counseling (group, individual, family and parent-teen), incorporation of the OJJDP Model Program SMART Team, respite service, family fun nights, weekly academic tutoring, a series of parenting education forums/speakers, and on-site child care services for teen parents and parents/caregivers who participate in Triple P and other Positive Parenting Project activities.

9. MSU Extension – Leelanau County Family Coordinating Council
CTFDS 08-45001-2
County: Leelanau
Address: 7401 East Duck Lake Rd.
Lake Leelanau, MI 49653
Phone: (231) 256-0222 (Bob) or (231) 357-2732 (Maggie)
Contact: Bob MacEachran (EGrAMS) or Maggie Sprattmoran (Program)
Email: bmaceachran@co.leelanau.mi.us
Email: maggie@leelanauchildrenscenter.org
Period: FY08-FY10

Project: Parenting Communities is a universal prevention program for Leelanau families with young children. The project
expansion will embed Parenting Communities in three more Leelanau child care programs and reach working families with young children. Parenting Communities is based on the Strengthening Families through Early Care and Education model and offers a menu of family support offerings to all Leelanau families with young children. This program includes playgroups, parent education groups, and home visits.

10. **Parent to Parent of SW Michigan**  
CTFDS 09-03001-1  
County: Kalamazoo, Allegan, Van Buren, Calhoun, Barry & St. Joseph  
Address: 406 E. Michigan  
Kalamazoo, MI 49007  
Phone: (269) 345-8950  
Contact: Candi Bush (Jayne Weaver)  
Email: candi@p2pswmi.org  
Web: www.p2pswmi.org  
Period: FY09-FY11

**Project:** The Parent Education Program will expand parent education programs and support group programs into Calhoun County. Prevention community resources and educational opportunities will be expanded to include Calhoun parents who have children 0-18 years of age with a disability or special needs. The program will target African-American parents for 25 percent of parent participation.

11. **Pathways, MI-Ottawa**  
CTFDS 09-70001-1  
County: Ottawa & Allegan  
Address: 412 Century Lane  
Holland, MI 49423  
Phone: (616) 396-2301 x123  
Fax: (616) 396-8070  
Contact: Joyce Bos  
Email: jbos@cfswm.org  
Web: www.cfswm.org  
Period: FY09-FY11

**Project:** The enhancement of the Circle of Parents program will target fathers in Ottawa and Allegan Counties who are experiencing identified risk factors for child abuse and neglect, primarily related to unemployment, underemployment and other economic stressors. The addition of the Conscious Fathering program will target those fathers with similar risk factors, focusing on fathers who are expecting their first child or are fathering an infant through 12 months.

12. **Power Inc.**  
CTFDS 10-81000  
County: Washtenaw  
Address: 4180 Packard Road  
Ann Arbor, MI 48108  
Phone: (734) 929-6509  
Contact: Teneka Epps, PNO Program Coordinator  
Secondary Contact: Dr. Carol Burrell-Jackson, Program Director  
Email: Tepps@powerclf.org  
Email: cbjackson@tds.net  
Period: FY10-FY12

The Parents’ Night Out program will offer psycho-educational and therapeutic support to parents and their children in a 6-week, 90-minute format to families who are at risk of child abuse and neglect. Thirty families per year will be served. The program will provide parent education; support; mentorship and enrichment to parents undergoing stress; knowledge of child development; leisure planning; non-abusive discipline; stress management; money management; self-esteem; empowerment; and nurturing parent-child relationships.

13. **St. Joseph Mercy Oakland**  
CTFDS 09-63001-1  
County: Oakland  
Address: 44405 Woodward  
Pontiac, MI 48341  
Phone: (248) 858-3173  
Fax: (248) 858-3299  
Contact: Tracy Muscat or Donna Raphael  
Email: muscatta@trinity-health.org  
Web: www.mercyoakland.com  
Period: FY09-FY11
14. **Student Advocacy Center of Michigan**  
CTFDS 09-81001-1  
County: Washtenaw  
Address: 1921 W. Michigan Ave.  
Ypsilanti, MI 48197  
Phone: (734) 482-0489  
Fax: (734) 482-0737  
Contact: Leslie Harrington or Penny Laperrie  
Email: leslie@studentadvocacycenter.org  
Web: www.studentadvocacycenter.org  
Period: FY09-FY11

**Project:** The objectives of the Student Advocacy Project are academic achievement; social and emotional competence; reduction of family distress; increased investment in education via weekly school visits; regular home visits; mentoring; tutoring; and summer camp program services. These services will be enhanced by adding Parents as Teachers in-home parenting education. There will also be an increase of the number of families served to 48.

15. **Student Advocacy Center of Michigan**  
CTFDS 10-81001  
County: Washtenaw  
Address: 1921 W. Michigan Avenue  
Ypsilanti, MI 48197  
Phone: (734) 482-0489  
Fax: (734) 482-0737  
Contact: Leslie Harrington or Penny Laperrie  
Email: leslie@studentadvocacycenter.org  
Email: Penny@studentadvocacycenter.org  
Web: www.studentadvocacycenter.org  
Period: FY10-FY12

**Project:** The Healthy Start/Healthy Families Oakland’s Family Connections program will serve 30 at-risk families annually. Potential families—referred through an established network of hospitals, health care providers and community agencies—are first screened across 13 separate risk areas to receive home visitation, family resource and support centers, and/or other parent support group program prevention services.

16. **Traverse City Area Public Schools**  
CTFDS-09-28001-1  
County: Grand Traverse  
Address: P.O. Box 32  
Traverse City, MI 49685-0032  
Phone: (231) 933-1716 (Cindy) or (231) 933-1780 (Angela)  
Contact: Cindy Berck or Angela Sides  
Email: berckci@tcaps.net  
Web: www.tcaps.net  
Period: FY09-FY11

**Project:** The objectives of the Student Advocacy Project are to expand its target population to include families with children 0-3 and pregnant mothers. The services are designed to enhance and strengthen the five CBCAP protective factors that will focus on prevention strategies to reduce families’ risks and deficits and to keep families healthy.

17. **West Midland Family Center**  
CTFDS 10-56000  
County: Midland  
Address: 2011 West Isabella Road  
Shepherd, MI 48883  
Phone: (989) 832-3256

**Project:** Teen Parent Training will provide for a full-time Parenting Education Coordinator to work with young families and coordinate a full range of services including Parents as Teachers personal visits, playgroups, parent group meetings, WIC services, childbirth education, breast feeding support, parenting education, infant mental health, and parent mentoring. Additionally, expanded services for pregnant and parenting teens will be added to the parent education component currently provided via the Traverse City High School Teen Parent Program. Parenting education, including education for Early Literacy, and Teen Parent Mentoring will be integrated into the existing services at Traverse City High School.
18. **West Midland Family Center**  
CTFDS 09-56001-1  
County: Midland  
Address: 2011 West Isabella Road  
Shepherd, MI 48883  
Phone: (989) 832-3256  
Contact: Susan Love  
Email: loves@wmfc.org  
Period: FY09-FY11  

**Project:** Expansion of the Family Mentoring Project. This project will incorporate a Family Mentor and Parent Education component into two new MSRP preschool sites, targeting children at least 4 years old through 11 years old. Additionally, WMFC will expand to include these same components into the WMFC elementary After School/Summer program. This project minimizes family seclusion and connects parents with a vast network of support in order to minimize family stress, and provide parents with the skills they need to care for their children in a safe and nurturing environment.

19. **Women’s Resource Center of Livingston County**  
CTFDS 09-47002-1  
County: Livingston  
Address: 3471 E. Grand River Avenue  
Howell, MI 48843  
Phone: (517) 548-2200  
Contact: Polly Mallory, Executive Director/Connie Dole, Program Manager  
Email: pmallory@wrc-livingston.org  
Email: cdole@wrc-livingston.org  
Web: www.wrc-livingston.org  
Period: FY10-FY12  

**Project:** The Healthy Family Livingston (HFL) program will expand the existing 12-week Steven Bavolek Nurturing Parenting Program by offering two 12-week programs for an expanded audience. The HFL program will improve family functioning by promoting the presence of “nurturing” and teaching five constructs of nurturing: empathy, appropriate developmental expectations, positive discipline, appropriate parent and child roles, and power and independence.
For more information, contact:
CTF Grant Coordinator
Sylvia Brown Jones, LMSW
Children’s Trust Fund
235 S. Grand Avenue, Suite 1411
Lansing, MI 48909
Phone: (517) 241-7792
Email: Brown-JonesS@michigan.gov

Meeting identified community needs through direct service grant agreements, as identified through local council prevention plans.