

PROGRAM DESCRIPTIONS

FY 2014

Michigan Department of Human Services

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Prepared by:
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Department:
Human Services

Program:
Child Development and Care

PROGRAM DESCRIPTION

The Michigan Department of Education is the lead agency for the Child Development and Care (CDC) program. A Memorandum of Understanding (MOU) between the Department of Education and the Department of Human Services (DHS) was established to identify services that will be provided by DHS to support program implementation.

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

The following services continue to be provided by DHS through the MOU:

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

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Child Support Enforcement	Program: Child Support	

PROGRAM STATEMENT

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

SOURCES OF FINANCING

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

LEGAL BASIS

- Federal Social Security Act (42 USC 651-669B), Title IV-D
- The Office of Child Support Act (Michigan Public Act 174 of 1971)
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS¹

The federal Office of Child Support Enforcement (OCSE) provides the state with 66 percent federal financial participation for IV-D child support services. OCSE also provides states with incentive payments based on five child support performance factors. In FY 2012, Michigan estimates it will receive approximately \$25.2 million in performance incentives from the federal government. Of the \$25.2 million in potential performance incentive payments, \$13.85 million would be available to the counties and \$11.35 million would be retained as revenue by the Department. The state and county government also contribute to program funding. Through child support collections, the IV-D program provides cost recovery funding for public assistance programs Temporary Assistance to Needy Families (TANF), IV-E and Medicaid, helping to offset expenditures in those programs. In FY 2012, \$78.7 million was recovered for public assistance reimbursement, including TANF and IV-E programs (source: federal report OCSE-34A), and \$43 million recovered for the Medicaid program. In FY 2012, the federal share of Michigan IV-D expenditures is estimated to be \$157.9 million.

¹ Source: OCSE-34A, OCSE-396A and OCSE-157)

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Child Support Enforcement	Program: Child Support	

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

Michigan Statewide Child Support Enforcement System (MiCSES) - MiCSES is the statewide child support computer system. The Department of Technology, Management & Budget (DTMB) maintains and operates the system using funding provided in the DHS appropriation. MiCSES tracks all support case activities, including collection, distribution, establishment, and enforcement. In FY 2012, MiCSES processed \$1.425 billion in child support payments (\$1.352 billion for IV-D cases, and \$73 million for non-IV-D cases). This is an average of \$27.4 million weekly.

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

Figures on the following graph show that overall IV-D child support collections substantially increased from FY 2001 through FY 2012. Collections significantly dropped from FY 2009 through FY 2011, which reflects the economic recession taking place during this time period.

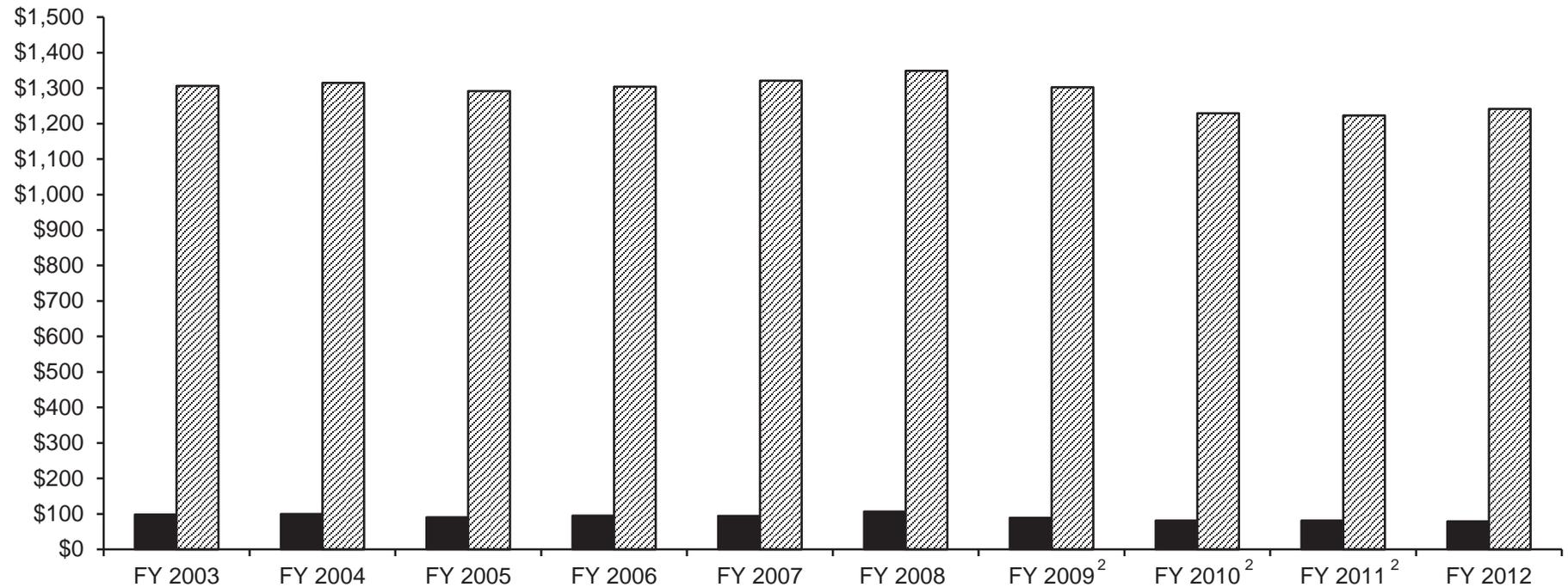
Office of Child Support FY 2012 Statistics Summary:

- At the end of FY 2012, there were 774,666 IV-D cases open with child support orders established.
- There were 964,608 children in the IV-D child support program in FY 2012.
- The statewide Paternity Establishment Rate for FY 2012 was 93.6 percent.
- Total IV-D collections distributed in FY 2012: \$1.352 billion.
- Michigan ranked seventh nationally in FY 2011 in IV-D collections distributed.

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

Public Assistance (PA) and Non-Public Assistance (NPA) Case-Related Michigan Collections¹
FY 2003 - FY 2012

*Collections in
Millions of Dollars*



■ PA	\$97.9	\$99.8	\$90.2	\$95.4	\$94.7	\$106.6	\$89.2	\$81.6	\$81.6	\$78.7
▨ Non-PA	\$1,305.9	\$1,314.6	\$1,291.3	\$1,304.2	\$1,321.0	\$1,349.1	\$1,302.7	\$1,229.0	\$1,223.1	\$1,241.6
Total	\$1,403.8	\$1,414.4	\$1,381.5	\$1,399.6	\$1,415.7	\$1,455.7	\$1,391.9	\$1,310.6	\$1,304.7	\$1,320.3

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

¹ Public Assistance collections include TANF and IV-E, and do not include out-of-state collections.

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

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Disability Determination Services	Program: Disability Determination Services	

PROGRAM STATEMENT

The Michigan Disability Determination Service (DDS) determines initial and continuing eligibility for disability benefits for: 1) Social Security Disability Insurance (SSDI), 2) Supplemental Security Income (SSI), 3) Medicaid Assistance (MA), 4) State Disability Assistance (SDA), and 5) the Office of Retirement Services (ORS) disability retirement program. SSDI, MA and SDA programs have the same medical/vocational eligibility criteria.

Regarding ORS, DDS develops evidence and makes recommendations to the ORS retirement board, which subsequently makes decisions on claims. The ORS serves State of Michigan employees, including state police and judges, as well as public school employees covered by employee retirement programs.

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

Medical and Vocational Eligibility Factors:

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

SOURCES OF FINANCING

- SSDI benefits are 100 percent federally funded.
- SSDI benefits are not reflected in the DHS budget.
- SSDI: Federal Title II funds.
- SSI: Federal Title XVI funds.

LEGAL BASIS

- Social Security Act, 1935
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

Department:
Human ServicesAppropriation Unit:
Disability Determination ServicesProgram:
Disability Determination Services**PROGRAM EFFECTIVENESS / PROGRAM IMPACTS**

**DISABILITY DETERMINATION SERVICE WORKLOAD:
Social Security Administration
ACTUAL CASE DISPOSITIONS**

Fiscal Year	Budgeted Dispositions¹	New Applications²	Actual Case Dispositions³
2003	124,673	126,043	127,440
2004	127,756	129,057	128,133
2005	132,211	130,707	133,437
2006	121,211	105,639	127,083
2007	117,677	107,028	120,391
2008	124,898	103,659	123,252
2009	123,153	115,664	126,332
2010	138,599	115,711	136,036
2011	147,339	148,423	148,008
2012	146,950	148,365	149,856

PENDING CASES

Fiscal Year	Pending Cases⁴
2003	34,210
2004	34,986
2005	28,594
2006	25,154
2007	33,150
2008	26,971
2009	37,011
2010	35,210
2011	35,151
2012	36,810

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

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

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

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

Department:
Human Services

Appropriation Unit:
Disability Determination Services

Program:
Disability Determination Services

**DISABILITY DETERMINATION SERVICE WORKLOAD:
Medicaid / SDA**

Fiscal Year	Budgeted Dispositions ⁵	New Applications ⁶	Actual Case Dispositions ⁷
2003	\$1,587,087	44,047	43,751
2004	\$1,681,267	47,259	47,065
2005	\$1,774,726	52,153	52,209
2006	\$1,909,244	55,576	55,214
2007	\$1,874,886	54,777	54,963

Fiscal Year	Budgeted Dispositions	New Applications	Actual Case Dispositions
2008	\$2,075,509	55,690	56,297
2009	\$2,672,200	45,598	45,706
2010	\$2,901,100	46,929	46,557
2011	\$3,038,900	50,833	54,657
2012	\$2,941,300	55,877	55,046

Fiscal Year	Pending Cases ⁸
2003	1,410
2004	1,735
2005	1,482
2006	2,010
2007	1,672

Fiscal Year	Pending Cases
2008	817
2009	403
2010	655
2011	5,500
2012	2,800

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

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

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

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

Department:
Human Services

Appropriation Unit:
Disability Determination Services

Program:
Disability Determination Services

**DISABILITY DETERMINATION SERVICE WORKLOAD:
Office of Retirement Services**

Fiscal Year	Budgeted Dispositions ⁹	New Applications ¹⁰	Actual Case Dispositions ¹¹
2003	1,000	N/A	N/A
2004	1,000	863	948
2005	1,000	752	890
2006	1,000	835	862
2007	1,000	748	748

Fiscal Year	Budgeted Dispositions	New Applications	Actual Case Dispositions
2008	1,000	590	678
2009	1,000	694	699
2010	1,000	797	801
2011	1,000	724	753
2012	1,000	730	735

Fiscal Year	Pending Cases ¹²
2003	N/A
2004	137
2005	N/A
2006	107
2007	N/A

Fiscal Year	Pending Cases
2008	N/A
2009	111
2010	87
2011	94
2012	81

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

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

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

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

Department:
Human Services

Appropriation Unit:
Disability Determination Services

Program:
Disability Determination Services

**DISABILITY DETERMINATION SERVICE:
All workloads**

DISABILITY DETERMINATION SERVICE BUDGET (OPERATIONS) (In Millions of Dollars)	
FY 2003	\$68.2
FY 2005	\$75.6
FY 2006	\$80.1
FY 2007	\$81.3
FY 2008	\$76.1
FY 2009	\$83.0
FY 2010	\$95.9
FY 2011	\$111.4
FY 2012	\$118.8

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: Family Independence Program (FIP)

PROGRAM STATEMENT

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

Population Description - October 2012

- Average case size: 2.6 people (one adult and one to two children).
- Ninety-two percent of grantees are female.
- Average grantee age: 30 years.
- 42 percent of grantees are white, 56 percent are black, and 2 percent are other (including Hispanic & American Indian).

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

- **Financial Eligibility Factors**: To be eligible for FIP, a family must meet income and asset requirements. The family’s income (*minus an earned income (EI) disregard of \$200 plus 50 percent of EI*), plus certifiable child support income is deducted from the payment standard to determine whether or not the family is eligible to receive assistance. The asset limit is \$3,000 for cash assets (which includes cash on hand or in savings and checking accounts, investments, retirement plans and trusts). The property asset limit is \$500,000.
- **Non-Financial Eligibility Factors**: Major non-financial eligibility factors include, but are not limited to: time on assistance, age of children, cooperation with employment and training requirements (including development of a Family Self-Sufficiency Plan), school attendance and child support requirements. FIP recipients are required to participate up to 40 hours per week in employment and/or employment-related activities.

Minor Parents

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

Services Provided To FIP Recipients

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

Department:
Human ServicesAppropriation Unit:
Public AssistanceProgram:
Family Independence Program (FIP)

FY 2013 GRANT AND FOOD ASSISTANCE LEVELS

	Grant	Food Assistance	Grant + FAP
Eligible Adult and Two Children	\$492	\$526 ¹	\$1,018
	Grant	Food Assistance	Grant + FAP + SSI (\$724) ²
Ineligible Adult and Two Children ³	\$274	\$442	\$1,440

- **Food Assistance Program:** FIP works in conjunction with the Food Assistance Program (FAP) to raise the food purchasing power of FIP families. FAP benefit levels are based on net income, allowable expenses and family size. In FY 2013, a family of three receiving a \$492 monthly FIP grant (with no other income), is eligible for \$526 in monthly FAP benefits.
- **Medical Assistance:** Families eligible for FIP benefits may also be eligible for Medicaid.

¹ This group receives the same FAP benefits as in FY 2012.

² Estimated Food Assistance assumes that the recipient pays \$400 in monthly rent and incurs the standard FY 2013 FAP heat and utility expense of \$575. The SSI amount is composed of \$710 (starting January 2013) in federal benefits and a \$14 state supplement.

³ While the income of an Ineligible Adult is not counted when determining FIP benefit amounts, the 2013 calendar year SSI amount of \$724 (starting January 2013) is counted when determining the Food Assistance amount. Thus, the Food Assistance benefit amount will depend on the family's total income.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: Family Independence Program (FIP)

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

SOURCES OF FINANCING

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

LEGAL BASIS

- Federal Social Security Act
- Social Welfare Act, 1939 PA 280
- Administrative Rules 400.3101 – 400.3131
- DHS FY 2013 Appropriations, 2012 PA 200, Article X

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: Family Independence Program (FIP)

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

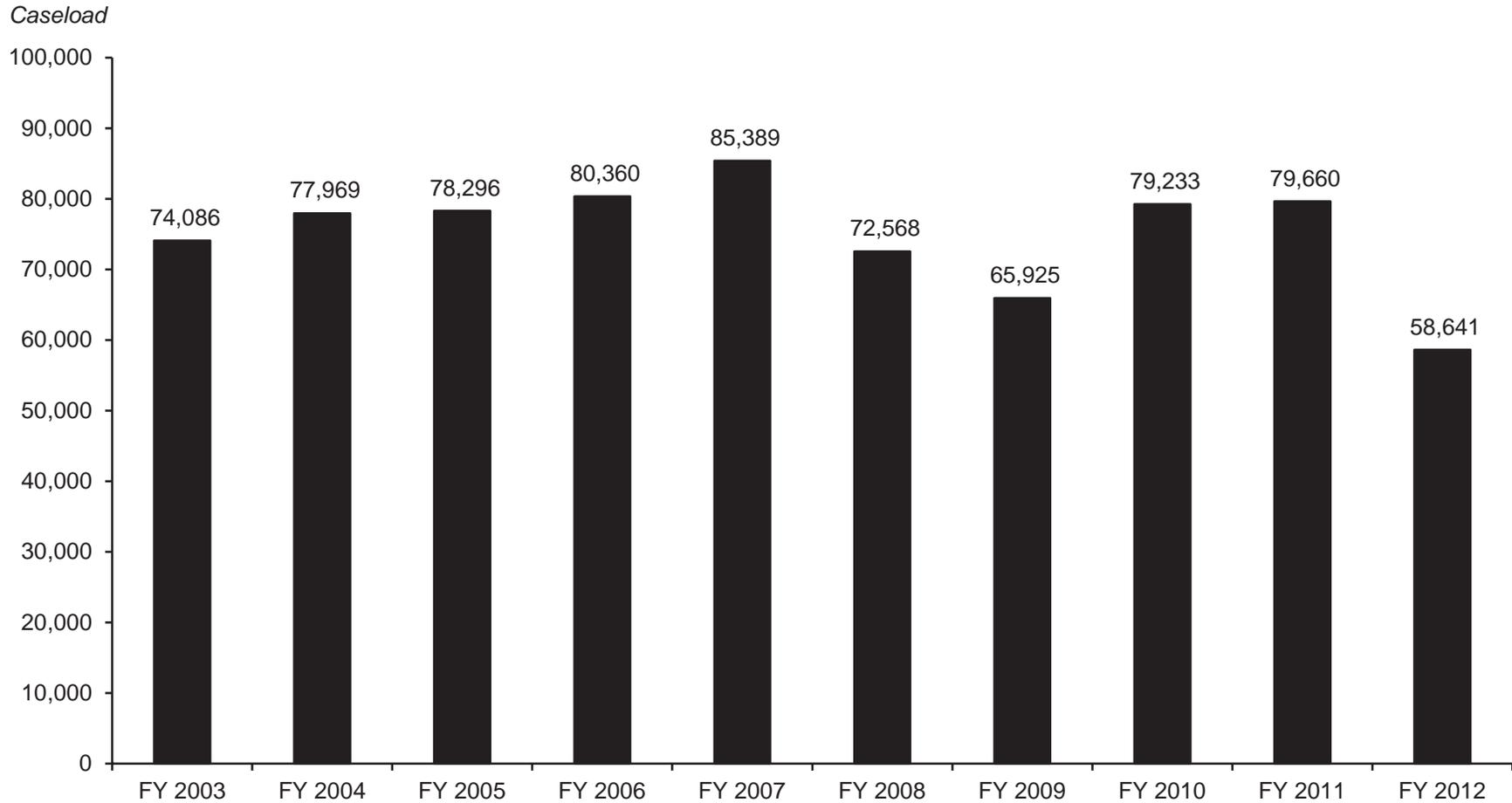
The following graph summarizes FIP-regular annual average caseloads from FY 2003 through FY 2012.⁴ The second graph shows FIP-Regular maximum payments as a percentage of the poverty level with and without Food Assistance Program benefits through FY 2013. Maximum payments for a family of three were 35 percent of the poverty level in FY 2009, 34 percent in FY 2010, 34 percent in FY 2011, 32 percent in FY 2012, and an estimated 32 percent in FY 2013.

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

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

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

DEPARTMENT OF HUMAN SERVICES
FAMILY INDEPENDENCE PROGRAM (FIP)
 Average Monthly FIP-Regular Caseload Trends
 FY 2003 - FY 2012

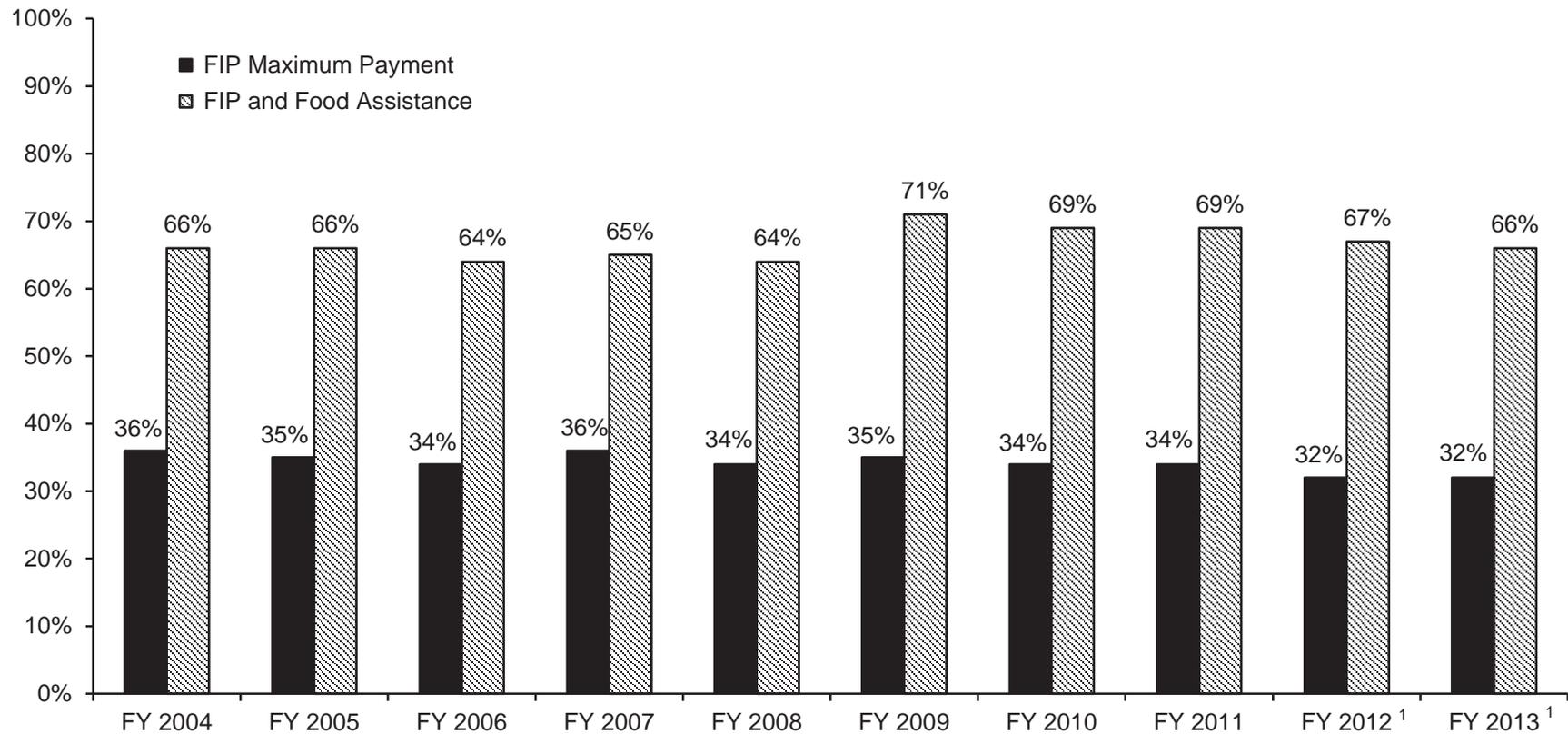


NOTE: The FY 2012 average monthly caseload of 58,641 was the lowest since FY 1969, when it was 52,408. The highest average monthly caseload was 241,157, recorded for FY 1981.

DEPARTMENT OF HUMAN SERVICES

FIP MAXIMUM PAYMENT AS A PERCENTAGE OF THE POVERTY LEVEL

Family Group Size of Three Based on Federal Poverty Thresholds: FY 2004 - FY 2013



Note: The FY 2013 maximum payment is estimated to be 32 percent of the poverty level. Adding food assistance to the FIP payment results in a family benefit estimated to be 66 percent of the poverty threshold. FIP amounts did not increase for this group from the FY 2012 level.

¹ *Estimated values.*

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: Food Assistance Program	

PROGRAM STATEMENT

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

Program Description/Eligibility Factors:

Groups of people living in the same household are eligible for FAP benefits based on criteria such as, but not limited to: assets, net income, household size, and certain expenses. FAP groups are categorically eligible if all group members receive Family Independence Program (FIP) benefits, State Disability Assistance (SDA) benefits, Supplemental Security Income, or if they meet income and asset limits. A group is not categorically eligible for FAP if any member of the group is disqualified for an intentional program violation, drug-related felony or employment-related activity when the disqualified person is the head of household.

FAP benefits are not considered income or assets for FIP, SDA Medicaid (MA), or any other federal, state or local programs. Therefore, any other assistance for which a FAP household qualifies is not reduced because of the household's receipt of FAP benefits. FAP benefits can be used to buy eligible food items at any Food and Nutrition Service-authorized retail food store or approved meal provider. Eligible items include:

1) Any food or beverage product intended for human consumption except alcoholic beverages, tobacco, and hot foods or foods ready for immediate consumption, and 2) Seeds and plants for use in gardens to produce food for the personal consumption of the eligible household.

Clients who are homeless, elderly or disabled may use their FAP benefits in the following settings:

- 1) Shelter for battered women and children.
- 2) Communal dining facilities.
- 3) Group living arrangements.
- 4) Homeless meal providers.
- 5) Meal delivery services (such as "Meals on Wheels").
- 6) Senior citizens' center / residential building.

There are Two Types of FAP Households:

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

SOURCES OF FINANCING

- 100 percent federal funding for Food Assistance benefits through the U.S. Department of Agriculture Food and Nutrition Service (USDA - FNS).

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: Food Assistance Program	

- 50 percent USDA-FNS funding for associated administrative costs less any administrative expense amount determined to have been included in the TANF block grant.
- State funds.

PUBLIC ASSISTANCE RECOUPMENTS

- Food and Nutrition Act of 2008- 7 U.S.C. 2011-2036
- 7 CFR 271.1-283.32
- Administrative Rules 400.3001-400.3015
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

In Fiscal Year 2012, the average monthly number of households receiving FAP benefits was 924,643, providing monthly supplemental food benefits to 1,828,384 people. In FY 2012, the unduplicated count of people receiving FAP benefits at any point during the fiscal year was 2,345,249, nearly 24 percent of Michigan's population.

FAP is now projected to continue year-over-year decreases through FY 2013. Year-over-year FAP household decreases through FY 2013 are based on policy factors and an improving Michigan economy. An average monthly 2,100 non-PA FAP households (those not receiving cash benefits) are leaving FAP. The first significant drop in this FAP component occurred in April 2011 when DHS policy changed to no longer allow most college students to receive FAP benefits. The policy change resulted in FAP-only cases for students dropping by over 25,000 from March to April 2011. The corresponding drop in FAP recipients was 30,808.

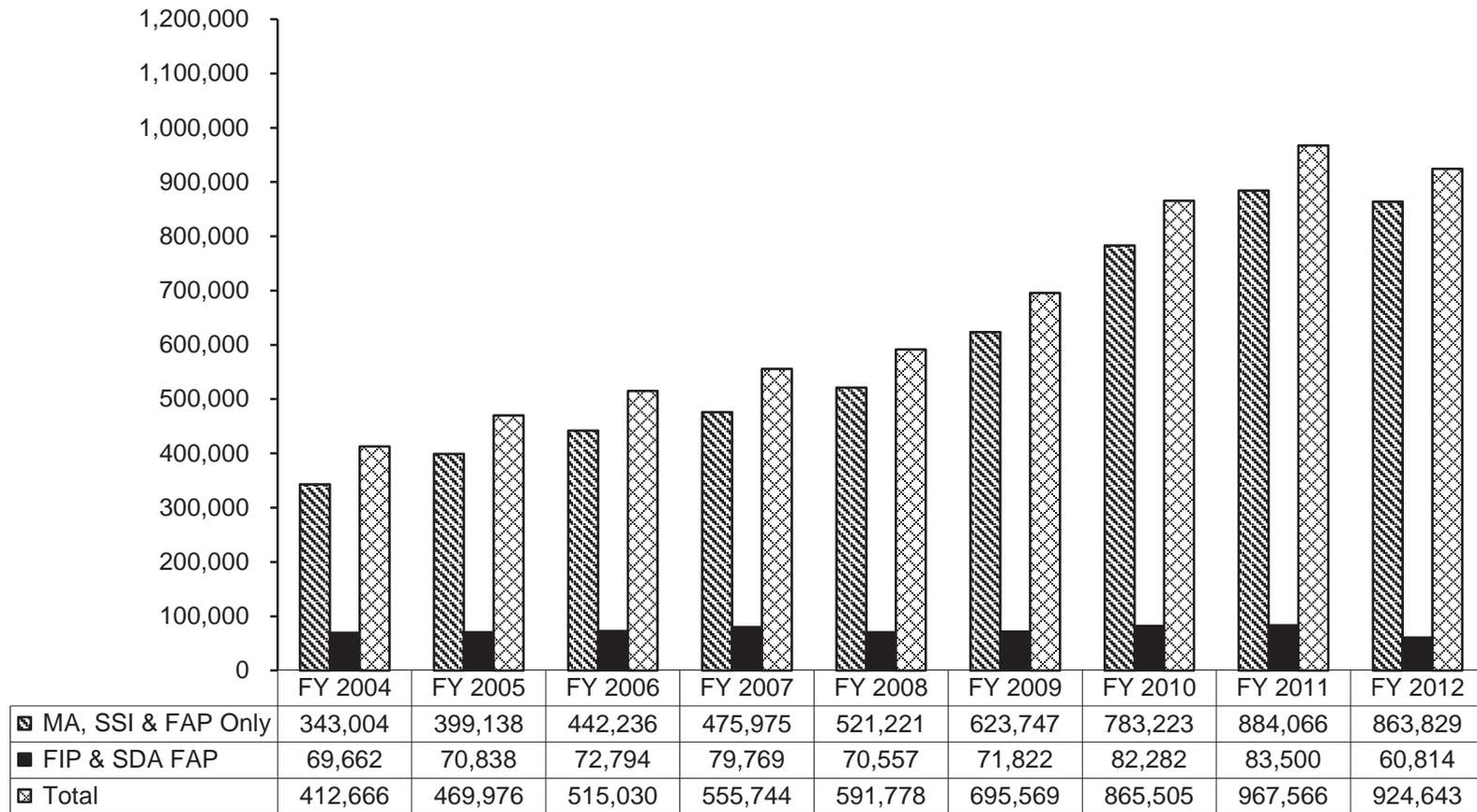
Since that time, continued decreases in non-PA FAP households are attributed to an improving Michigan economy as well as the impacts of a new asset test implemented October 2011. In order to be FAP eligible, clients cannot have countable assets above \$5,000. Countable assets include but are not limited to checking and savings accounts. Not included as countable assets are employer sponsored retirement accounts and burial plots. Further, beginning in FY 2012, certain vehicles are also a countable asset, excluding the vehicle with the highest fair market value. However, a household with more than one vehicle could not have a combined fair market value of all vehicles above \$15,000 and remain eligible for FAP.

While FAP household totals are projected to decrease through FY 2014, the DHS Policy and Compliance Office and partners continue to provide public access to benefits. For example, "MI Bridges," Michigan's online FAP application project, was implemented in August 2009. Since implementation of the online FAP application, 480,492 people used it to apply for FAP benefits. The use of "MI Bridges" more than doubled from FY 2010 to FY 2011.

Further, the Michigan Combined Application Project (MiCAP) has kept Michigan FAP participation at a high level. MiCAP is a USDA-FNS-approved process allowing Supplemental Security Income (SSI) clients to automatically receive nutritional benefits. MiCAP was implemented in April 2009 and to date has provided assistance to 15,000 FAP households.

DEPARTMENT OF HUMAN SERVICES FOOD ASSISTANCE HOUSEHOLD SUMMARY

Average Monthly Cases
FY 2004 - FY 2012



Note: The FY 2012 FAP monthly household average was the second highest on record at 924,643, providing benefits to 1,828,384 people. The highest household and recipient totals were recorded in FY 2011 at 967,566 and 1,928,478 respectively. Reflecting forecasts for continued improvements in Michigan's labor market conditions, FAP is now projected to continue year-over-year decreases through FY 2013.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department	Appropriation Unit	Program	
Human Services	Public Assistance	Low-Income Home Energy Assistance Program	

PROGRAM STATEMENT

The Low-Income Home Energy Assistance Program (LIHEAP) provides assistance to disadvantaged households in meeting the costs of home energy. LIHEAP provides three types of energy assistance payments: 1) Basic heating assistance, through the Michigan Home Heating Credit; 2) State Emergency Relief (SER) energy services — crisis assistance for those facing energy or energy-related home repair emergencies; and 3) Weatherization services. In FY 2012, 371,005 low-income households received basic heating assistance; 266,519 received crisis energy assistance; 1,646 households received energy-related home repair services. Some households may have received more than one of the above LIHEAP services.

SOURCES OF FINANCING

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

LEGAL BASIS

- Federal Low Income Home Energy Assistance Act of 1981 (Title XXVI of Public Law 97-35) 45 CFR Part 96.
- Michigan Income Tax Act, 2004 PA 335 (Michigan Home Heating Tax Credit)
- DHS FY 2013 Appropriations, 2012 PA 200, Article X.

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

<u>FY 2012 LIHEAP Activity:</u>	<u>Households</u>	<u>Average Payments</u>
<u>Basic Heating Assistance</u>		
Home Heating Credit	371,005	\$167
<u>SER Energy Services</u>		
Heating and Electric	266,519 ¹	\$561
Energy-Related Home Repairs	1,646	\$2,179
<u>Weatherization</u>	N/A	N/A

NOTE: LIHEAP funds for FY 2012 weatherization were not allocated. In contrast, in FY 2011 4,705 households received Weatherization assistance. FY 2011 weatherization payments averaged \$1,825.

¹ In addition to LIHEAP, funding from the Vulnerable Heat and Warmth Fund was used to assist households with heating services. This number includes those households.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit Public Assistance	Program: Medical Assistance (Medicaid)	

PROGRAM STATEMENT

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

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

SOURCES OF FINANCING

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

LEGAL BASIS

- Title XIX of the Social Security Act 1902 (a)(10)(A) and (e)
- 42 CFR (Code of Federal Regulations)
- Social Welfare Act, 1939 PA 280, MCL 400.106
- DCH FY 2013 Appropriations Act, 2012 PA No. 200, Article IV
- DHS FY 2013 Appropriations Act, 2012 PA No. 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

Total Medicaid beneficiaries: FY 2012¹

Family Medicaid:	759,878
Pregnant women & children under age 21:	681,039
Non-SSI - Aged (over 65), Blind, Disabled:	211,510
<u>SSI Aged, Blind, Disabled</u>	<u>267,777</u>
Total:	1,920,204

¹ Data sources: DHS Trend Report of Key Program Statistics: Tables 1, 31 and 32

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit Public Assistance	Program: Medical Assistance (Medicaid)	

FY 2012 Average Monthly Recipients

- 1,920,204 Medicaid recipients.
- 42,726 Adult Medicaid Program recipients.
 - *(Above Medicaid and Adult Medicaid recipients are active in 30 different Medicaid categories).*

Eligibility Determination

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

Access to Benefits

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

The following several pages provide an overview of Medicaid program categories. Two subsequent graphs display Medicaid recipient and expenditure trends (FY 2003-FY 2012).

**MEDICAID OVERVIEW
December 2012**

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

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

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

	MA Category	BEM Item	Unique Non-Financial Eligibility Factor	Automatic MA Eligibility
FIP Related Categories				
12.	Newborns: A child whose mother is receiving MA on the date of the child's birth is eligible for MA through the month of his/her first birthday if the child lives with his mother and the mother remains an MA recipient or meets certain MA eligibility factors. <i>Effective date 10-1-84</i>	145	Newborn	Yes ²
13.	Plan First! Family Planning Program: A health coverage program operated by the Department of Community Health (DCH) which will provide family planning services to women who otherwise would not have full medical coverage. <i>Effective date 07-01-06</i>	124	Non-pregnant women between age of 19-44 not currently covered by Medicaid or Adult Medical Program	No
SSI-Related Categories:				
14.	SSI Recipients: All SSI recipients are eligible for MA. <i>Effective date 1-1-74</i>	150	Aged, blind or disabled	Yes
15.	Appealing SSI Termination <i>Effective date 1-1-74</i>	150	Appealing SSI termination	No
16.	Special Disabled Children <i>Effective date 2-1-98</i>	154	Former SSI recipient child	No
17.	503 Individuals: A former SSI recipient who receives RSDI benefits and who would now be eligible for SSI if RSDI cost of living increases paid since SSI eligibility ended were excluded is eligible for MA. <i>Effective date 7-7-77</i>	155	Aged, blind or disabled	No

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

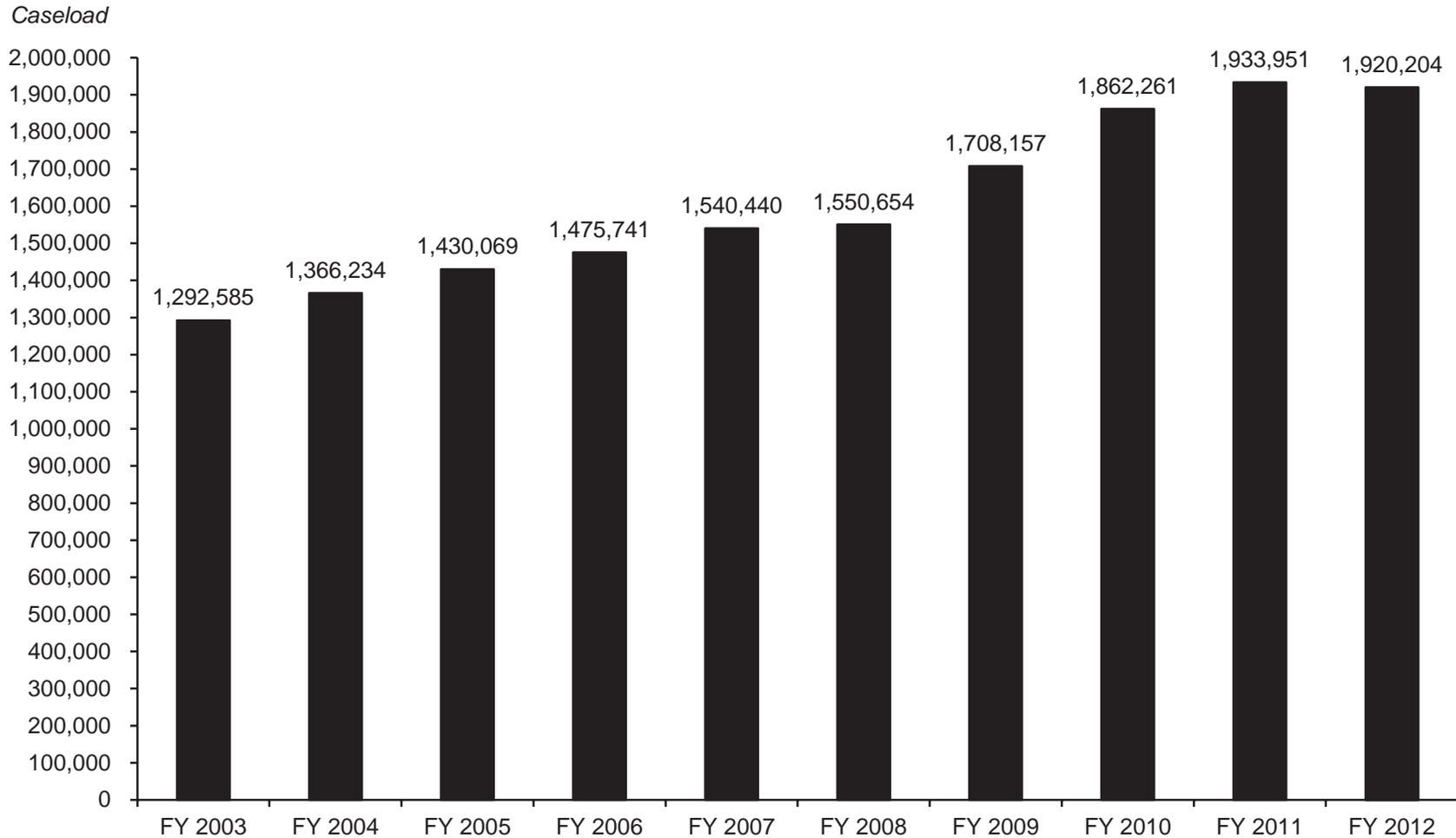
	MA Category	BEM Item	Unique Non-Financial Eligibility Factor	Automatic MA Eligibility
SSI-Related Categories:				
18.	<p>COBRA Widow(er)s: A person who received RSDI as a disabled widow(er) in January 1984 and also received SSI, who continued to receive RSDI but whose SSI ended due to a special RSDI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

	MA Category	BEM Item	Unique Non-Financial Eligibility Factor	Automatic MA Eligibility
SSI-Related Categories:				
24.	Group 2 Aged, Blind and Disabled: Aged, blind or disabled persons who meet the Group 2 income and asset requirements are eligible for MA. Incurred medical expenses may be used in determining eligibility (spend-down). <i>Effective date 1966</i>	166	Aged, blind or disabled	No
25.	QDWI: Persons entitled to Medicare Part A under section 1818A of the Social Security Act who have income up to 200 percent of the poverty level and who are not eligible for MA under any other category are eligible for MA payment of Medicare Part A premiums. <i>Effective date 7-1-90</i>	169	Type of Medicare	No
26.	Home Care Children: Disabled children under age 18 who require institutional care but who can be cared for at home for less cost are eligible for MA. Only the child's (and not the parent's) income and assets are considered in determining eligibility. (Medical eligibility for this category is determined by DPH). <i>Effective date 10-1-87</i>	170	Disabled	No
27.	Children's Waiver: Disabled children who require institutional care but can be cared for at home for less cost are eligible for MA. Only the child's (and not the parent's) income and assets are considered in determining eligibility. (Medical eligibility for this category is determined by DMH.) <i>Effective date 1-1-92</i>	171	Disabled	No
28.	Breast and Cervical Cancer Prevention and Treatment Program <i>Effective date 5-1-02</i>	173	Health department cancer screening	No
29.	Freedom to Work (FTW): A disabled client age between 16 and 64 who has earned income, and the month being tested is not before January 2004, who is employed and meets all other MA eligibility requirements, is eligible for FTW. Note: SSI recipients whose SSI eligibility has ended due to financial factors are among those who should be considered for this program. <i>Effective date 4-1-04</i>	174	Income eligibility exists when a client's net unearned income does not exceed 100 percent of the Federal Poverty Level (FPL).	No

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit Public Assistance	Program: Medical Assistance (Medicaid)	

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

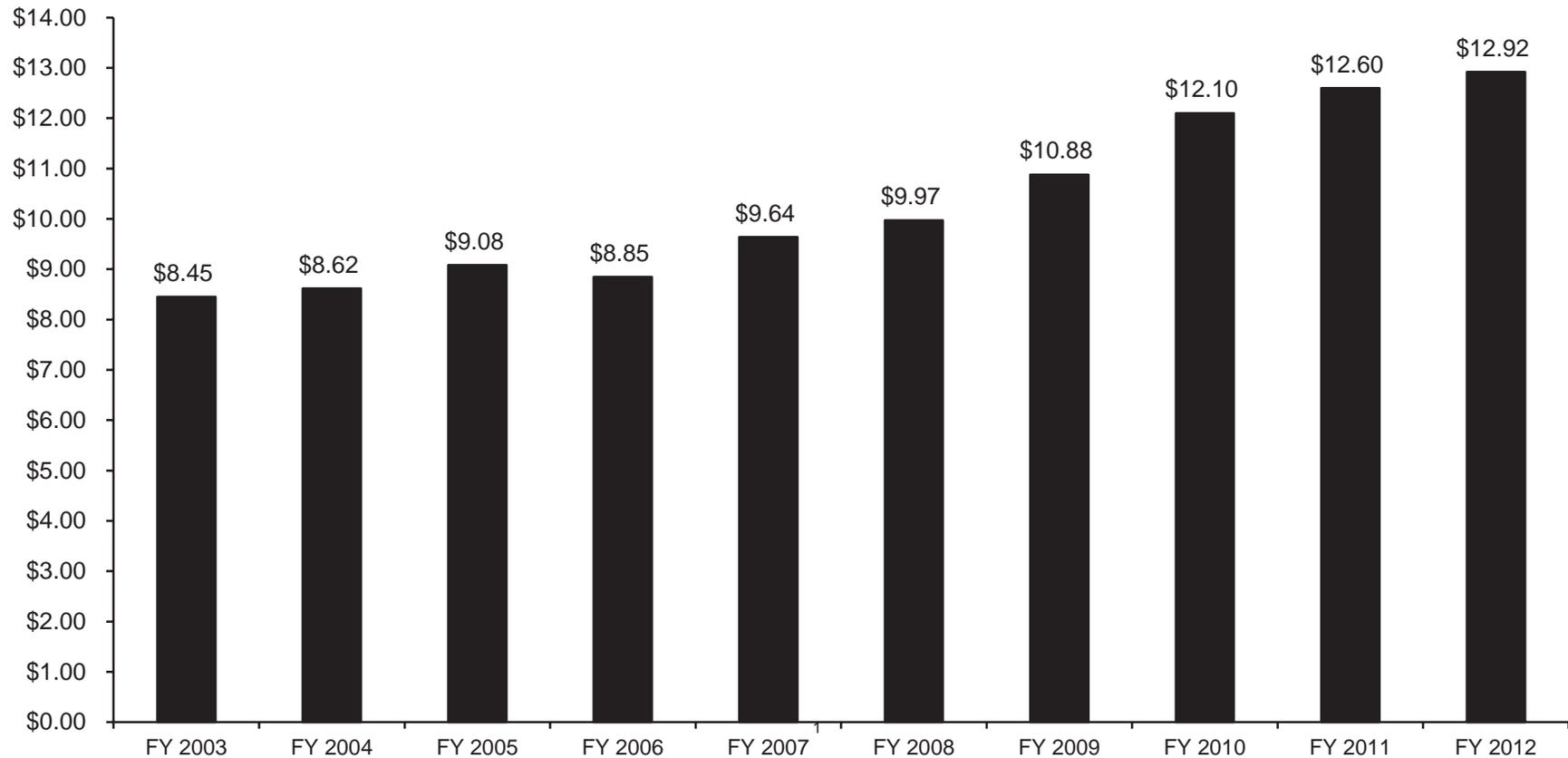
DEPARTMENT OF HUMAN SERVICES TOTAL MEDICAID RECIPIENTS FY 2003 - FY 2012¹



¹ Medicaid recipient totals increased year-over-year from FY 2003 through FY 2012. The monthly average in FY 2012 was the second highest ever at 1.93 million people. FY 2012's moderate decline reflected decreases in: 1) Family Medicaid; 2) Other Children Under Age 21; and 3) Pregnant Women & Children Under 19. SSI and Non-SSI Medicaid categories for Aged, Blind and Disabled recipients continued year-over-year increases. **SOURCE: DHS Trend Report of Key Program Statistics, September 2012.**

DEPARTMENT OF HUMAN SERVICES MEDICAID EXPENDITURES FY 2003 - FY 2012

Medicaid Expenditures
(\$ Billions)



Note: From FY 2003 through FY 2012, Medicaid (MA) expenditures (Medical Assistance plus MA Administration) increased 52.9 percent.

Source: Year-over-year Medicaid data are aggregate expenditure amounts compiled from CMS-64 Reports compiled by the Michigan Department of Community Health and the Michigan Department of Technology, Management and Budget.

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

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: Refugee Assistance Program

PROGRAM STATEMENT

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

LEGAL BASIS

- Federal Refugee Act of 1980, P.L. 104-193
- 8 USC Sec. 1522 (a) (9), (e), Note (Sec. 501)
- 45 CFR 400
- 45 CFR 401
- Executive Order No. 12341 (Jan. 21, 1982)
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

SOURCE OF FINANCING

- 100 percent federal funds

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

- 1,325 individuals placed in employment in FY 2012.
- Average wages increased to \$8.71 (FY 2012), from \$8.64 per hour (FY 2011).
- 35 percent of employment placements provided full health benefits (FY 2012).
- Health screenings completed (FY 2012): 3,464.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: Refugee Assistance Program

- In FY 2012, DHS administered special grants and projects to increase family self-sufficiency, assist school-age refugees through the School Impact Program, and increased employment opportunities through education for refugees who live in Ingham and Kent counties.
- The Refugee Assistance Program provided services to 325 youth per month in the Unaccompanied Refugee Minors Foster Care Program in FY 2012.
- Michigan has received more than 80,000 refugees since 1975. Since FY 2000, Michigan has resettled 23,548 new arrivals. Average new arrivals increased from 1,127 in FY 2006, to 1,284 in FY 2007, to 3,303 in FY 2008, and to 3,503 in FY 2009. The increase in new arrivals from FY 2006 through FY 2009 reflects ongoing internal problems in Iraq. Michigan ranked fifth among all states in the number of refugees resettled in FY 2010. In FY 2010, more than 3,060 refugees were resettled in Michigan. In FY 2011, the number of arrivals decreased to 2,588 due to increased security restrictions instituted by the Department of Homeland Security. The number of arrivals in FY 2012 was 3,603 and is expected to remain approximately the same in FY 2013.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: State Disability Assistance (SDA)	

PROGRAM STATEMENT

The State Disability Assistance (SDA) program provides financial assistance to Michigan's disabled, low-income adults to meet basic personal and shelter needs. SDA is a cash assistance program for disabled adults, caretakers of disabled individuals and persons age 65 or older. SDA recipients have little or no money to pay for living expenses such as rent, heat, utilities, clothing, food or personal care items, and SDA is intended to meet these basic needs. The monthly maximum benefit for new cases in FY 2012 is \$200 (\$315 for a married couple). Ongoing SDA cases receiving benefits prior to FY 2012 will continue to receive the previous payment standard of \$269 (\$423 for a married couple). In FY 2012 and FY 2013, SDA recipients with no other income were/are eligible to receive \$200 per month in food assistance. SDA cases can be composed of a single person or spouses who live together.

Eligibility Factors:

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

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

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

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: State Disability Assistance (SDA)	

SOURCES OF FINANCING

- State funds.
- SSI recoveries.

LEGAL BASIS

- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

The State Disability Assistance (SDA) program provides interim financial assistance to Michigan’s neediest disabled adults. Disability is a factor for all individuals found eligible for this program. Benefits are meant to help meet basic personal and shelter needs. As shown in the following graph, the average monthly SDA caseload dropped year-over-year from FY 2010 through FY 2012. In FY 2012 the average monthly caseload was 8,652, the lowest since FY 2002, when it was 7,989.

Over the FY 2009 – FY 2012 period, SSI Advocacy Program data indicate year-over-year increases in SSI approvals of former SDA recipients, with corresponding decreases in average monthly recoveries per recipient. Those data are summarized directly below.

- 1) For FY 2010, SSI Advocacy staff report recoveries of \$15.5 million for 5,060 former SDA clients who were found SSI eligible. The average recovery per SDA client was \$2,864.
- 2) For FY 2011, SSI Advocacy staff report recoveries of \$11.8 million for 5,338 former SDA clients who were found SSI eligible. The average recovery per SDA client was \$2,205.
- 3) For FY 2012, SSI Advocacy staff report recoveries of \$10.1 million for 5,444 former SDA clients who were found SSI eligible. The average recovery per SDA client was \$1,859.

Given that DHS recovers all SDA General Fund payment amounts when individuals are found eligible for Supplemental Security Income, the above summarized data indicate:

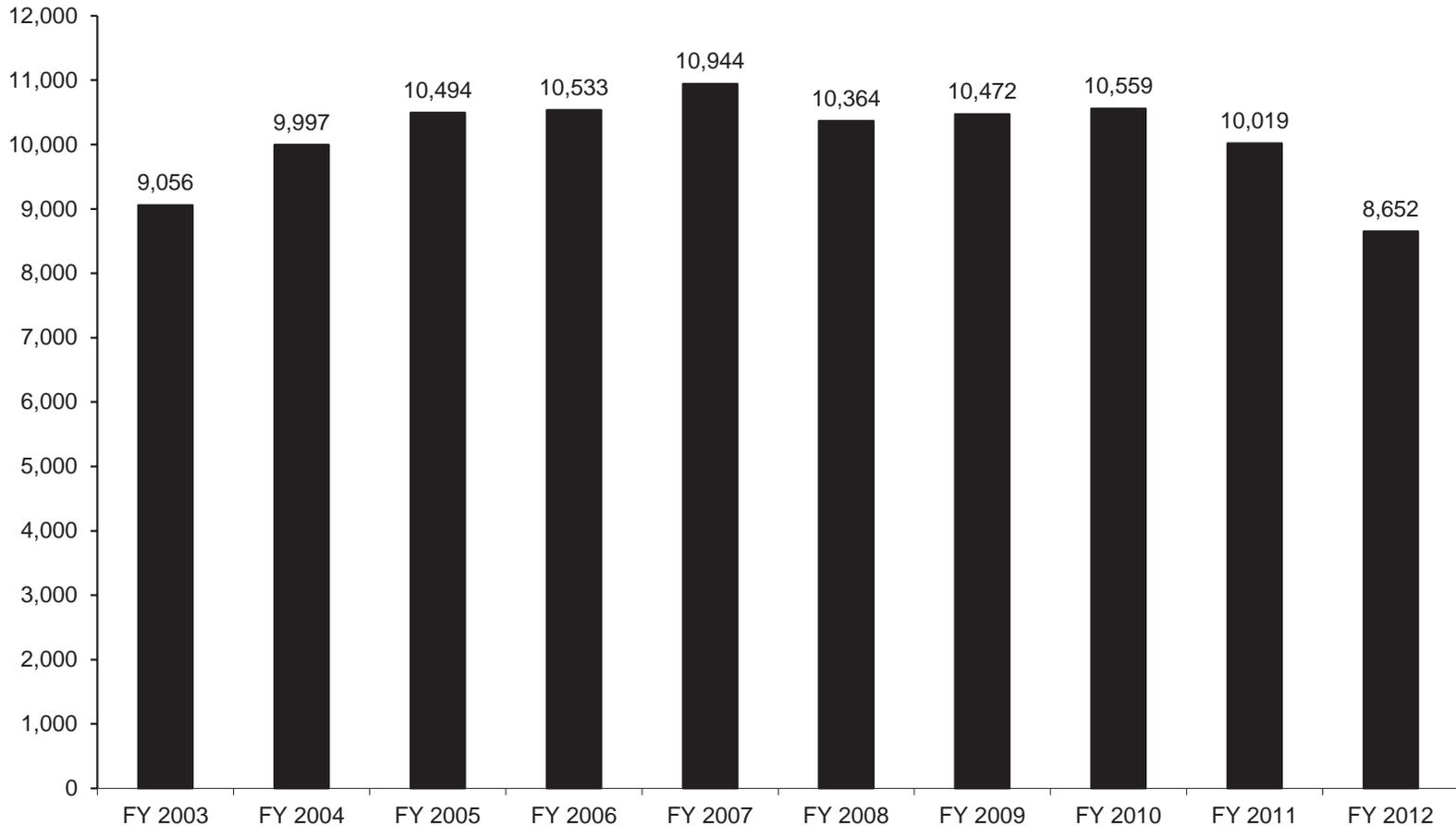
- 1) While on SDA, recipients received relatively less assistance prior to receipt of SSI, and
- 2) The average length of stay on SDA dropped over this period as evidenced by increased SSI approvals and corresponding decreases in average recoveries per recipient.

These assessments significantly explain program dynamics leading to decreases in average monthly caseloads over this period.

DEPARTMENT OF HUMAN SERVICES STATE DISABILITY ASSISTANCE (SDA)

Average Monthly Cases FY 2003 - FY 2012

Caseload

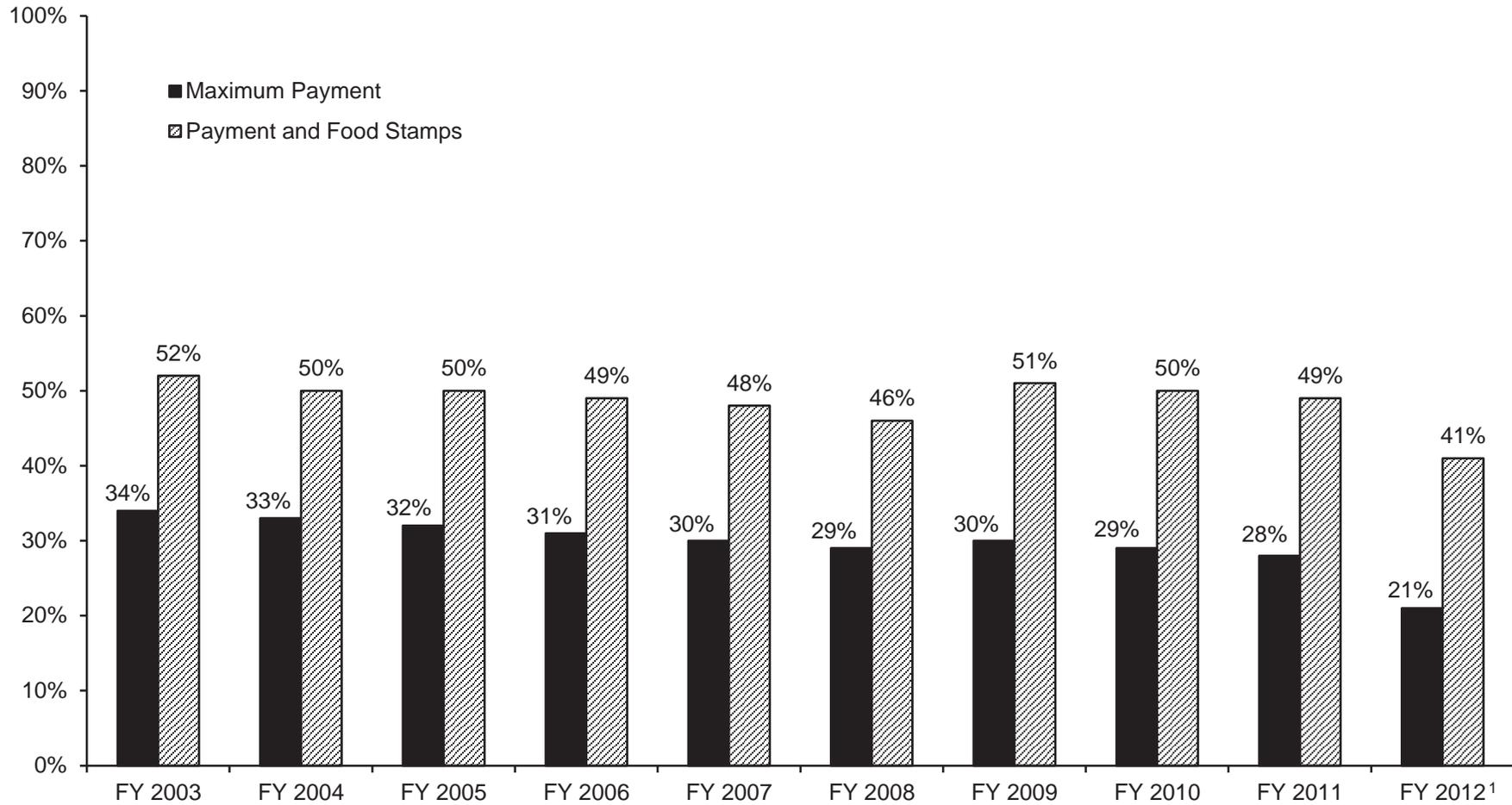


NOTE: The FY 2012 caseload average was 8,652, a dramatic drop of 1,367 cases (-13.6 percent) from the FY 2011 Average. As supported by SSI Advocacy Program data, recent average monthly decreases in year-over-year SDA caseloads strongly suggest that while on SDA, recipients received relatively less assistance (prior to receipt of SSI), and that the average length of stay on SDA dropped over this period as evidenced by increased SSI approvals, and corresponding decreases in average recoveries per recipient. These factors (as discussed in the narrative) help to explain average monthly caseload decreases from FY 2010 through FY 2012.

DEPARTMENT OF HUMAN SERVICES

SDA MAXIMUM PAYMENT AS A PERCENTAGE OF THE POVERTY LEVEL

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



¹ For new \$200 benefit cases in FY 2012, the SDA maximum payment was 21 percent of the poverty level. Adding the value of Food Assistance Program benefits to the SDA payment resulted in a benefit that was 41 percent of the poverty level.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department	Appropriation Unit	Program	
Human Services	Public Assistance	State Emergency Relief (SER) Program	

PROGRAM STATEMENT

The goal of the State Emergency Relief (SER) Program is to prevent serious harm to individuals and families by helping them obtain safe, decent and affordable shelter and other essentials when they face an emergency due to factors or conditions beyond their control. The DHS FY 2013 Appropriations Act includes \$25.9 million for this program. All persons (other than undocumented aliens and households with fugitive felons) are potentially eligible for SER, with no residency requirements. The SER applicant group must be physically present in Michigan at the time of application, must have an emergency that threatens their health or safety, and the emergency must be resolvable through issuance of SER. SER is not issued to resolve applicant-created emergencies. Covered services include:

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

SOURCES OF FINANCING

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

LEGAL BASIS

- Social Security Act
- Michigan Administrative Code: Rules 400.7001-400.7049
- The Social Welfare Act, 1939 PA 180
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department	Appropriation Unit	Program	
Human Services	Public Assistance	State Emergency Relief (SER) Program	

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

In FY 2012, an average 35,476 households (93,799 recipients) received SER assistance. This equates to a monthly average 7,816 recipients that received some type of emergency service. SER is a safety net program for low-income households. It provides limited funding to resolve immediate emergencies that other agencies and resources in Michigan may not be able to provide to support safe housing and prevent homelessness.¹

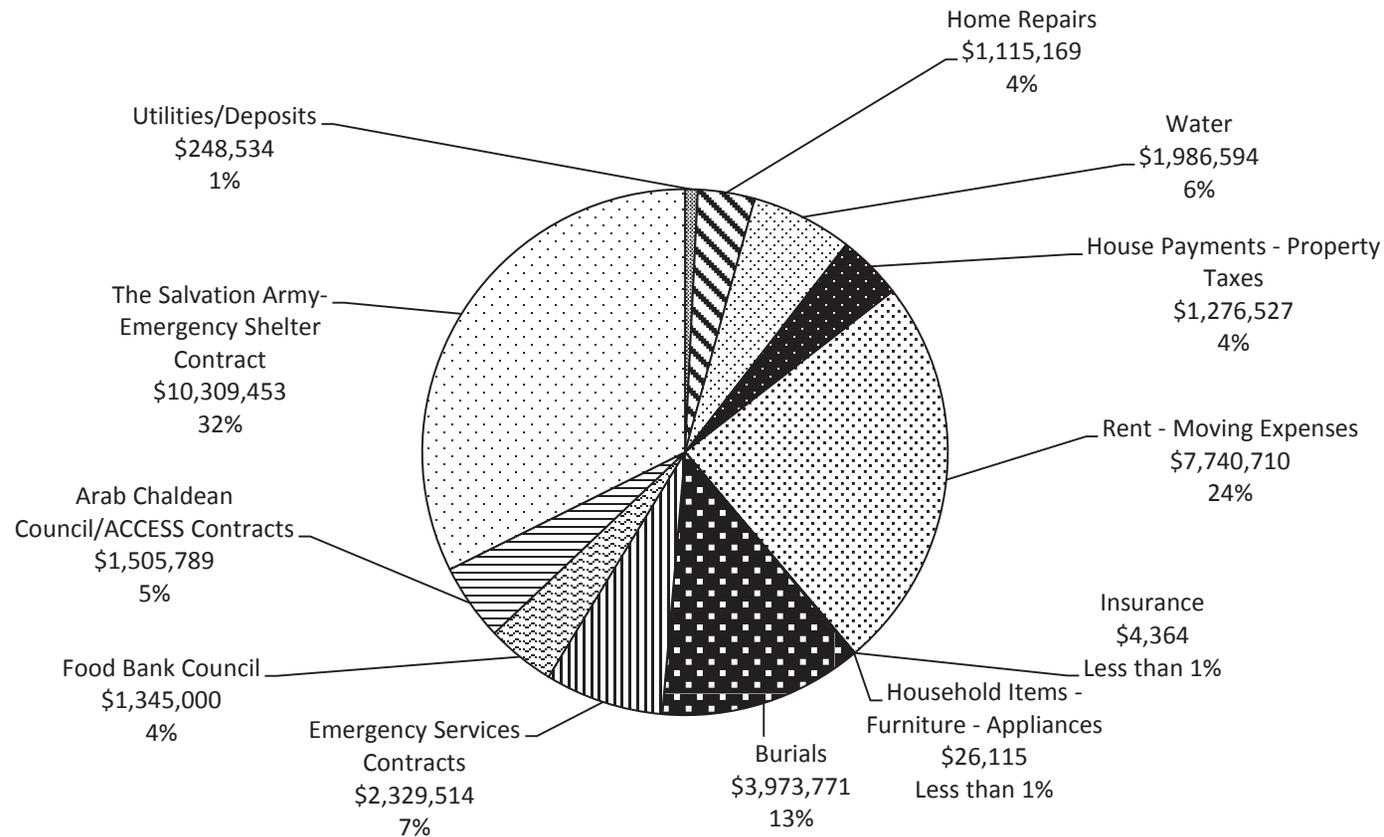
SER energy assistance is within the LIHEAP appropriation. As reflected in the graph (following page), nearly 50 percent of FY 2012 SER expenditures were used to provide emergency food and shelter via the Salvation Army and other services contracts, such as utilities/deposits, water, house payments/taxes, rent/mobile home rent, insurance, household items/food & other, home repairs and emergency services contracts.

¹ Data Source: EN-230 Report

DEPARTMENT OF HUMAN SERVICES

SER EXPENDITURES - NON-EMERGENCY ASSISTANCE¹

FY 2012 = \$31,861,541



Nearly 50 percent of FY 2012 SER expenditures were used to provide emergency food and shelter via the Salvation Army and other services contracts, i.e., Utilities/Deposits, Water, House Payments/Taxes, Rent/Mobile Home Rent, Insurance, Household Items/Food & Other, Home Repairs and Emergency Services Contracts.

¹ SER Energy Assistance is within the LIHEAP appropriation, and not expressed in the above graph. In FY 2012, over \$172 million was allocated in the LIHEAP Block Grant for energy and heat assistance. Data source: HHS Notice of Grant Award - FY 2012.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: Supplemental Security Income	

PROGRAM STATEMENT

Supplemental Security Income (SSI) is a federally administered income maintenance program for the aged, blind and disabled. Six categories of living arrangements are recognized: independent living, household of another, domiciliary care (supervisory), personal care, home for the aged and Medicaid facility, i.e., nursing home. Payment amounts vary by living arrangements. Federal payments are supplemented with state funds. The majority of these state funds are paid to persons in independent living arrangements. Additionally, Medicaid payments for personal care services are provided for persons who need these services in adult foster care categories.

The Social Security Administration (SSA) charges the state a fee, per transaction, for administering state funds. To minimize these fees the state administers the state funds paid to those persons in Independent Living and Household of Another living arrangements with the state SSI Payment program. This group constitutes approximately 93 percent of the total number of SSI recipients receiving state funds. The SSA administers state funds to mandatory SSI individuals in all living arrangements and those in domiciliary (supervisory) care, personal care, home for the aged, and medicaid facility living arrangements.

The passage and enactment of federal welfare reform legislation in 1996 changed SSI eligibility for children and legal immigrants. With 1996 legislative changes, essentially all cases receiving federal payments also became eligible to receive SSI state supplementation.

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

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

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

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

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Public Assistance	Program: Supplemental Security Income	

SOURCES OF FINANCING

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

LEGAL BASIS

- Social Security Act, Title XVI
- Social Welfare Act, 2008 PA 280
- DHS FY 2013 Appropriations Act, 2012 Public Act No. 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM IMPACTS

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

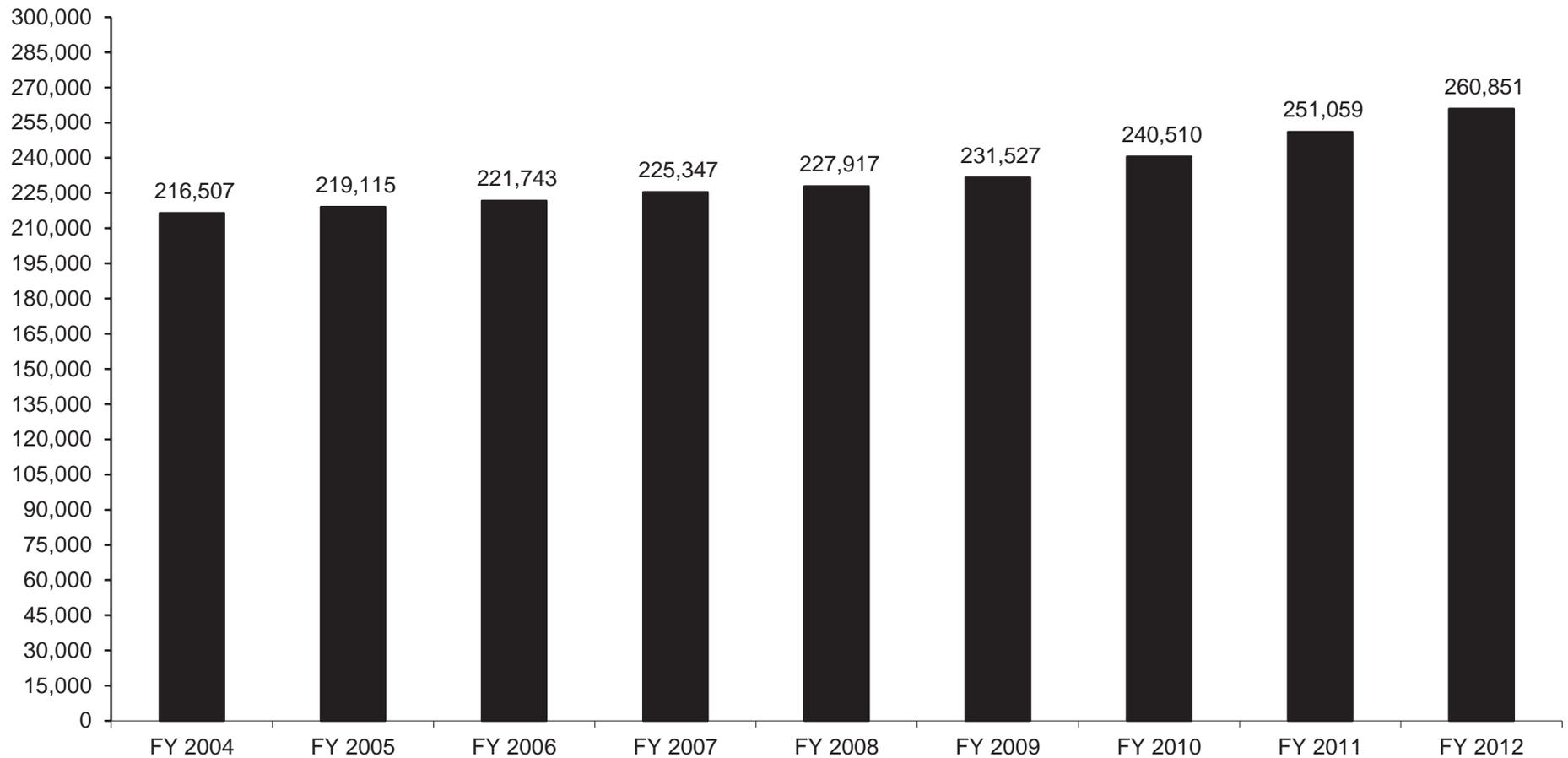
A 1990 U.S. Supreme Court decision, *Sullivan v. Zebley*, invalidated SSI child disability regulations and ordered they be replaced with new regulations. The court decision found SSA’s listing-only methodology for determining SSI child claims inconsistent with the statutory standard of “comparable severity” set forth in the Social Security Act. The court invalidated the previous SSA rulings, as they were not providing SSI child claimants with individualized functional assessment similar to the functional analysis used in adult claims. The court concluded that SSA could determine the effect of impairment on a child’s ability to perform age-appropriate activities in much the same way it determines the effect of impairments on an adult’s ability to work. This ruling dramatically altered the SSI program as it operated after the *Zebley* decision and increased the number of children deemed eligible for SSI. The portion of children under 21 receiving SSI in Michigan has remained at 20 percent for the last several years. The October 2012 rate was 19.96 percent. FIP and food assistance benefits to a family will increase if a child’s SSI benefits are terminated.

As displayed in the SSI caseload graph (following page), average monthly caseloads increased year-over-year from FY 2004 through FY 2012. Whereas the FY 2004 caseload average was 216,507, by FY 2012 it was 260,851, an increase of 44,344 or 21 percent.

DEPARTMENT OF HUMAN SERVICES SUPPLEMENTAL SECURITY INCOME

Number of Recipients
FY 2004 - FY 2012

Number of Recipients



Note: SSI average monthly caseloads increased year-over-year from FY 2004 through FY 2012. Whereas the average monthly caseload was 216,507 in FY 2004, by FY 2012 it was 44,344 higher at 260,851, an increase of 21 percent.

Department of Management and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Children's Services	Program Adoption Services Program

PROGRAM STATEMENT

The Adoption Services Program provides for adoption planning and placement of children who are permanent court wards due to termination of parental rights. Services are provided to recruit and support permanent placements of children in homes that are capable of meeting the long-term physical, emotional, educational, and behavioral needs of the child. Efforts are made to place children into adoptive homes as soon as possible following termination of parental rights. Services are provided by local DHS office adoption staff or adoption purchase of service contracts with 66 private Michigan child-placing agencies. Children receiving adoption services are in foster care and may have special needs, i.e., be older, a member of a sibling group, or may be physically, mentally or emotionally challenged. Adoption services include assessing the placement needs of the child; recruitment, orientation and training of potential adoptive families; completion of an adoptive family assessment (home study); certification of eligibility for adoption subsidy; adoptive placement and supervision; and the provision of post-adoption support services.

SOURCES OF FINANCING

- Federal Title IVE
- State Funds
- TANF (Temporary Assistance for Needy Families)

LEGAL BASIS

- Adoption Assistance and Child Welfare Act of 1980, PL 96-272
- Indian Child Welfare Act of 1978, PL 95-608
- Adoption and Safe Families Act of 1997, PL 105-89
- Multiethnic Placement Act of 1994, PL 103-382
- Interethnic Placement Act of 1996, PL 104-188
- Adam Walsh Child Protection and Safety Act, PL 109-248
- Child Care Organization Act, 1973 PA 116
- Michigan Children's Institute, 1935 PA 220
- Michigan Children's Institute, 2011 PA30 Amended PA220
- Social Welfare Act, 1939 PA 280
- Juvenile Code, Chapter XIIA, 1939 PA 288
- Adoption Code, 1974 PA 296
- Foster Care and Adoption Services Act, 1994 PA 203
- Foster Care and Adoption Services Act, 1997 PA 172 Amended PA 203
- Foster Care and Adoption Services Act, 1998 PA 495 Amended PA 203
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

Department of Management and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Children's Services	Program Adoption Services Program

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Michigan effectively utilizes a public/private partnership to achieve permanency through adoption for waiting children. Permanency planning decisions are child-focused and carefully consider the unique needs and circumstances of each child. Whenever possible, placements are made with families who have an existing relationship or attachment to the child. Additionally, efforts are made to provide an adoptive home where siblings may stay together. To increase program effectiveness and outcomes, timeliness benchmarks for procedural processes have been established in adoption policy. They are “process and timeliness” outcomes for the “placement of foster care children with relatives, with the goal of adoption.” In FY 2012, preliminary counts indicate 2,538 children were adopted from foster care.

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

Michigan Child and Family Services (CSFR) Data Profile (April 1, 2011 - March 31, 2012)¹

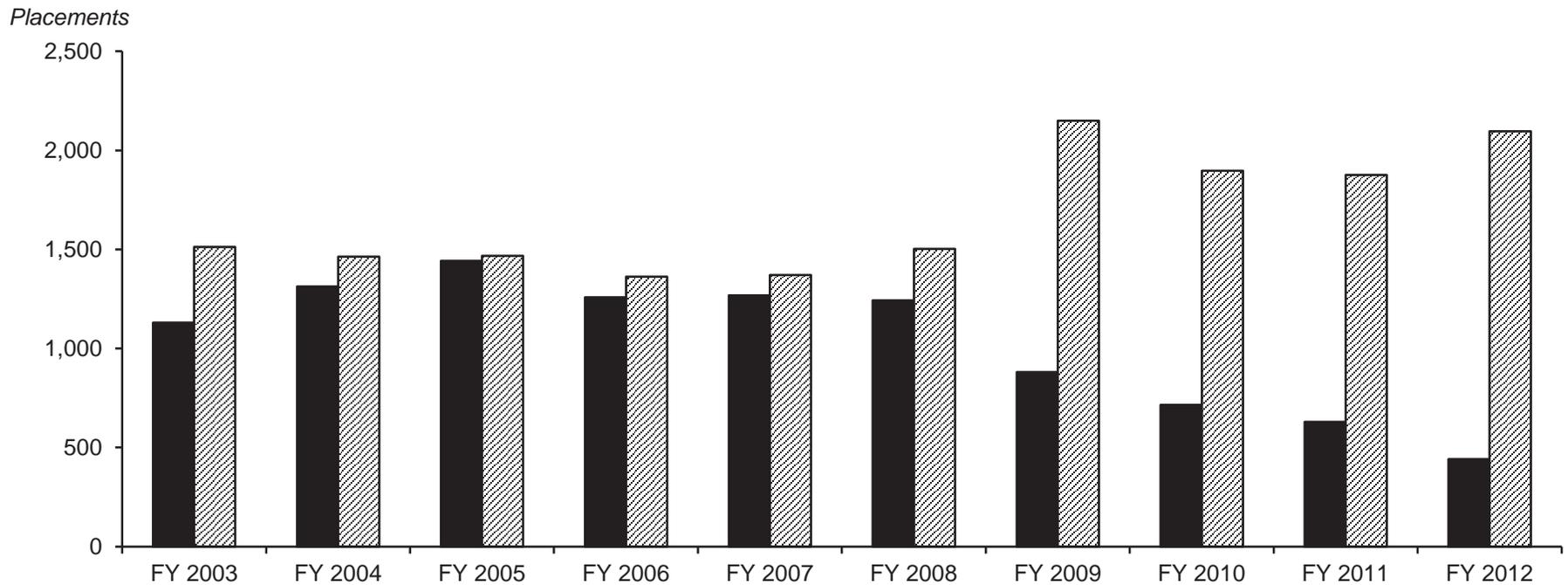
- Of all children discharged from foster care to finalized adoption, 36.2 percent were discharged in less than 24 months from the date of the latest removal from the home.
- Of all children discharged from foster care to a finalized adoption, the median length of stay in foster care was 28.7 months from the date of the most recent removal from the home.
- Of all children who became legally free for adoption in the prior 12-month period, 47.8 percent were discharged from foster care to a finalized adoption in less than 12 months (of becoming legally free).

¹ CSFR permanency data for the 12-month period ending March 31, 2012 are based on annual files created July 13, 2012. CSFR data were published August 24, 2012.

DEPARTMENT OF HUMAN SERVICES

FINALIZED ADOPTIONS - NUMBER OF ANNUAL PLACEMENTS

Fiscal Year 2003 - Fiscal Year 2012



■ DHS	1,130	1,313	1,442	1,259	1,268	1,243	881	715	630	442 ¹
▨ Private Agency	1,513	1,463	1,468	1,362	1,370	1,502	2,149	1,897	1,876	2,096 ¹
Total	2,643	2,776	2,910	2,621	2,638	2,745	3,030	2,612	2,506	2,538 ¹

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

Source: Product of Children's Services Data Management Unit

¹ FY 2012 adoption totals are preliminary figures.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Adoption Subsidy

PROGRAM STATEMENT

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

Beginning in FY 2012, Michigan began extending subsidy benefit programming for eligible children under the Young Adult Voluntary Foster Care (YAVFC) Program, providing benefits for eligible children to age 21.

Adoption subsidies are a supportive way for the child welfare system to encourage adoptions and to provide post-adoption support to families. Adoptive parents must be informed about the adoption subsidy program when they express an interest in adopting. When a family requests subsidy assistance, the adoption workers must request an adoption subsidy and have it approved prior to finalization of the adoption.

SOURCES OF FINANCING

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

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

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Adoption Subsidy

LEGAL BASIS

- Adoption Assistance and Child Welfare Act of 1980, Federal PL 96-272
- Social Welfare Act, 1939 PA 280
- The Adoption and Safe Families Act of 1997
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

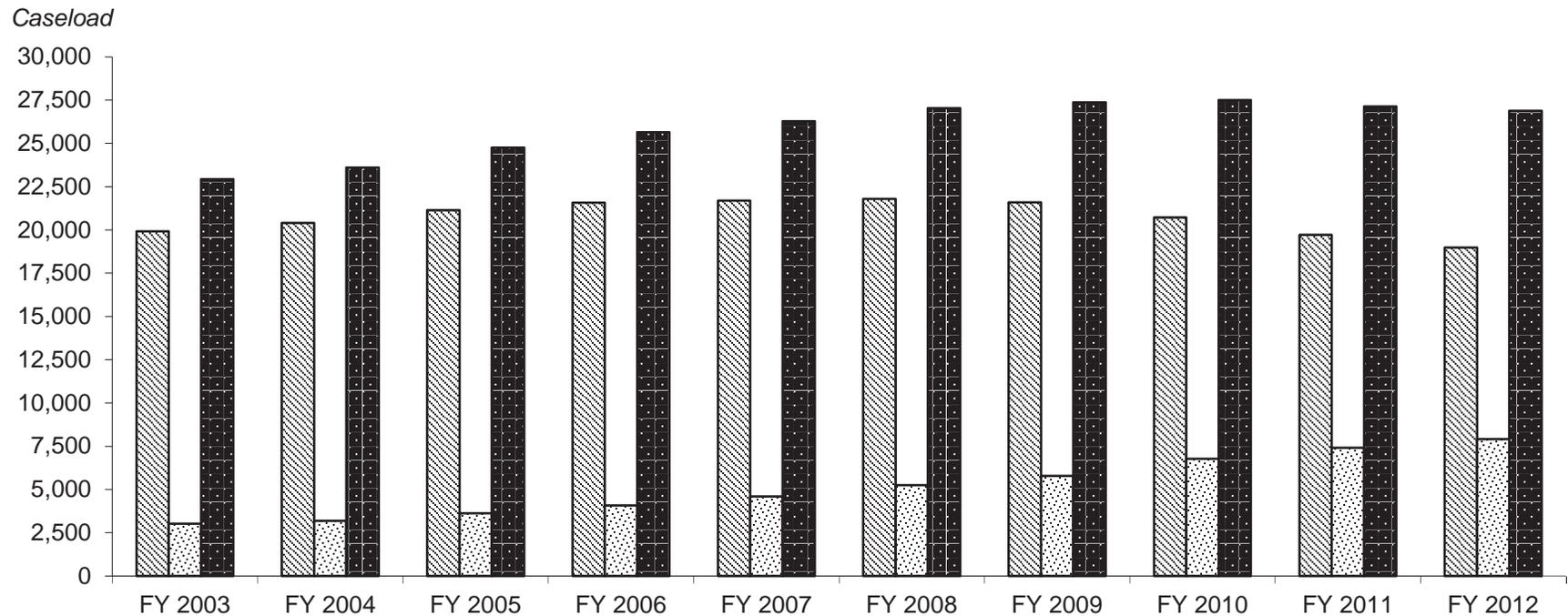
Federal law requires efforts be made to place a child in an adoptive home without a subsidy unless this is the only placement that can be made in the child’s best interest. The adoptive parents must be informed about the program and must specifically request an adoption subsidy prior to the finalization of child’s adoption. Adoption assistance is available only for those children certified as children with special needs as detailed in 1938 PA 280, sec. 400.115g.

As summarized in the following chart, from FY 2003 to FY 2012 average monthly caseloads increased 17.2 percent. The second graph compares expenditures from FY 2003 to FY 2012.

DEPARTMENT OF HUMAN SERVICES

ADOPTION SUBSIDY ANNUAL AVERAGE CASELOADS

FY 2003 - FY 2012



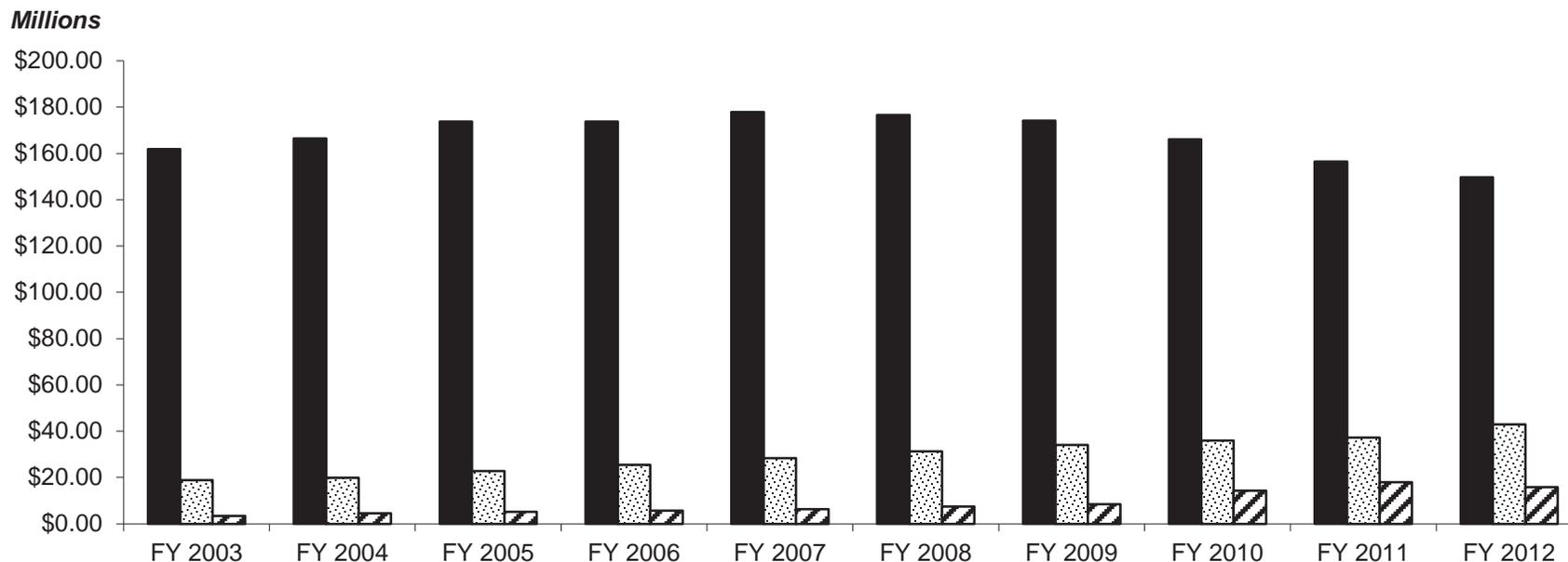
	FY 2003	FY 2004	FY 2005	FY 2006	FY 2007	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012
Funded by Title IV-E	19,909	20,400	21,139	21,579	21,688	21,790	21,588	20,726	19,721	18,978
Funded by TANF / State / YAVFC	3,028	3,195	3,619	4,069	4,591	5,248	5,781	6,774	7,406	7,909
Total	22,937	23,595	24,758	25,648	26,279	27,038	27,369	27,500	27,127	26,887

Note: Adoption subsidy caseloads increased 17.2 percent from FY 2003 to FY 2012. Title IV-E, TANF/State cases refer to eligibility categories of children covered by the Adoption Support Subsidy program. Beginning in FY 2012, Michigan extended benefit programming for eligible children under the Young Adult Voluntary Foster Care (YAVFC) program, providing benefits for eligible children to age 21. The average monthly YAVFC caseload in FY 2012 was 10 cases. By September 2012, 31 YAVFC cases were receiving extended benefits. In FY 2012, TANF cases averaged 5,780 and state-funded cases averaged 2,129.

DEPARTMENT OF HUMAN SERVICES

ADOPTION SUBSIDY EXPENSES: FY 2003 - FY 2012

Total Annual IVE, TANF, and State-Funded Caseload Payments (Excluding YAVFC)



■ Title IV-E	\$161.87	\$166.48	\$173.84	\$173.84	\$177.84	\$176.57	\$174.14	\$166.13	\$156.56	\$149.70
▨ TANF	\$18.95	\$19.89	\$22.87	\$25.47	\$28.49	\$31.38	\$34.07	\$36.04	\$37.32	\$43.05
▩ State Funds	\$3.51	\$4.59	\$5.22	\$5.73	\$6.38	\$7.56	\$8.57	\$14.39	\$18.07	\$15.94
Total	\$184.33	\$190.96	\$201.93	\$205.04	\$212.71	\$215.51	\$216.78	\$216.56	\$211.95	\$208.69

Note: Total statewide Adoption Subsidy payments (excluding non-recurring and medical expenses) increased 13 percent from FY 2003 to FY 2012. Title IV-E, TANF and State Funds refer to eligibility categories of children covered by the Adoption Support Subsidy program. Not included for FY 2012 are State Funded expenses for several YAVFC cases. Those caseload costs are still being vetted.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Children's Foster Care	

PROGRAM STATEMENT

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

The foster care program is based on the following principles:

- Whenever possible, the department shall preserve the child's family. A child should be separated from his/her family only when the family is absent or is unwilling or unable, even with assistance, to provide a safe home for the child.
- If the child cannot be protected from abuse or neglect in his/her home and removal is necessary, the primary focus of services is directed toward alleviating the conditions that brought the child in care so he/she may be returned home.
- The purpose of foster care is to provide continuity, consistency, and permanence in a family setting for the growing child. If a return home is not possible, alternative permanent plans must be pursued. Foster care policy provides caseworkers with a framework for child-focused, family-centered interventions to help achieve timely permanency planning decisions. Independent living services and supportive connections must be provided to older youth to ensure a successful transition to adulthood once they exit the foster care system.
- To improve outcomes for children and families in the foster care system, numerous child-focused, family-centered strategies are used: state and local recruitment and retention of foster homes targeting specialized groups of children; relative home licensing; concurrent permanency planning; permanency planning conferences (in early 2013 to be called: family team meetings) with the involvement of parents, children, and foster parents; and public/private partnerships. These strategies are achieved through self-evaluation, quality assurance and data-driven decisions.

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

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

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Children's Foster Care	

SOURCES OF FINANCING

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

LEGAL BASIS

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

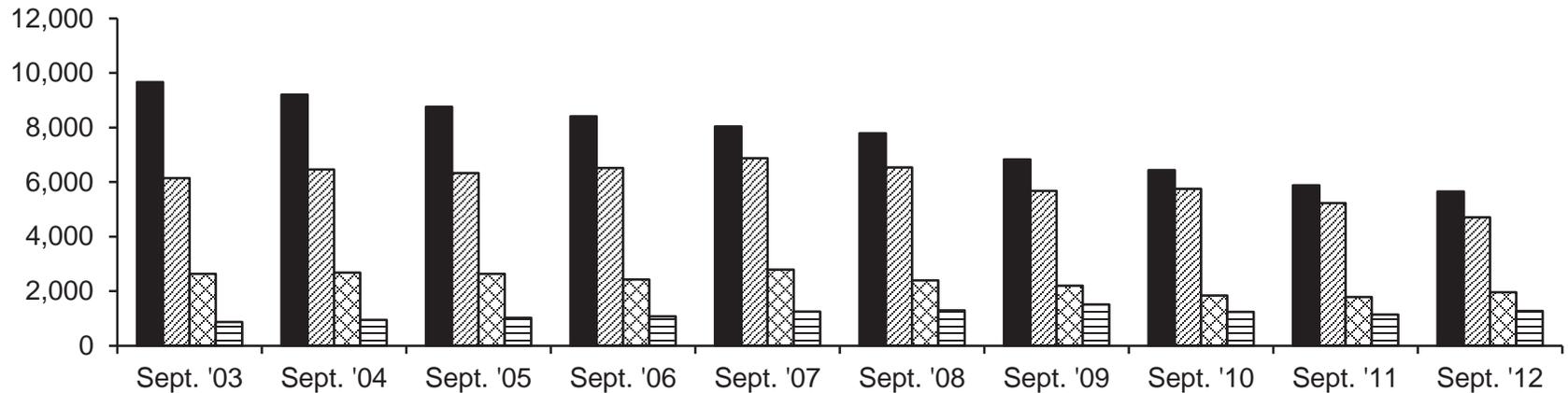
Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Children's Foster Care	

- Foster Care Review Hearings, Permanency Planning Hearings, 2004 PA 476
- Foster Care Criminal Background Checks, 2008 PA 218
- Permanency Planning Hearings, Termination of Rights, 2008 PA 200
- Notification of Foster Change in Placement to Court and Guardian Ad Litem, 2008 PA 201
- Concurrent Permanency Planning, 2008 PA 202
- Appointment of Guardian after Termination, 2008 PA 203
- Foster Care Independence Program, 2008 PA 215
- Fostering Connections to Success Act of 2008
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

- The number of Foster Care Program cases has been declining in recent years from a peak of 19,317 in 2003 to 13,582 as of September 30, 2012.
- Among current living arrangements, 35 percent of children in care are placed with relatives. Michigan's public/private partnership is working together to license relative caregivers, making them eligible for the same training and support as unrelated foster homes. In FY 2012, 646 relative-only licenses were issued.
- Of all children discharged from foster care to reunification who had been in foster care for eight days or longer, the median length of stay (in months) continues to decrease. As of March 31, 2012, the median length of stay was 11.0 months compared to 11.6 months for FY 2009. Of all children who were discharged from foster care, and who were legally free for adoption at the time of discharge, the percent discharged to a permanent home prior to their 18th birthday continues to increase. (A permanent home is defined as having a discharge reason of adoption, guardianship, or reunification, including living with relative). As of March 31, 2012, 97.3 percent of children were discharged to a permanent home prior to their 18th birthday, compared to 96.7 percent for FY 2009.
- The number of children placed in residential care facilities continues to decrease. As of September 30, 2012, 791 children were in residential care, compared to approximately 1,200 in October 2008.

DEPARTMENT OF HUMAN SERVICES FOSTER CARE PLACEMENTS¹ September 2003 - September 2012



■ Out-of-Home Placements ²	9,670	9,203	8,757	8,407	8,037	7,787	6,830	6,441	5,882	5,649
▨ Relative Placements ³	6,144	6,458	6,335	6,511	6,878	6,539	5,674	5,750	5,231	4,704
▩ Own Home/ Legal Guardian ⁴	2,633	2,676	2,635	2,421	2,781	2,399	2,193	1,836	1,787	1,956
▬ Other ⁵	870	944	1,018	1,075	1,247	1,291	1,507	1,234	1,143	1,273
Total	19,317	19,281	18,745	18,414	18,943	18,016	16,204	15,261	14,043	13,582

Source: *Product of Children's Services Data Management Unit*

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

² Out-of-Home Placements include: Adoptive Homes, Licensed Unrelated Foster Homes, Unrelated Caregiver, Emergency Shelter Home/Facility, Community Justice Center, Detention, Jail, Private Child Care Institution, DHS Training School, Mental Health Facility, Court Treatment Facility, Out-of-State - Foster Home, Out-of-State - Child Placement Agency, Out-of-State - Child Institution.

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

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

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

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Child Welfare Services	Programs Youth In Transition (YIT) / Education & Training Voucher Program (ETV)	

YOUTH SERVICES OVERVIEW

DHS administers several programs in Michigan to support older youth in foster care and youth that have exited foster care. The array of services in these programs is intended to support youth from the foster care system and increase their opportunities by focusing on their physical, social, economic, psychological and educational needs. DHS engages in collaborative relationships with partners such as Casey Family Programs and the Jim Casey Youth Opportunities Initiative as well as Michigan's post-secondary institutions to develop and sustain programming that meet the needs of youth that have or will transition from foster care to independent adulthood. Below are two such program descriptions: 1) Youth In Transition (YIT), and 2), Education and Training Voucher Program (ETV). In each case they are primary programs administered by the Michigan Department of Human Services.

PROGRAM STATEMENT – YOUTH IN TRANSITION (YIT)

The Youth in Transition (YIT) program was initially authorized by P.L. 99-272, through the addition of section 477 to title IV-E of the Social Security Act. The federal designation for this program is the Independent Living program. Youth in Transition offers assistance to help current and former foster care youth between the ages of 14 and 21 achieve self-sufficiency. Included in the population served are juvenile justice, tribal youth and undocumented immigrant youth cases.

Youth actively participate in designing the program activities and accept responsibility for the successful completion of an individualized plan based on an assessment of the youth's needs and abilities. Youth in Transition funds may be used to provide services that are not available from other funding sources or agencies for an eligible youth to prepare for functional independence. These services include educational support, job training, independent living skills training and coaches, employment assistance and training, mentoring, and family connections, housing, transportation, money management, parenting and counseling.

SOURCES OF FINANCING

- John H. Chafee Foster Care Independence Program, 80 percent
- State funds, 20 percent

LEGAL BASIS

- John H. Chafee Foster Care Independence Act of 1999
- Social Security Act, Sec. 477
- FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

The program goal is to assist youth in making the transition from foster care to independence, defined as the ability to take care of oneself physically, socially, economically and psychologically. In FY 2011, counties spent \$837,830 on independent living services for youth.

Monitoring of information, required as part of the application for and use of Youth in Transition funds, occurs through data collection from local DHS offices. In FY 2011, the DHS began two data collections. First, the state collects information on each youth who receives any independent living

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Child Welfare Services	Program Youth In Transition (YIT)	

services or support paid for or provided by the DHS. Second, the state collects outcome information on youth through the National Youth in Transition Database (NYTD). The survey is completed by foster youth at age 17 and again at ages 19 and 21. The data are then collected by the federal government.

The FY 2011 service data showed that of 2,117 youth served, 60 percent received 5 or more services, 19 percent received 3 or 4 services, and 22 percent received 1 or 2 services. The educational level for the majority of youth receiving services was 8th grade through 12th grade. These results are consistent with the six month data collected so far for FY 2012. Over one-half of youth are receiving 5 or more services and are primarily in grades 8-12.

Outcome data from the 2011 baseline survey also showed: 58 percent of youth reported receiving services, 30 percent reported experiences in at least one employment-related category, 91 percent reported being enrolled and attending school, 18 percent reported having been homeless at some point in their lives, and 95 percent reported having a positive connection to an adult.

In efforts to provide further support and services to youth in college, seven Independent Living (IL) coaches' contracts were awarded to Michigan post-secondary schools in 2012. The IL coaches will provide on-site service support including assessment of needs and applicable service provision. It is anticipated that with the addition of IL coaches on college campuses, the number of youth receiving services post 12th grade will increase.

In June 2011, an Interagency Agreement was signed between DHS and the Workforce Development Agency to implement the Foster Care Summer Youth Employment Program (SYEP) in six Michigan Works! Agencies throughout the state. In FY12 the Summer Youth Employment Program was expanded to allow for a seventh site. Over 325 youth were served between June and August 2012.

PROGRAM STATEMENT – EDUCATION AND TRAINING VOUCHER PROGRAM (ETV)

The Education and Training Voucher (ETV) program provides funding specifically to help meet the post-secondary education and training needs of youth aging out of foster care. Eligible youth can receive up to \$5,000 per year to assist with post-secondary education. Funding can go toward tuition, books, school supplies, housing, transportation, day care, medical needs, daily living expenses, and any other item/service that assists youth with attending and completing their post-secondary program.

In order to be eligible, youth must have been in a DHS-supervised foster care placement after their 14th birthday. If youth were adopted or placed in a relative guardianship, this would have to be after their 16th birthday. Youth must receive their first ETV grant prior to their 21st birthday. Once awarded, youth remain eligible until their 23rd birthday, provided that the youth remains in an approved post-secondary program, possess a cumulative grade point average of 2.0 and are providing all the appropriate documentation to the ETV office.

SOURCES OF FINANCING

- John H. Chafee Foster Care Independence Program, 80 percent
- State Funds, 20 percent

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Child Welfare Services	Programs Youth In Transition (YIT) / Education & Training Voucher Program (ETV)	

LEGAL BASIS

- John H Chafee Foster Care Independence Act of 1999, Federal PL 106-169
- Fostering Connections to Success and Increasing Adoptions Act of 2008, Federal PL 110-351
- Promoting Safe and Stable Families Amendments of 2001, Federal PL 107-133

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

The goal of the ETV program is to increase the number of youth leaving the foster care system and subsequently attending and completing post-secondary education or training programs. Each year, the ETV program sees a moderate increase in the number of youth re-applying for funding.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Child Welfare Services	Program Michigan Youth Opportunities Initiative (MYOI)

PROGRAM STATEMENT

The Michigan Youth Opportunities Initiative is a partnership between the DHS and the Jim Casey Youth Opportunities Initiative. The program was created to improve outcomes for youth transitioning from foster care to adulthood. It brings together community members, public and private agencies, and resources that are critical to enhancing the success of young adults who are transitioning or have transitioned from foster care. This initiative recognizes that young people have a better chance of succeeding if they have strong support from their communities and systems partners, public and private. All stakeholders are best-informed of the needs of young people by the youth themselves. MYOI serves eligible youth, ages 14-20, who are currently in foster care as well as those who have left foster care.

The goal of the MYOI program is to ensure that youth in foster care have successful outcomes in housing, education, employment, community engagement and health. There are 40 MYOI sites located in counties throughout Michigan. Each site provides:

- Youth Boards that serve as the leadership and advocacy arm of MYOI. Youth are trained in leadership, media and communication skills, including how to strategically share their story and present on panels.
- Community Partner Boards which consist of a group of businesses, public and private agencies and community representatives that have an interest in assisting youth who are transitioning out of foster care. Community Partner Board members provide support, discounts to services and advocacy for older youth in care.
- Training opportunities to youth relevant in asset purchases, life skills and preparation for adulthood, including housing, employment, education, health, and community engagement.
- Matches for youth. Each youth has an Individual Development Account (IDA). Youth are required to save money in their IDA each month. MYOI matches the IDA funds dollar to dollar up to \$1,000 per year for a youth to purchase an asset.
- Stipends that youth can earn for participation in events and meetings. The stipends assist youth in saving money to contribute to their IDAs. Earning stipends is a tangible way to recognize the time and effort the youth contributes to the program.

SOURCES OF FINANCING

- John H. Chafee Foster Care Independence Program with an additional 20 percent state match
- Jim Casey Grant Funds

LEGAL BASIS

- John H Chafee Foster Care Independence Act of 1999, Federal PL 106-169
- FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

As of September 30, 2012, the MYOI Program achieved enrollment of 1,404 foster youth. The foster youth completed financial literacy training through a banking institution or community partner at the local sites. The MYOI participants were able to save over \$500,000 for major asset purchases in order to assist them in achieving more positive outcomes in the areas of community engagement, employment, housing, education, physical and mental health, and permanency. The chart below shows the total dollars saved for asset purchases.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Child Welfare Services	Program Michigan Youth Opportunities Initiative (MYOI)

Statewide, youth have been trained as peer advocates and participated in media training, PRIDE training, the Child Welfare Training Institute for new workers, MYOI orientation and training for new expansion sites, State Court Administrative Office training, Foster Care Review Board, HeART focus group, Ferris State University Independent Living Conference, Growing Pains-Independent Living Conference in Atlanta, Georgia, national youth leadership programs such as Foster Club, All Starts and the Jim Casey Youth Opportunities-Youth Leadership Institute.

Total Savings for Major Asset Purchases for MYOI Participants
(As of September 2012)

Asset Category	Total Dollars Saved for Asset Purchases
Education & training costs	\$95,353.84
Housing down payment/rent deposit	\$116,206.26
Investments (stocks, 401(k), IRAs)	\$20,661.58
Medical & dental insurance & costs	\$15,534.66
Microenterprise	\$7,070.66
Vehicle	\$245,866.38
TOTAL SAVINGS	\$500,693.38

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Child Welfare Services	Program Children's Protective Services (CPS)

PROGRAM STATEMENT

Children's Protective Services (CPS) investigates allegations that a child under the age of 18 is being abused or neglected by a caretaker (a person defined in the law as responsible for the child's health or welfare). CPS also assesses the safety of all children in the household and, if necessary, initiates actions needed to protect them. If there is a preponderance of evidence that abuse or neglect occurred, CPS assists the family in resolving issues that place the children at risk. If a child is unsafe or has been severely abused or neglected per the Child Protection Law, Act No. 238 Public Acts of 1975, CPS must file a petition for court jurisdiction over the victim and family with the Family Division of Circuit Court. Since July 1, 1999, CPS has assigned a disposition category to each completed investigation. There are five disposition categories which are determined by a combination of evidence and risk to the child. For categories I through IV, the result of the safety assessment is either: safe, safe with services or unsafe. If the result of the assessment is unsafe, CPS must file a court petition to remove the victim or perpetrator from the home.

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

Legal Issues:

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

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Child Welfare Services	Program Children's Protective Services (CPS)	

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

SOURCES OF FINANCING

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

LEGAL BASIS

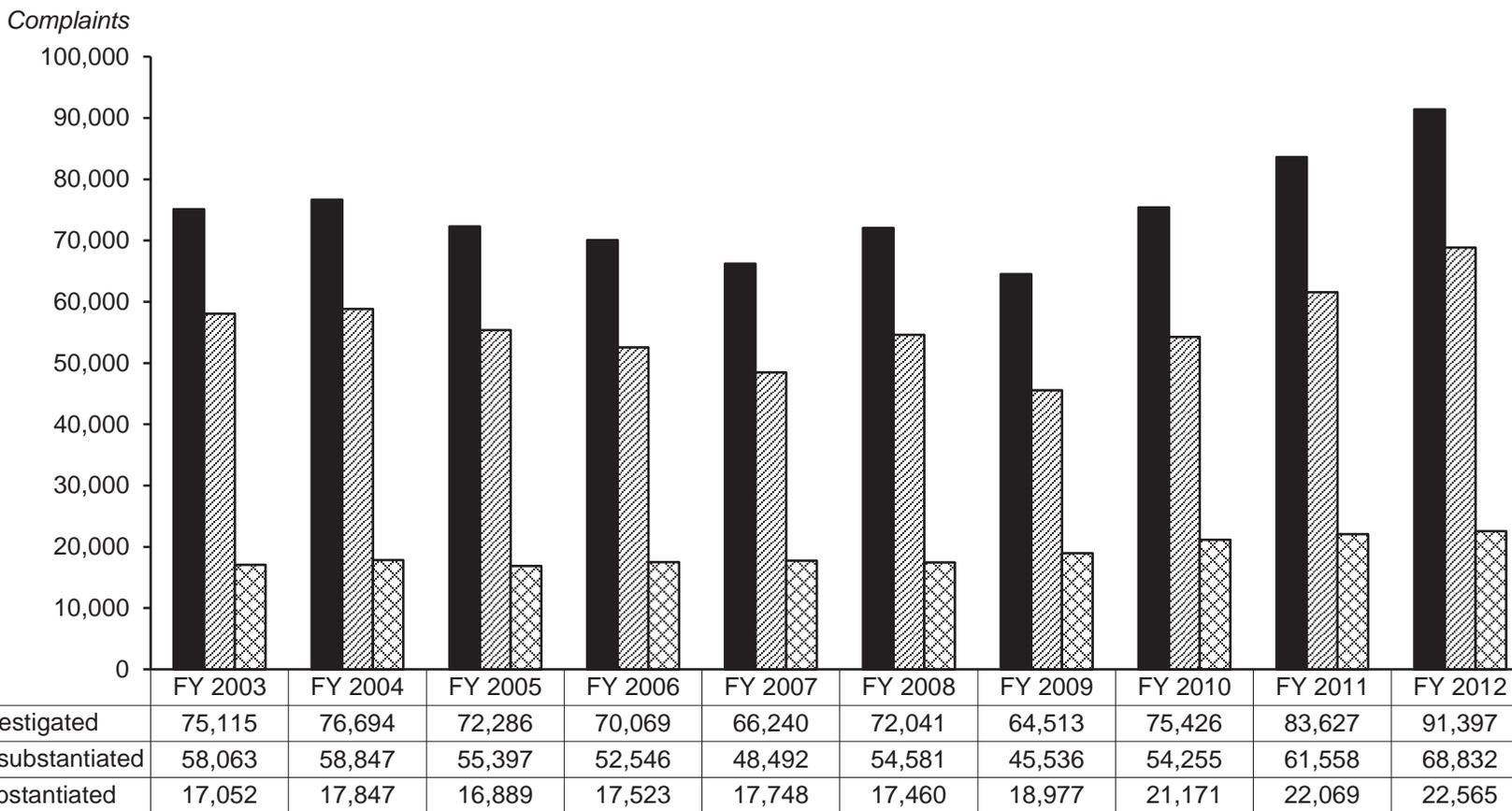
- Adoption Assistance and Child Welfare Act, Federal PL 96-272
- Social Security Act of 1935
- Child Abuse and Prevention Treatment Act, Federal PL 104-235
- Child Protection Law, 238 PA 1975
- Social Welfare Act, 1939 PA 280
- Probate Code, PA 288
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Child Welfare Services	Program Children's Protective Services (CPS)

PROGRAM EFFECTIVENESS/PROGRAM OUTCOMES

- Between 2009 and 2012 the number of complaints assigned increased by 27 percent (19,379). The number of complaints unsubstantiated during this time period increased by 51 percent (23,296) and the number of substantiated abuse/neglect rose by 19 percent (3,588).
- In March 2012, Michigan expanded its pilot centralized intake program statewide. The centralized intake system allows for greater statewide consistency for all CPS intake complaints.
- Beginning in October 2009, CPS created Maltreatment in Care investigative units. The intent of the change was to develop and maintain units responsible for the investigation of child abuse and neglect allegations in foster homes and child-caring institutions. In December 2010, these units were established statewide and provide the most comprehensive investigations for children who are under the care and supervision of our department.
- CPS policies and procedures are evaluated on a consistent basis in an effort to improve the quality of investigations. Many efforts in Family Preservation programming and child safety are unique to Michigan and are recognized throughout the country as innovative approaches to address child safety and risk.
- Michigan is the only state in the country to have a statewide Birth Match notification system. Birth matches provide alerts to CPS Intake when a child is born to parents who have previously had their parental rights terminated in Michigan or have been responsible for serious injury or death to a child.

DEPARTMENT OF HUMAN SERVICES CHILDREN'S PROTECTIVE SERVICES - COMPLAINTS INVESTIGATED FY 2003 - FY 2012



Source: Product of Children's Services Data Management Unit

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Children's Trust Fund	

PROGRAM STATEMENT

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

SOURCES OF FINANCING

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

LEGAL BASIS

- Children's Trust Fund Act, 1982 PA 249
- Income Tax Act, 281 PA 1967, MCL 206.440, MCL 206.475
- Child Abuse and Neglect Prevention Act, 1982 PA 250
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

CTF is committed to supporting the statewide prevention network while increasing the effectiveness of funded programs. This includes working with grantees to identify their needs and to strengthen their program capacity through stronger evaluation, outcomes-based practices and parent leadership. In particular, CTF is working to increase the level of evidence-based and evidence-informed programs and practices it funds. For example, CTF employs the federal Office of Management and Budget (OMB) Program Assessment Rating Tool (PART) to identify the evidence level of all direct service programs, ranging from "emerging" to "well-supported." To qualify for funding, a program must minimally meet the "emerging" PART level, using criteria developed by the federal government. Starting in FY 2010, all new direct service grants were required to use the Protective Factors Survey (PFS). PFS data will be aggregated and analyzed to determine participant outcomes. In addition, a Best Practices Work Group composed of CTF staff and local councils is exploring best practices and research-based options for local councils. Many of these councils are volunteer-run and operate on minimal budgets.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Children's Trust Fund	

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

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

DIRECT SERVICES GRANTS

Overview: PA250 of 1982 Article 722.609, Sec 9. (1) authorizes for disbursement of available trust fund money from the trust fund, upon legislative appropriations, for the exclusive purpose in order of preference for expenditure: (a) To fund private nonprofit or public organizations in the development or operation of prevention programs; (b) To fund local councils, and; (c) To fund the State CTF Board.

Poverty factors that adversely impact family stability need evidence-based effective prevention services to prevent child maltreatment and family instability. The Children's Trust Fund prevention dollars partner with Michigan's community partners resources (cash and in-kind match) to provide shared leadership in delivering prevention services. These prevention services help to strengthen Michigan's families with children aged birth to age 18 years that are experiencing economic stress that puts them at risk of abuse and neglect.

Community-Based Child Abuse Prevention (CBCAP) Funding Priorities:

- Respite care
- Parent education programs and support groups
- Fatherhood programs
- Home visitation programs
- Early care and education
- Evidence-based practice
- Family resource and support centers
- Positive youth development to prevent child abuse

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Children's Trust Fund	

Direct Service Programs target services to vulnerable families that are at risk of abuse or neglect. These families include:

- Parents (all, new, teens, etc.)
- Parents and/or children with disabilities
- Racial and ethnic minorities
- Members of under-served or under-represented groups
- Fathers

In FY2011, CTF funded 24 Direct Service grantees providing direct secondary prevention services to 24 counties. CTF continued to train and monitor grantees to obtain unduplicated participant counts. The numbers below are unduplicated counts of adults and children served. CTF efforts to obtain unduplicated counts remain a primary focus for ensuring accurate data.

CTF Direct Service grantees served 2,542 families in FY2011. Their programs served 2,747 adults and 3,160 children (including 160 special needs children). The populations served by race for adults were 1,550 white or Caucasian (56.4 percent); 472 black or African American (17.2 percent); 272 Hispanic or Latin American (9.9 percent); 5 American Indian (0.18 percent); 8 Asian American (0.29 percent); 62 multi-racial (2.3 percent), and 378 other (13.8 percent). The populations served by race for children were 1,410 white or Caucasian (44.6 percent); 670 black or African American (21.2 percent); 508 Hispanic or Latin American (16.1 percent); 8 Asian American (0.25 percent); 12 American Indian (0.38 percent); 156 multi-racial (4.9 percent), and 396 other (12.5 percent).

Direct Service grantees delivered 18,085 direct prevention services. (Note: each individual service delivery is counted as one prevention service.) Of this total, 10.44 percent was for one-on-one counseling, 14.94 percent was for transportation, 5.57 percent for respite care, 6.54 percent was for resource coordination, 22.2 percent was for home visits, 4.71 percent for parenting classes and workshops and 14.27 percent was for referrals. The remaining services were for support groups, group counseling, screening, childcare services, prenatal services and other direct services. Additionally, 8,075 telephone contacts were made and 65,255 developmental newsletters/brochures were disseminated.

Current CTF Direct Service Grantees Program Focus:

- Implement evidence-based/evidence-informed secondary prevention programs in accordance with the Community-Based Child Abuse Prevention (CBCAP) funding priorities with fidelity.
- Provide effective program evaluation using the FRIENDS Protective Factor Survey tool and CBCAP Guidelines. Provide Client Satisfaction Surveys to program participants. Complete quarterly program reports on the following three areas: (1) financial, (2) program registration of services provided, and (3) program work plan activity evaluations and summaries.
- Provide participant success stories to be featured in CTF News Brief and CTF annual signature fund raising event.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Children's Trust Fund	

- Promote Direct Services workgroup teamwork (e.g., program sustainability, parent leadership, peer review, timely and accurate outcome program data, and supporting local councils Child Abuse Prevention (CAP) Month projects, as well as other CTF community partner's prevention efforts towards improved outcome accountability).
- And attendance of at least two program staff at the CTF annual training workshops.

LOCAL COUNCIL GRANTS

Overview:

- There are a total of 72 local councils representing 82 of 83 Michigan counties.
- Each one facilitates community prevention programs w/in a specific geographical area.
- Each local council is run by its own board of directors.
- Local council work is mainly focused on building awareness, educating and providing support to the general community. In other words taking action before a problem arises to avoid issues from occurring (or *Primary Prevention*).
- Grant amounts that councils receive depend upon their assigned tier (Tier I @ \$5,000, Tier II @ \$10,000, and Tier III @ \$20,000+).
- There are 23 Tier I, 28 Tier II and 21 Tier III local councils.

Current Priorities:

- Encourage the implementation of evidence-based/evidence-informed programming.
- Support local council involvement with community collaborative entities.
- Promote inter-local council teamwork (e.g. best practices workgroup, CAP monthly workgroup, regional meetings, monthly workgroup meetings, and tier projects).

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Families First	

PROGRAM STATEMENT

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

SOURCES OF FINANCING

- Temporary Assistance for Needy Families (TANF)

LEGAL BASIS

- Adoption Assistance and Child Welfare Act of 1980, Federal PL 96-272
- Social Security Act of 1935, Title IV-B
- Omnibus Budget Reconciliation Act of 1993, Social Security Act Amendment Title IV-B, adding subpart 2, Family Preservation and Support Services Act, Federal PL 103-66
- Adoption and Safe Families Act of 1997, PL 105-89
- Promoting Safe and Stable Families Act of 2001, Federal PL 107-133
- Child and Family Services Improvement Act of 2006, Federal PL 109-288
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Families First	

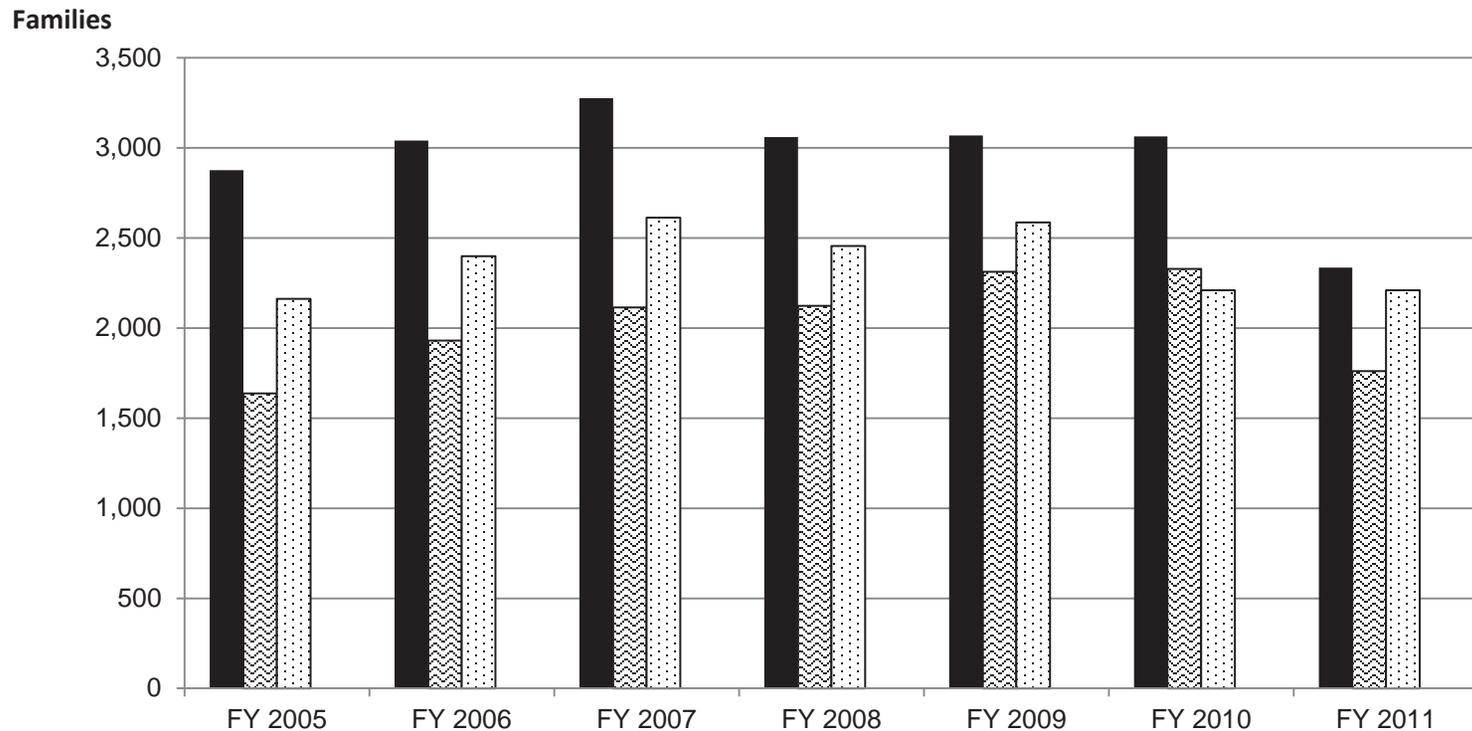
PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

The program has exceeded its objective since 1992. Data for FY 2012 show 88.5 percent of families served were intact one year after service. More than 63,935 families have received services since the program inception in 1988. These services have been a vital part of the services continuum in:

- Reducing the number of unnecessary removals, thereby reducing the foster care rate.
- Reducing the number of families/children “lingering” in the system.
- The modality of treatment is based on skill enhancement, thereby creating the ability for family members to transfer new learning and apply skills to prevent future crises.
- All programs work in partnership with the local DHS referring staff to create the safest environment for our children.
- All family preservation programs are designed to be cost-effective. An example: The average cost per family for Families First is \$4,600. The average cost per child for one year in foster care is \$26,000.

DEPARTMENT OF HUMAN SERVICES STATEWIDE FAMILIES FIRST SERVICES

Number and Percent of 12-Month Successful Program Outcomes: FY 2005 - FY 2011

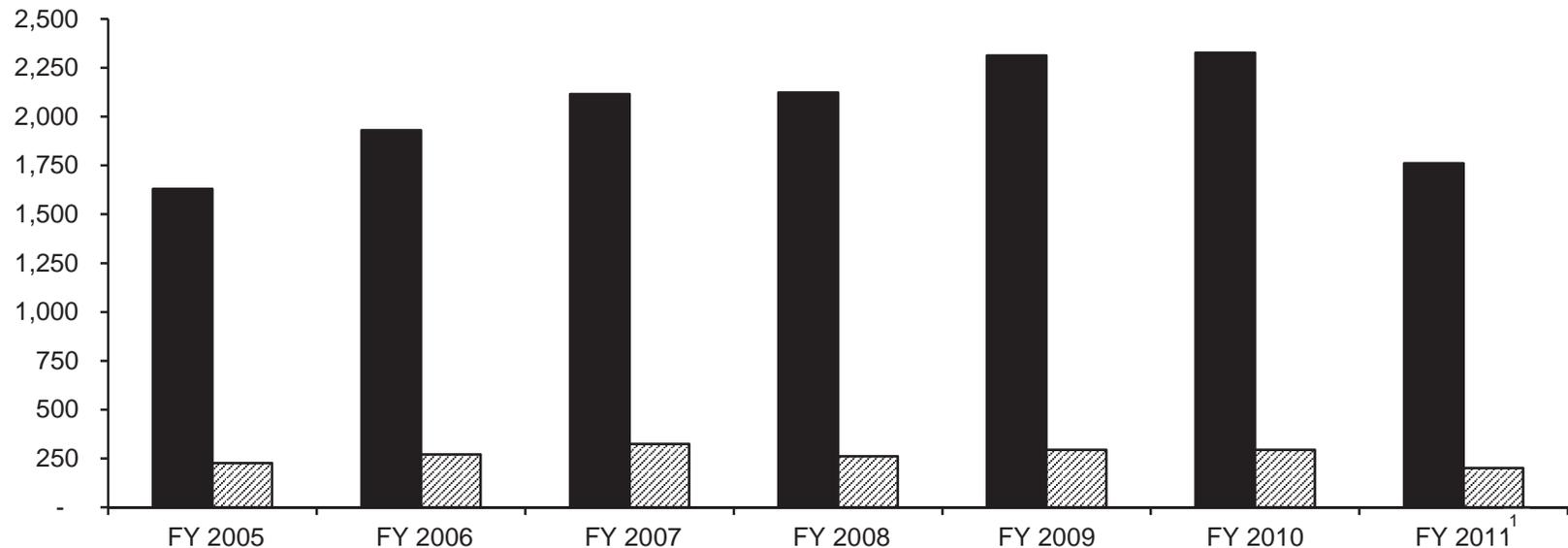


■ Family w/ 12 Mo. Placement Data	2,877	3,040	3,275	3,061	3,069	3,063	2,335
▨ Number of Successful Outcomes	1,637	1,930	2,115	2,123	2,313	2,328	1,762
▤ Total 12-mo	2,162	2,400	2,613	2,456	2,587	2,210	2,210
Percent Successful Outcomes	75.7%	80.4%	80.9%	86.4%	89.4%	89.4%	88.4%

¹ "Successful outcomes" are defined as those where no child was placed in foster care during the 12-month follow-up period

DEPARTMENT OF HUMAN SERVICES STATEWIDE FAMILIES FIRST SERVICES

Relative Placements as a Percentage of 12-Month Successful Program Outcomes: FY 2005 - FY 2011



Number Successful Outcomes ²	1,631	1,930	2,115	2,123	2,313	2,328	1,762
Number Relative Placements	227	271	325	261	294	294	201
Percent Relative Placements	13.9%	14.0%	15.4%	12.3%	12.7%	12.6%	11.4%

¹ Data for FY 2011 is not yet complete

² As defined on the preceding graph, "Successful outcomes" are those families in which no child was placed in foster care during the 12-month follow-up period

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Strong Families/Safe Children	

PROGRAM STATEMENT

Strong Families/Safe Children (SF/SC) is a community-based initiative in response to federal funding for enhanced family preservation and support services. SF/SC funds provide preventive services to families at risk of child abuse/neglect (family support services), services to families at risk of out-of-home placement or in crisis (family preservation placement prevention), time-limited reunification services and adoption promotion and support services. DHS partners with community collaborative groups to select services based on assessment of local needs. The local community collaborative groups include the directors of the local human services agencies, the prosecutor, the probate judge, the school superintendent, advocacy organizations, child welfare parents, and other stakeholders. The SF/SC program began incrementally in FY 1995 and has been in effect statewide since FY 1997.

SOURCES OF FINANCING

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

Strong Families Safe Children Allocations FY 2003 - FY 2013					
FY 2003	\$10,076,821	FY 2007	\$13,716,709	FY 2011	\$12,871,390
FY 2004	\$12,652,879	FY 2008	\$12,774,935	FY 2012	\$12,120,259
FY 2005	\$13,100,000	FY 2009	\$13,173,846	FY 2013	\$12,350,100
FY 2006	\$13,978,581	FY 2010	\$13,268,289		

LEGAL BASIS

- Adoption Assistance and Child Welfare Act of 1980, Federal PL 96-272
- Social Security Act of 1935, Title IV-B
- Omnibus Budget Reconciliation Act of 1993, Social Security Act Amendment Title IV-B, adding subpart 2, Family Preservation and Support Services Act, Federal PL 103-66
- Adoption and Safe Families Act of 1997, Federal PL 105-89
- Promoting Safe and Stable Families Act of 2001, Federal PL 107-133
- Child and Family Services Improvement Act of 2006, Federal PL 109-288
- Child and Family Services Improvement and Innovation Act of 2011, Federal PL 112-34
- DHS FY 2013 Appropriation Act, 2012 PA 200, Article X

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Strong Families/Safe Children	

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Program evaluation focuses on local client outcomes for the services approved in local plans. Local offices report annually to DHS central office. Reported outcomes for FY 2011:

- SF/SC served 10,687 customers
- 80.9 percent of all reported outcomes met intended service goal.
- 81.5 percent of service outcomes targeting child safety were achieved
- 80.3 percent of service outcomes targeting permanency were achieved
- 83.6 percent of service outcomes targeting improved family functioning were achieved

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Family Reunification Program	

PROGRAM STATEMENT

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

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

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

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

Family Reunification staffing is as follows:

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

A team is composed of one team leader and two workers. It is expected that they provide 4 hours of face-to-face contact with each family per week.

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

SOURCES OF FINANCING

- Temporary Assistance for Needy Families (TANF)

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Family Preservation and Family Support – Family Reunification Program	

LEGAL BASIS

- Adoption Assistance and Child Welfare Act of 1980, Federal PL 96-272
- Social Security Act of 1935, Title IV-B
- Adoption and Safe Families Act of 1997, PL 105-89
- Promoting Safe and Stable Families Act of 2001, Federal PL 107-133
- Child and Family Services Improvement Act of 2006, Federal PL 109-288
- DHS FY 2013 Appropriations, 2012 Act No. 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

During FY 2012, 754 families received FRP services. FRP is a specific model of intervention. The program employs an evidence-based evaluation process.

DHS is developing a data system to measure program outcomes. Implementation of this system is anticipated in FY 2014. Standard evaluation criteria include:

- 70 percent of families served shall successfully complete four months of services¹.
- 75 percent of families served shall not have a Category I, II, III, preponderance of evidence with Protective Services for a 12-month period following placement of children) in the family home. Data management system is in the development process.
- 70 percent of families served shall not have children removed from the family home and placed in out-of-home care for a 12-month period following placement in the family home.
- 90 percent of families exiting services shall express satisfaction with received services².

¹ Based on FY 2012 monthly reports submitted by contracted agencies, 83% of the families referred to the program completed four months of services.

² Based on the FY 2012 surveys results provided to families at the completion of the intervention, 95% of the families exiting services expressed satisfaction with the services that they received.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Guardianship Assistance Program

PROGRAM STATEMENT

The Guardianship Assistance Program (GAP) provides financial support to ensure permanency for children who may otherwise remain in foster care until reaching the age of majority. Guardianship assistance supports the goals of the Adoption and Safe Families Act of 1997, which determined that guardianship provides permanency for foster children when reunification and adoption are not viable permanency goals. The transfer of legal responsibility removes the child from the child welfare system, allows a caregiver to make important decisions on the child’s behalf, establishes a permanent caregiver for the child, and addresses financial needs through ongoing assistance payments. Juvenile guardianship should not be used for temporary placement of children and the program is specifically for children who would remain in foster care until the age of majority if the juvenile guardianship was not established.

In order to be eligible for GAP, the child must be in licensed foster care and meet either Title IV-E or state funded guardianship assistance requirements. Children who qualify for Title IV-E funded guardianship assistance are categorically eligible for Medicaid. Children who qualify for GAP are eligible for nonrecurring expenses reimbursement, the Medical Subsidy Program and services through the Post Adoption Resource Centers.

During FY 2011, Michigan began extending GAP benefits to eligible children. The Guardianship Assistance Program may continue for eligible children until their 21st birthday if they are in school, in job training, employed or incapable due to a documented medical condition. Youth who enter into guardianship after age 16 are eligible for Education and Training Vouchers (ETV).

SOURCES OF FINANCING

- Federal Title IV-E
- State Funds

LEGAL BASIS

- Federal Law
 - Public Law 105-89
 - Public Law 109-248
 - Public Law 110-351
- State Law
 - 2008 Public Act 200 – MCL 712A.19a
 - 2008 Public Act 202 – MCL 712A.19
 - 2008 Public Act 203 – MCL 712A.19c
 - 2008 Public Act 260 – MCL 722.871
 - 2009 Public Act 15 – MCL 722.871
 - FY 2013 Appropriations Act, 2012 PA 200, Article X

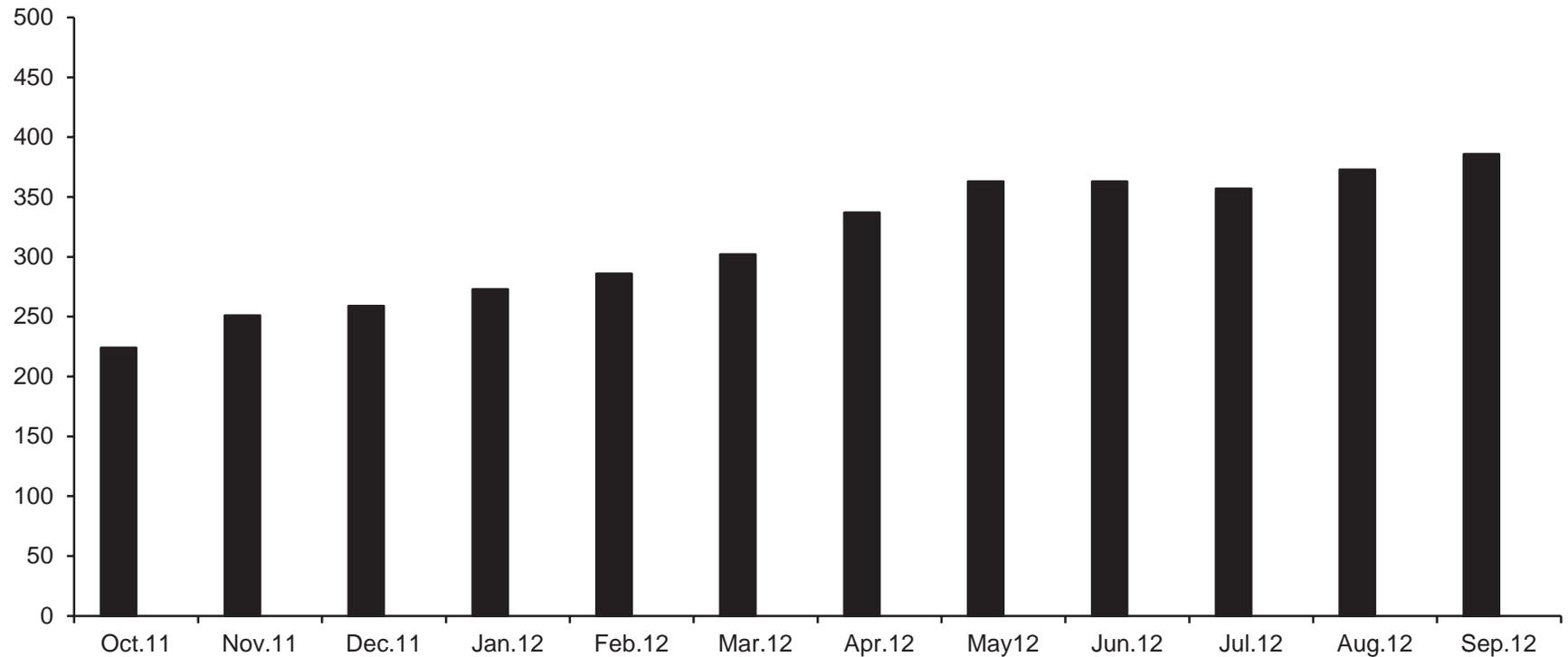
Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Guardianship Assistance Program

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Michigan utilizes a public/private partnership to achieve permanency including guardianship for children in the child welfare system. Permanency planning decisions are child-focused and carefully consider the unique needs and circumstances of each child. Whenever possible, placements are made with families who have an existing relationship or attachment to the child. Efforts are also made to provide a permanent placement for a youth where siblings may stay together.

The Guardianship Assistance Program (GAP) has had a positive impact on children and families in Michigan. GAP active caseloads have increased month-over-month since FY 2011. The FY 2011 average monthly active caseload was 128 cases. By October 2012, the caseload had increased to 407 cases, including GAP cases which were extended beyond the age of 18.

DEPARTMENT OF HUMAN SERVICES GUARDIANSHIP ASSISTANCE PROGRAM (GAP) GAP Caseload Trends October 2011 - September 2012



■ Cases	224	251	259	273	286	302	337	363	363	357	373	386
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Note: In FY 2012, the program continued month-over-month increases, and averaged 315 cases. As of October 2012, the most recent month for which final data are available, the GAP caseload was at a record 407 cases.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Juvenile Justice Services	Program: Juvenile Programs

PROGRAM STATEMENT

The Juvenile Programs Division provides technical assistance, consultation, assessment services and training for community-based juvenile justice programs and supervision for juvenile justice youth in state-operated residential facilities. Treatment programs are comprehensive, individualized and provide educational services, vocational services, short-term assessment services, cognitive restructuring, family assistance, crises intervention, and recreation. Reintegration and employment services are offered for youth transitioning to the community after residential placement. Detention services are offered to meet local short-term needs for secure placement of youth while awaiting court activities, dispositions or placement. Short-term, comprehensive assessment services are offered for youth to identify appropriate security level, treatment needs and level of behavioral intervention necessary to focus and maximize the efficiency of treatment interventions. The Juvenile Programs Division operates three secure residential facilities for youth.

Secure Facilities:

- **W.J. Maxey Boys Training School, Whitmore Lake**
Capacity: 80 youth (funded for 60 youth in FY 2013)
Per Diem Rate: \$475.22
Maxey offers specialized programming for youth with sexual offenses, chronic, serious offender behavior and intensive mental health treatment needs in a high-security setting. Each program is augmented by the services of a psychiatrist and a psychologist.

- **Bay Pines Center, Escanaba**
Capacity: 40 youth
Per Diem Rate: \$266.16
The treatment program offers general and specialized treatment for female and male youth with substance abuse issues or a history of chronic/violent offenses.

- **Shawono Center, Grayling**
Capacity: 40 youth
Per Diem Rate: \$285.17
Shawono offers specialized treatment programs for sex offenders, addiction and substance abuse and general delinquents with mild-to-medium mental issues.

SOURCES OF FINANCING

- Federal Title IV-E
- State General Fund
- Federal Title II Grant
- Juvenile Accountability Block Grant
- Local Funds County Chargeback
- School Aid Funds

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Juvenile Justice Services	Program: Juvenile Programs	

LEGAL BASIS

- Youth Rehabilitation Services Act, 1974 PA 150, MCL 803.301
- Federal Child Abuse and Prevention Treatment Act
- Social Welfare Act, 1939 PA 280, MCL 400.1
- Probate Code, 1939 PA 288, MCL 712A.1
- Juvenile Facilities Act, 1988 PA 73, MCL 803.221
- Child Care Organizations Act, 1973 PA 116 PA, MCL 722.111
- Department of Social Services, Office of Children and Youth Services, Child Care Fund R400.2001 – R400.2049
- Administrative Order 85-5
- FY 2013 DHS Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

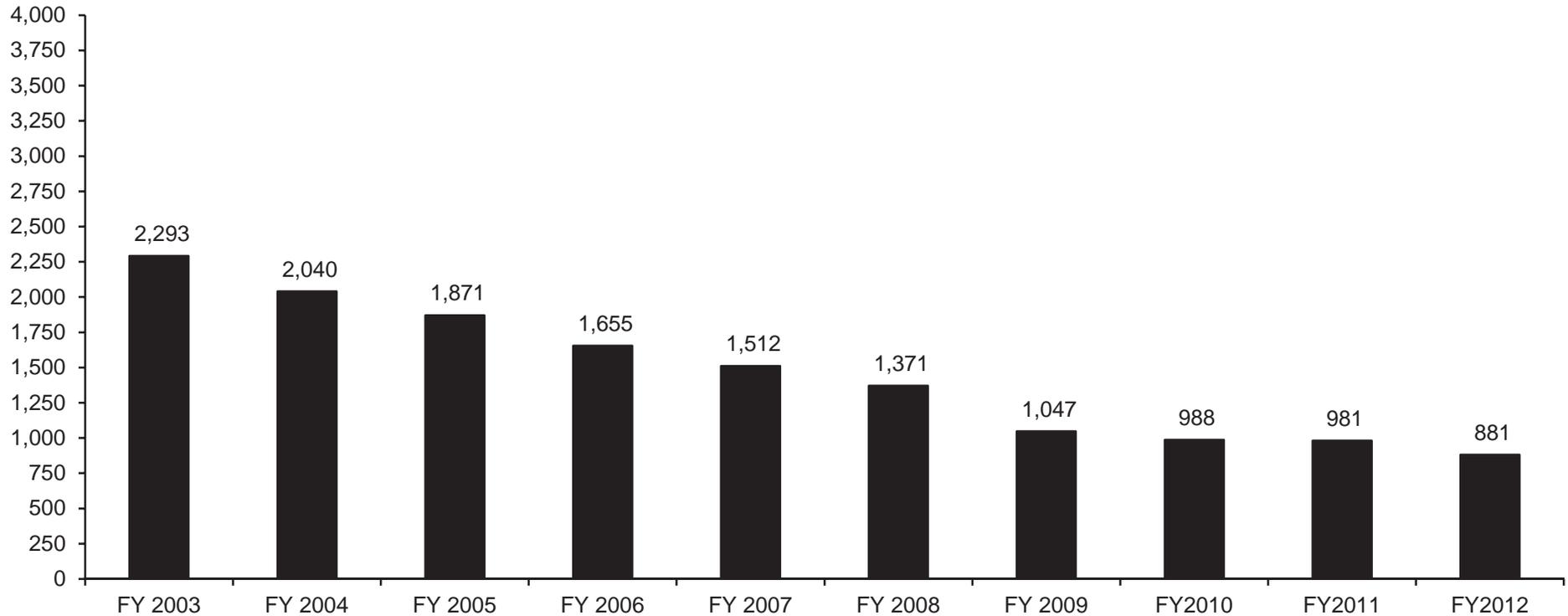
- The implementation of the Michigan Youth Re-Entry Initiative (MYRI), which employs a seamless system in public facilities, from facility entry through community re-entry, has led to more effective programming, including more intensified treatment targeting criminogenic risk factors with evidence-based treatment. Since implementation of the MYRI in FY 2010, 104 youth have transitioned back into their communities with MYRI services.
- The Mental Health treatment model developed by W. J. Maxey Boys Training School clinicians has proven successful in the stabilization and treatment of youth with serious and poly-morbid mental health conditions. Michigan is statutorily required to provide care of delinquent youth referred by courts for residential placement. The state provides much of required care through issuance of contracts to private providers. Still, there continues to be a population of offenders that cannot be properly served by the private sector. Some youth come to care with such high needs that it is not in the best interest of the youth or other youth in their programs, the agency or the public to accept the youth into care. In these instances, the state is left as the responsible entity to provide residential care.
 - 1974 PA150 states:
 - “A youth agency shall accept youth properly committed to it in accordance with the law.”
 - If a public ward is placed in a residential facility “a youth agency shall provide for the youth’s food, clothing, housing, educational, medical, and treatment needs.”
- Through the Juvenile Programs Division, referred youth are carefully screened and assessed and referred to the program, public or private, that is best equipped to meet their needs for treatment and security.
- The division administers the Regional Detention Support Services (RDSS) program. RDSS is a nationally recognized program that provides alternatives to jail and detention for juvenile offenders who have been detained and are awaiting a hearing and/or placement. RDSS components include holdover services, home detention, transportation and tether or electronic monitoring services. Eligible jurisdictions include the 61 rural counties that do not have secure detention facilities in Michigan and Native American tribal jurisdictions.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Juvenile Justice Services	Program: Juvenile Programs	

- The bureau administers the County Child Care Fund (CCF), the largest funding source for court wards throughout the State. The CCF is a collaborative effort between state and county governments which supports programs serving neglected, abused and delinquent youth in Michigan. Whether providing in-home or out-of-home care, the programs supported by the CCF are designed and administered by Michigan's county courts and local DHS offices. The services are created and paid for by county funds based on the needs of the community. Services are then submitted for 50 percent reimbursement to the state CCF.
- The division's Federal Grant Unit provides staff support to the United States Department of Justice (USDOJ) Office of Justice Programs (OJP), Office of Juvenile Justice, and Delinquency Prevention (OJJDP) funded programs. Gubernatorial executive orders designate DHS as the state agency responsible for the administration and appropriate staff support for the programs.
- The Juvenile Justice and Delinquency Prevention Act (JJDP) of 1974 provides for the Title II Formula Grants Program. The JJDP was most recently reauthorized in 2002.
 - The Juvenile Programs Division is mandated to provide support, resources, technical assistance and policy direction to juvenile justice stakeholders in Michigan.
- The division's caseload trends are reflected in the graph on the following page. The average monthly caseload has decreased year-over-year since FY 2003. From FY 2003 to FY 2012 the caseload dropped by 1,412 (62 percent). The substantial decline occurred primarily in Wayne County, as responsibility for Wayne County Juvenile Justice cases was transferred from DHS to the county of Wayne beginning February 2000. Additional reductions are the result of fewer placements in both public and private residential programs due to system efforts at less restrictive treatment programming for juvenile justice youth. Reflected caseloads include only youth in public and private placements under the supervision of DHS.

DEPARTMENT OF HUMAN SERVICES JUVENILE JUSTICE AVERAGE CASELOADS FY 2003 - FY 2012

Average Monthly Caseload



Note: *The average monthly Juvenile Justice caseload has decreased year after year. From FY 2003 to FY 2012 the caseload dropped by 1,412 (62 percent). Substantial (earlier) caseload declines occurred primarily in Wayne County as responsibility for Wayne County Juvenile Justice cases was transferred from DHS to Wayne County beginning February 2000. More recent caseload decreases are attributed to implementation of community-based diversion programming in several counties across the state. Reflected caseloads include only youth in public and private placements under the supervision of the Department.*

Source: *DHS Data Management Unit (DMU).*

Department of Management and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Child Welfare Services	Program: Runaway and Homeless Youth Services

PROGRAM STATEMENT

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

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

In addition to the Runaway and Homeless Youth Services, DHS supports a transitional living program in the Upper Peninsula, which is funded through a federal Housing and Urban Development (HUD) grant. DHS provides a match for the federal funding. The current homeless youth contracted agencies provide crisis call services which are resource-based within their geographical area statewide.

SOURCES OF FINANCING

- Runaway Services - Temporary Assistance to Needy Families (TANF)
- Homeless Youth Services - Title XX
- HUD Special Needs Assistance Program Grant

LEGAL BASIS

- DHS FY 2013 Appropriations Act, PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

The program goal is to strengthen and enhance services for the state's homeless and runaway youth up to age 21 by providing a continuum of services for all homeless youth. Services provided to youth and families through these contracts may prevent court intervention and the placement of youth in foster care. DHS collaborates with the Michigan Coalition Against Homelessness (MCAH) to collect performance outcomes and improve data collection methods. MCAH's Homeless Management Information System is a result of this collaboration. The system will track both DHS and federal data beginning January 1, 2013. Homeless Youth Services outcomes are established based on the number of youth accessing services, locating safe and appropriate housing, remaining in or returning to their own home, and/or demonstrating improvement in the areas of education, job skills and daily living skills. Runaway Youth Services outcomes are established based on the number of youth accessing services, locating safe and appropriate housing and remaining in or returning to their own home. In FY 2012, Homeless Youth and Runaway Youth contractors served 5,761 youth through the Transitional Living Program (TLP). Of these youth served, 232 were foster care or former foster care youth.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Adult Community Placement

PROGRAM STATEMENT

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

SOURCES OF FINANCING

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

LEGAL BASIS

- Adult Foster Care Facility Licensing Act, 1979 PA 218
- Social Security Act, Title XIX
- 42 CFR 440.170(f)
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

As tracked by Adult Services staff, In FY 2012, an average monthly 2,616 clients were served. ACP caseload levels have decreased year-over-year due to a payment disparity between the combined SSI and Medicaid Supplemental rates (\$1,015 per month), and relatively higher private care rates that typically start at \$1,500 a month. The payment disparity therefore provides an incentive for providers to offer placements to private-pay families/individuals. Clients residing in an AFC facility or home for the aged receive services from Medicaid that enable them to live in a setting other than a nursing home. AFC and Homes for the Aged (HA) facilities offer an interim setting between independent living and nursing home care. The Medicaid cost per month for an AFC or HA resident is \$192.38, compared to the \$4,213 per-month cost for a resident in a nursing home. The resident pays for room and board separately from the personal care supplement of \$192.38 paid by Medicaid.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Adult Protective Services

PROGRAM STATEMENT

Adult Protective Services (APS) provides protection to vulnerable adults (18 years or older) who are at risk of harm due to the presence or threat of abuse, neglect or exploitation. Any concerned individual can make a confidential referral to APS. Individuals who perform certain functions or who provide certain services are required to report suspected abuse. This includes those employed, licensed, registered or certified who provide health care, education services, social welfare services, mental health services and other human services (homes for the aged and adult foster care homes). Also included are law enforcement officers and employees of the county medical examiner.

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

FY 2012 Program and Client Characteristics

- 25,796 APS referrals received
- 15,099 APS referrals investigated
- 62 percent of APS referrals were for individuals over age 60
- 60 percent of APS referrals were female
- 40 percent of APS referrals were male
- Self-neglect, neglect and financial exploitation are the most frequent forms of harm reported to APS
- Family members are the most frequently alleged perpetrators of harm against vulnerable adults
- Health care providers, social welfare workers and concerned citizens account for 44 percent of referrals. Physicians and educators account for fewer than 2 percent of referrals; 25 percent of referrals are anonymous

SOURCES OF FINANCING

- Social Security Act Title XX
- State funds

LEGAL BASIS

- Social Welfare Act, 1939 PA 280
- Michigan Penal Code, 1931 PA 328, MCL 750.174a
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Adult Protective Services

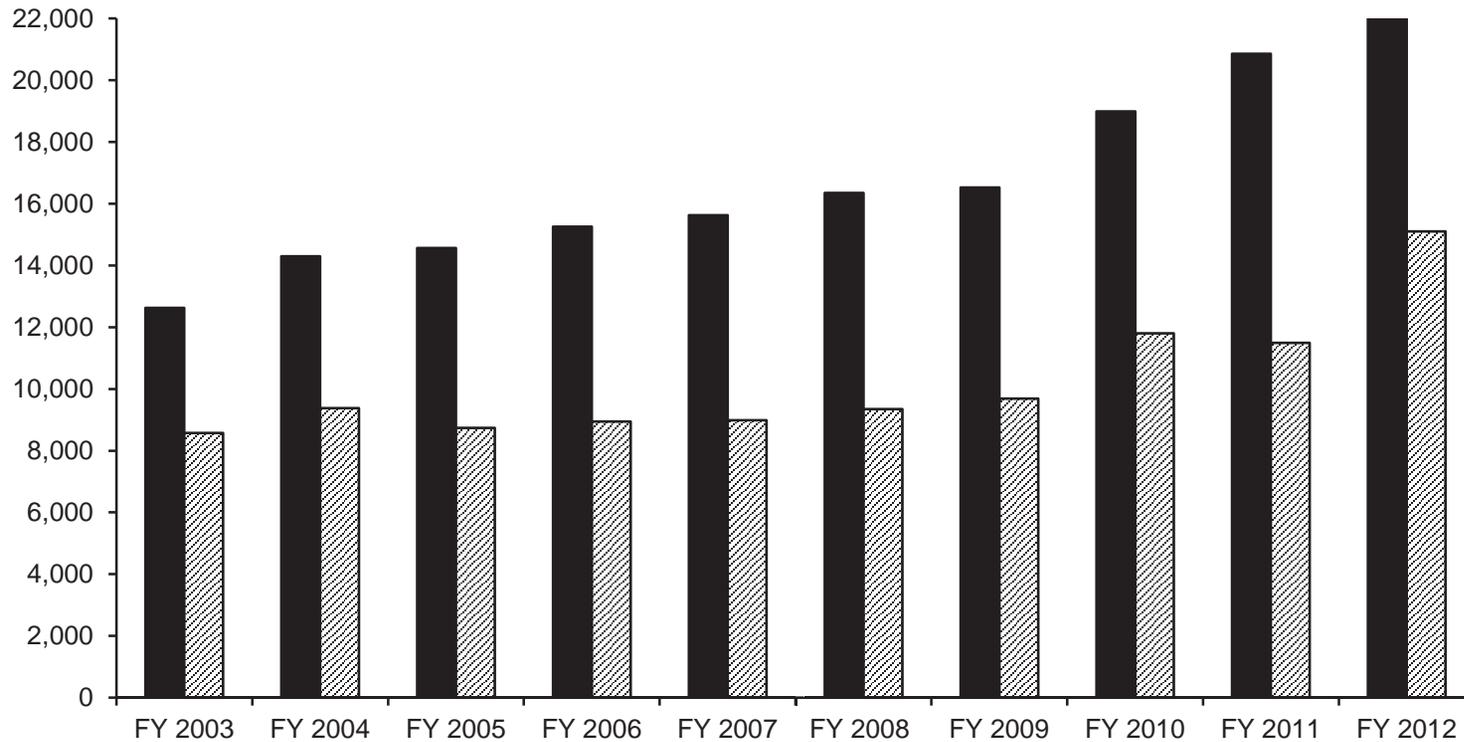
PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

DHS is mandated by the Social Welfare Act, 1939 PA 280, to provide protective services for adults. The APS program responds to a growing number of referrals. In FY 2012, there were 25,796 APS referrals, a 23.7 percent increase from FY 2011. During FY 2012, 15,099 referrals were opened for investigation, an increase of 31.4 percent from FY 2011. Harm from abuse, neglect and/or exploitation was substantiated in 29 percent of investigations.

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

DEPARTMENT OF HUMAN SERVICES ADULT PROTECTIVE SERVICES

Total Annual Referrals and Referrals Opened for Investigation FY 2003 - FY 2012



■ Referrals	12,623	14,294	14,562	15,257	15,632	16,348	16,527	18,992	20,857	25,796
▨ Invest.	8,571	9,377	8,743	8,940	8,985	9,347	9,685	11,797	11,488	15,099
% Investigated	67.9%	65.6%	60.0%	58.6%	57.5%	57.2%	58.6%	62.1%	55.1%	58.5%

Note: While APS caseloads continue to grow, since FY 2003 Adult Services staff available for completing investigations dropped 39 percent.

PROGRAM STATEMENT

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

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

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

Activities of Daily Living (ADL)		
<ul style="list-style-type: none"> • Eating • Toileting • Bathing 	<ul style="list-style-type: none"> • Dressing • Grooming 	<ul style="list-style-type: none"> • Mobility Assistance • Transferring

Instrumental Activities of Daily Living (IADL) Must have an ADL in order to receive IADL Services, effective 10-1-2011	
<ul style="list-style-type: none"> • Taking Medication • Shopping/Errands • Laundry 	<ul style="list-style-type: none"> • Housework • Meal Preparation/Cleanup

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

SOURCES OF FINANCING

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

LEGAL BASIS

- Social Welfare Act, 1939 PA 280, Section 400.6 and 400.10
- Title XIX of the Social Security Act
- Michigan Administrative Rules 400.1101 – 400.110
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X
- DCH FY 2013 Appropriations Act, 2012 PA 200, Article IV

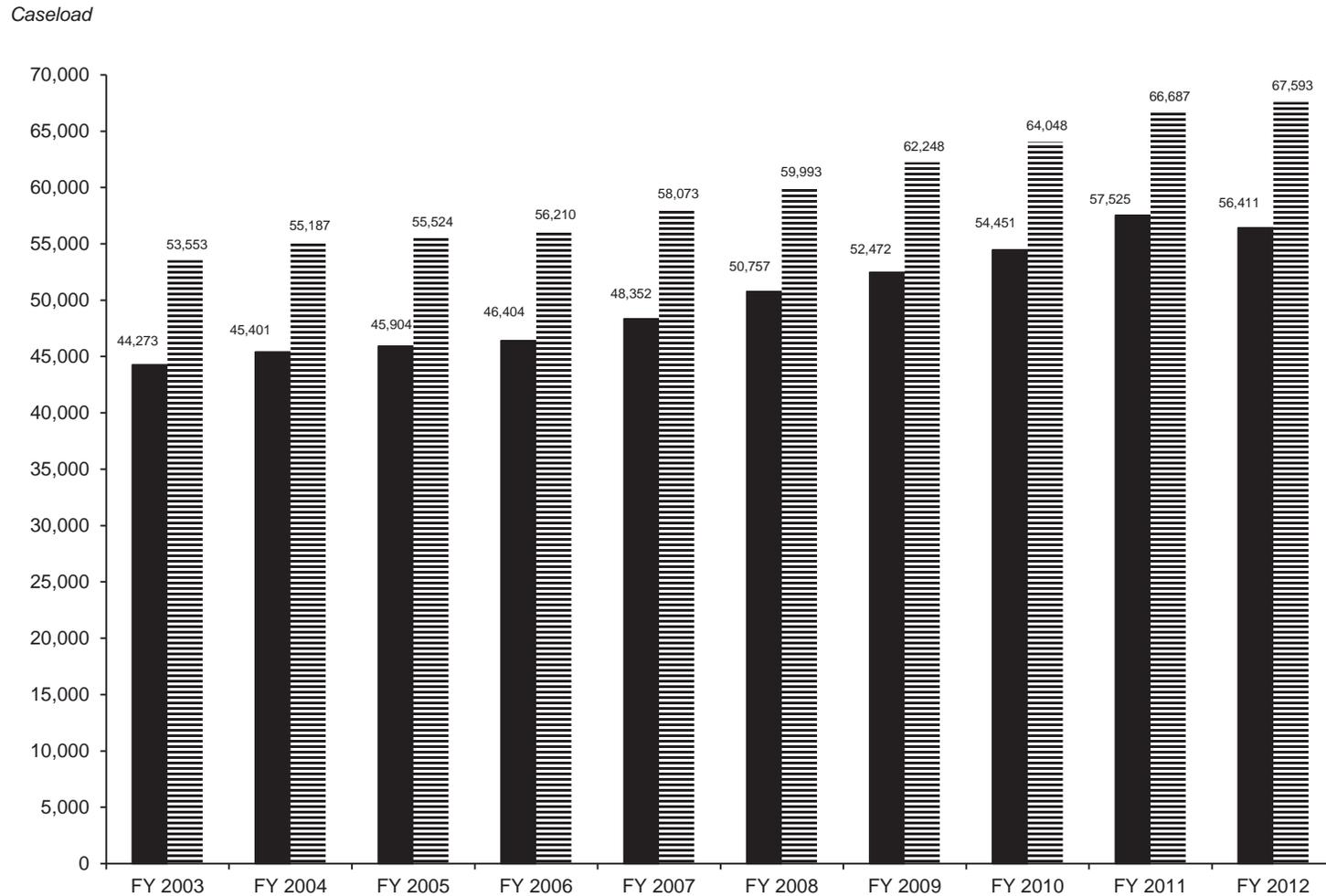
PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

HHS serves a rapidly increasing number of elderly and disabled adults in independent settings. Within HHS, the Independent Living Services (ILS) caseload continues to grow, increasing 27 percent since FY 2003, while Adult Services staff dropped 29 percent. There were 67,593 unduplicated clients served in FY 2012 by 284 adult services workers. Home help services cost an average \$402 a month to maintain client services in independent living settings. The 67,593 clients served in FY 2012 represent about 62 percent of the long-term care Medicaid clients in Michigan. It costs an average of \$4,213 per month for services to a client residing in a nursing home. About 30 percent of the long-term care Medicaid clients in Michigan reside in nursing homes. Clients in the Home Help Program receive services paid by Medicaid, which allows them to receive services in their own residences and enables them to age in place.

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

DEPARTMENT OF HUMAN SERVICES HOME HELP PROGRAM CASELOADS

Average Monthly And Unduplicated Annual Caseload / FY 2003- FY 2012



Note: The average monthly number of Home Help cases increased 27.4 percent from FY 2003 to FY 2012. Further increases are expected as Michigan's population continues to age. As of October 2012 there were over 185,000 Michigan residents on Medicaid (over age 60) who could potentially apply for Adult Services. Of concern is that staffing and client ratios continue to grow in opposite directions. HHS staff report caseloads have increased 27 percent since FY 2003, while staffing to provide services dropped 29 percent over the same period. **Comment:** The reason average monthly cases dropped in FY 2012 is due to an October 1, 2011 policy change requiring a person to have a need for an activity of daily living (ADL) in order to receive assistance. The new policy has been applied to current cases therefore FY 13 should not see a decrease in average monthly cases as was seen in FY 2012.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Executive Operations	Program: Bureau of Children and Adult Licensing

PROGRAM DESCRIPTION AND OVERVIEW

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

BCAL is composed of three major divisions: the Adult Foster Care Licensing Division, the Child Care Licensing Division and the Child Welfare Licensing Division. These divisions are described later in this document. Their common mission is to provide protection for vulnerable adults and children receiving services from licensed facilities. As of September 2012, BCAL regulated 24,254¹ facilities with a cumulative licensed capacity of 513,130 individuals². In FY 2012, 6,600 complaints were received, resulting in 306 disciplinary actions and 14 summary suspensions³.

PROGRAM GOALS

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

MAJOR GOALS OF EACH BCAL DIVISION

- Provide pre-application assistance.
- Receive and process applications for licenses.
- Conduct protective services and criminal history background checks.
- Conduct pre-licensing and complaint inspections.
- Conduct other inspections and investigations as required by statute.
- Conduct registrant orientation sessions for family child care homes.
- Conduct compliance conferences.
- Present cases in an administrative hearing.
- Assist the attorney general's office in preparing for administrative hearings.
- Provide public education and training.

¹ As noted in the first table, through all of FY 2012, the average number of regulated facilities was 23,835.

² See chart "Licensing Activity, Fiscal Year 2012."

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

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Executive Operations	Program: Bureau of Children and Adult Licensing

SOURCES OF FINANCING:

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

LEGAL BASIS

- Child Care Organization Licensing Act, 1973 PA 116
- Adult Foster Care Facility Licensing Act, 1979 PA 218
- Public Health Code, 1978 PA 368
- Social Welfare Act, 1939 PA 280
- Child Protection Law, 1979 PA 238
- Michigan Administrative Procedures Act, 1969 PA 306
- Freedom of Information Act, 1976 PA 442
- Good Moral Character Statute, 1978 PA 294
- Michigan Zoning Enabling Act, Act 110 of the Public Acts of 2006
- Mental Health Code, 1974 PA 258
- Children’s Product Safety Act, 2000 PA 219
- FY 2013 DHS Appropriations Act, 2012 PA 200, Article X

DIVISION DESCRIPTIONS

ADULT FOSTER CARE LICENSING DIVISION

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

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

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Executive Operations	Program: Bureau of Children and Adult Licensing

CHILD CARE LICENSING DIVISION

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

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

CHILD WELFARE LICENSING DIVISION

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

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

PROGRAM EFFECTIVENESS/ PROGRAM OUTCOMES

ADULT FOSTER CARE LICENSING DIVISION

The Adult Foster Care Licensing division regulates 4,637 facilities, with a combined capacity of 49,063 individuals⁴. In FY 2012, 1,897 complaints were received, 50 disciplinary actions were taken and three summary suspensions were served.

CHILD CARE LICENSING DIVISION

The Child Care Licensing division regulates 11,179 facilities with a capacity of 348,918 children. In FY 2012, 1,389 complaints were received, 72 disciplinary actions were taken and 11 summary suspensions were served.

CHILD WELFARE LICENSING DIVISION

The Child Welfare Licensing division regulates 8,438 facilities above. The total residential capacity is 115,149 children. In FY 2012, 3,314 complaints were received, 184 disciplinary actions were taken and no summary suspensions served.

⁴ See chart “Licensing Activity, Fiscal Year 2012.”

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Executive Operations	Program: Bureau of Children and Adult Licensing

The combined volume of responses to complaints, disciplinary actions and summary suspensions of BCAL's three major divisions provide ample substantiation that the BCAL continues to provide important work to protect vulnerable adults and children by regulating and consulting with licensees. The first table details FY 2012 licensing activity. The next graph details complaints and disciplinary actions across BCAL divisions from FY 2003 - FY 2012. The final three graphs detail the number of adults and children in care by living arrangement (FY 2003 - FY 2012).

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

Licensing Activity, Fiscal Year 2012

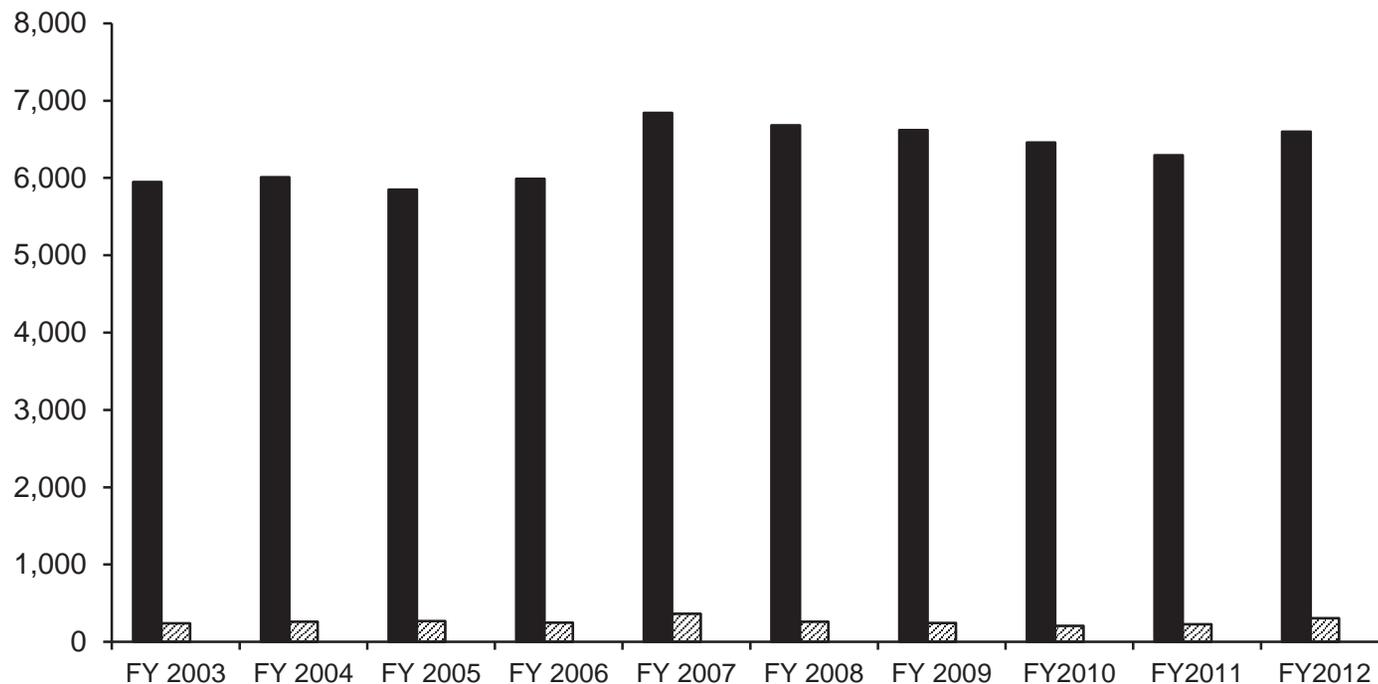
Adult Foster Care and Homes for the Aged, Child Care, Child Welfare

Licensing Activity By Division and Care Setting	Facilities	Capacity	Enrollments Received All Care Settings	License: Original Issues	License: Renewals Timely	Total Renewals Completed	Facilities Closed	Disciplinary Actions	Summary Suspensions
Adult Foster Care, & Homes for the Aged									
Family Homes Capacity 1-6 People	1,064	5,093	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Small Group Homes Capacity 1-6 People	2,323	13,260	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Medium Group Homes Capacity 7-12 People	526	5,740	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Large Group Homes 13-20 People	518	9,710	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Congregate Homes Capacity > 20 people	10	353	N/A	N/A	N/A	N/A	N/A	N/A	N/A
County Infirmary Homes for the Aged	2 194	96 14,811	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A
TOTAL	4,637	49,063	387	342	1,433	2,209	316	50	3
Child Care Licensing									
Child Care Centers	4,416	295,233	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Family Homes	4,521	26,886	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Group Homes	2,242	26,799	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TOTAL	11,179	348,918	703	959	2,164	3,665	1,504	72	11
Child Welfare Licensing									
Child Placing Agencies	221	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
CCI Institutions	209	8,107	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Camps	973	90,861	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Foster Care	7,035	16,181	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TOTAL	8,438	115,149	533	2,160	531	600	2,339	184	0
BCAL TOTAL	24,254	513,130	1,623	3,461	4,128	6,474	4,159	306	14

DEPARTMENT OF HUMAN SERVICES

BCAL: ADULT AND CHILD CARE FACILITIES

Complaints and Disciplinary Actions FY 2003 - FY 2012

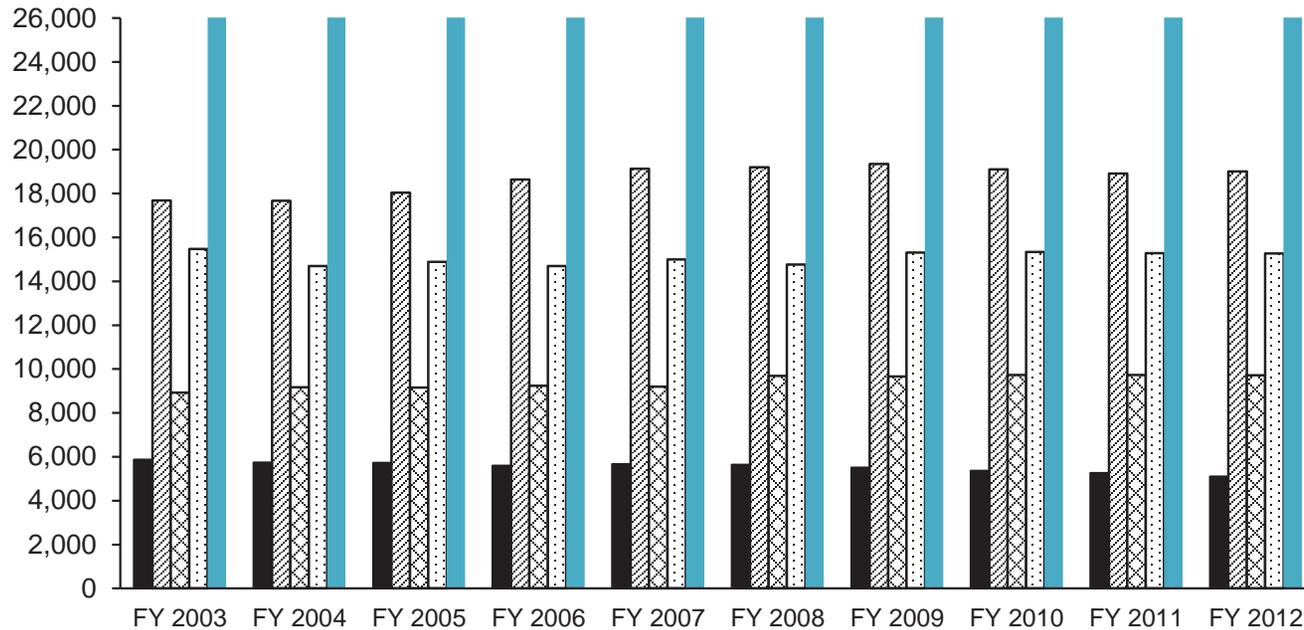


■ Complaints	5,950	6,012	5,849	5,991	6,844	6,683	6,618	6,461	6,295	6,600
▨ Disciplinary Actions	238	261	269	250	364	262	243	205	229	306
% Complaints Res. Disp. Act.	4.0%	4.3%	4.6%	4.2%	5.3%	3.9%	3.7%	3.2%	3.6%	4.6%

Note: The Bureau of Children and Adult Licensing regulates more than 24,254 facilities serving more than 513,130 children and adults. In FY 2012, BCAL responded to more than 6,600 complaints, resulting in 306 disciplinary actions.

DEPARTMENT OF HUMAN SERVICES BCAL: ADULT FOSTER CARE LICENSING DIVISION

Total Number of Adults in Care by Care Setting FY 2003 - FY 2012

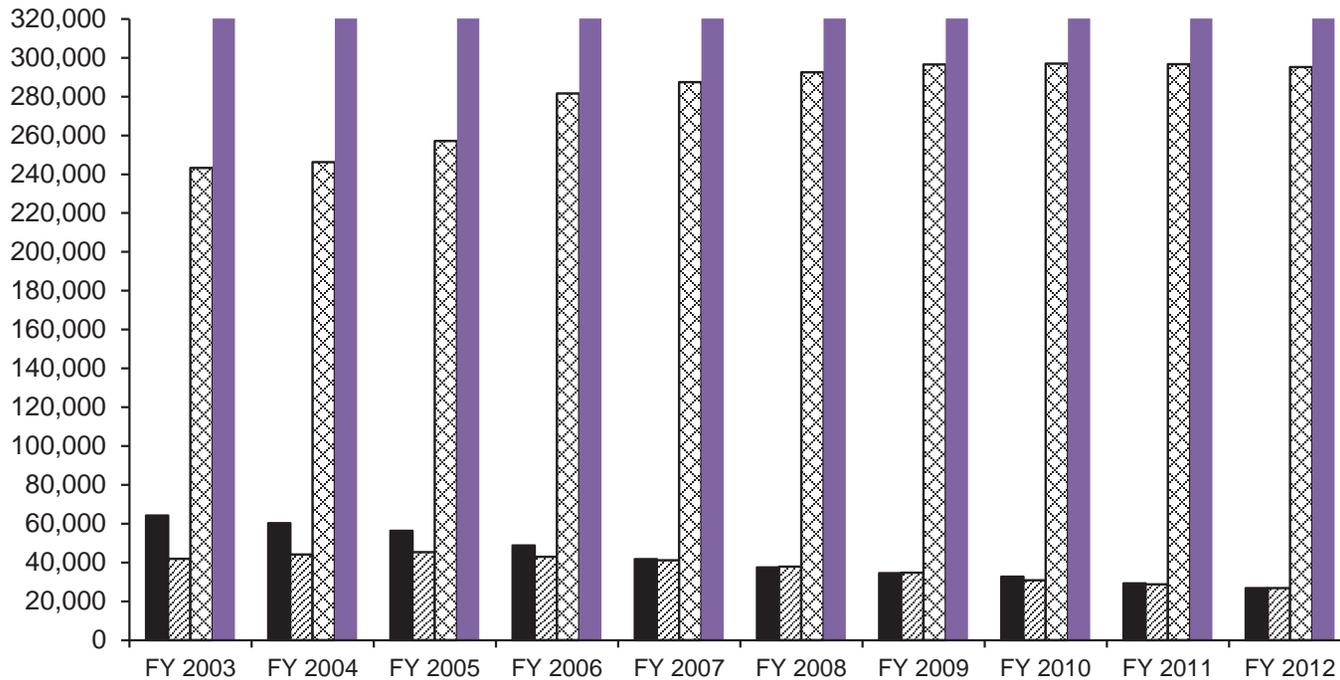


■ Family Homes	5,864	5,731	5,718	5,591	5,661	5,642	5,504	5,356	5,252	5,093
▨ Small & Med. Group Homes	17,677	17,662	18,029	18,631	19,131	19,198	19,350	19,105	18,912	19,000
▩ Large Group Homes	8,925	9,170	9,149	9,228	9,196	9,685	9,651	9,726	9,731	9,710
▤ Congregate, Co. Infirm., Other	15,469	14,693	14,876	14,697	14,989	14,766	15,306	15,338	15,278	15,260
Total	47,935	47,256	47,772	48,147	48,977	49,291	49,811	49,525	49,173	49,063

NOTE: The AFDC Licensing Division is responsible for the prevention or harm and the protection of dependent adults who are developmentally disabled, mentally ill, physically handicapped or aged. It regulates the above care facilities. The total number of adults in care increased by 1,128 (2.4%) from FY 2003 through FY 2012.

DEPARTMENT OF HUMAN SERVICES CHILD CARE LICENSING DIVISION

Total Number of Children in Care by Care Setting FY 2003 - FY 2012

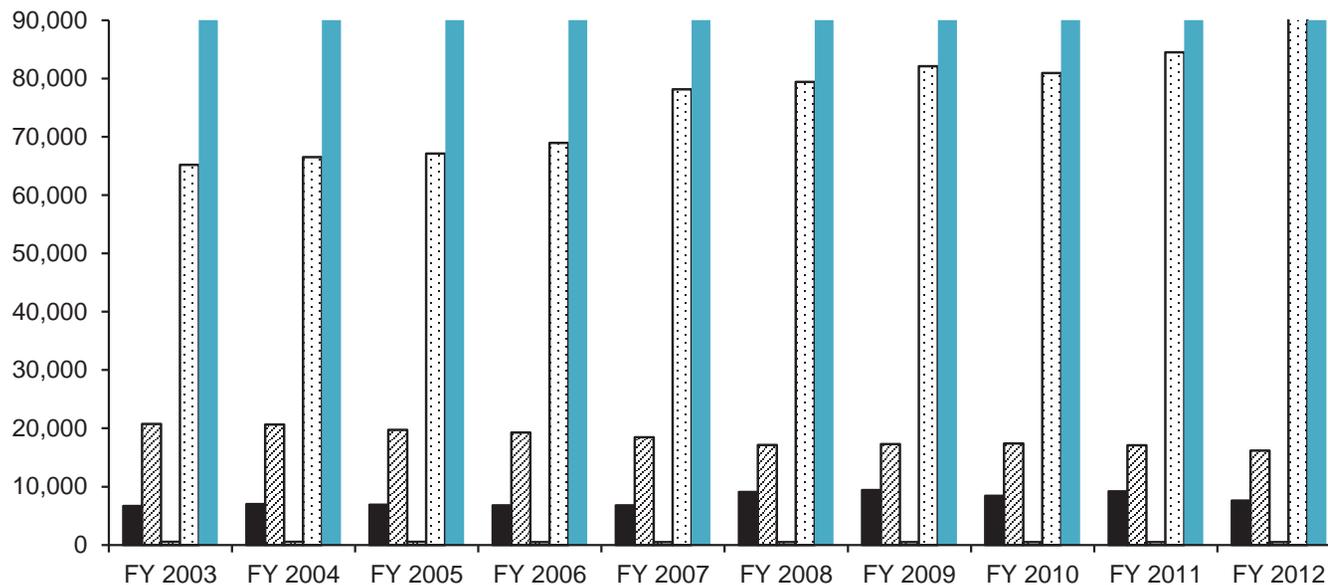


■ Family Homes	64,193	60,338	56,348	48,833	41,744	37,482	34,645	32,840	29,387	26,886
▨ Group Homes	41,884	44,143	45,410	42,937	41,182	37,817	34,706	30,932	28,755	26,799
▩ Centers	243,194	246,302	257,084	281,581	287,513	292,450	296,604	297,042	296,700	295,233
Total	349,271	350,783	358,842	373,351	370,439	367,749	365,955	360,814	354,842	348,918

NOTE: The Child Care Licensing Division is responsible for the protection of vulnerable children less than one year-of-age through age 17. Children are in out-of-home child care facilities for periods less than 24 hours. The division licenses the above care settings. The total number of children in care by care setting has decreased each year since 2007. Whereas the FY 2006 total was 373,351, by FY 2012 the total was 24,433 lower (-6.5%) at 348,918.

DEPARTMENT OF HUMAN SERVICES CHILD WELFARE LICENSING DIVISION

Total Number of Children in Care by Care Setting FY 2003 - FY 2012



■	Child Care Institution	6,702	7,015	6,909	6,791	6,816	9,095	9,440	8,425	9,205	7,625
▨	Foster Care Placement	20,772	20,672	19,770	19,296	18,494	17,181	17,292	17,406	17,095	16,181
▩	Court-Operated Placement	538	538	540	498	506	506	506	506	482	482
▤	Camps	65,243	66,556	67,180	68,972	78,157	79,431	82,138	80,975	84,523	90,861
	Total	93,255	94,781	94,399	95,557	103,973	106,213	109,376	107,312	111,305	115,149

NOTE: The Child Welfare Licensing Division ensures children, adults and families are receiving required services when children receive 24-hour out-of-home care. The division regulates, monitors contracts and licenses the above noted care settings. Within the Child Welfare Licensing Division, the total number of children in care (by care setting) increased from 93,255 in FY 2003 to 115,149 (+23.5%) in FY 2012.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Community Resource Program

PROGRAM STATEMENT

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

SOURCE OF FINANCING

- State funds.
- Various federal funds.

LEGAL BASIS

- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X.

PROGRAM EFFECTIVENESS / FY 2011 PROGRAM OUTCOMES:

- In FY 2011, more than 15,000 volunteers provided 527,100 hours of service to clients. The estimated value of volunteered hours was \$11,258,846.*
- In addition to over \$11 million in volunteer hours in FY 2011, an additional \$ 3.4 million in cash and non-cash donations was received.
- CRP outlays for wages, salaries and other expenditures in FY 2011 totaled \$5.725 million.
- FY 2011 CRP return on investment was estimated to be about \$2.57 per dollar invested.

NOTE: FY 2012 outcome data are yet available

* In CY 2010, the national "Independent Sector Organization" estimated the national average value of volunteer time at \$21.36 per hour. Annual "value estimates" are a means to acknowledge and quantify time, talents and energy afforded clients and charitable organizations. As reported by CRP staff for FY 2011, the actual average value per-hour of volunteered hours in Michigan was \$ 21.79.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Community Action and Economic Opportunity	Program: Community Services Block Grant

PROGRAM STATEMENT

The goals of the Community Services Block Grant (CSBG) program are to assist low-income individuals and families to achieve self-sufficiency and to address the causes of poverty. The target population for FY2012 includes individuals and families with income at or below 125 percent of the poverty level. CSBG grantees include 30 Community Action Agencies (CAAs) serving all 83 counties. They are:

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

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Community Action and Economic Opportunity	Program: Community Services Block Grant

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

SOURCES OF FINANCING

- Federal (HHS) Community Services Block Grant funds

LEGAL BASIS

- Community Services Block Grant Act of 1981, Public Law 97-35
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Estimated expenditures for FY 2012 CSBG services¹ were:	
Employment	\$1,583,778
Education	2,187,017
Income Management	2,011,686
Housing	2,021,879
Emergency Services	6,441,462
Nutrition	3,300,969
Linkages with other programs	3,925,194
Self-Sufficiency	2,207,893
Health	616,350
Estimated Total Expenditures	\$24,296,228

¹ FY 2012 estimated expenditures are based on FY 2012 planning reports from the 30 CAAs. DHS will not have all FY 2012 figures from the CAAs until March 31, 2013.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Community Action and Economic Opportunity	Program: Community Services Block Grant

Of the preceding amounts, approximately \$5.6 million was used to support CAA centralized operating costs. Although agencies receive funding from other government and private organizations for direct services, the CSBG funding enables the agencies to maintain core staffing, facilities, equipment maintenance and other centralized activities. This core funding enables CAAs to leverage approximately \$388 million in additional federal, state, local and private funds. CAAs served over 299,808 households in FY 2011. Final FY 2012 household data are not yet available.

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

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Michigan Domestic and Sexual Violence Prevention and Treatment Board	

PROGRAM STATEMENT

The Michigan Domestic and Sexual Violence Prevention and Treatment Board (MDSVPTB), was previously named the Michigan Domestic Violence and Sexual Assault Prevention and Treatment Board. The name change was made in accordance with Executive Order 2012-17, Issued by the governor on December 4, 2012. Original programming for this area was established in 1978 by state legislation that creating a governor-appointed board responsible for focusing state activity on domestic violence. The board, administratively housed in the Department of Human Services, administers state and federal funding for domestic violence shelters and advocacy services, sexual assault programs and advocacy service, develops and recommends policy, and develops and provides technical assistance and training. The seven-member board represents a cross-section of professions concerned with the crimes of domestic violence and sexual assault. Members are appointed by the governor with the advice and consent of the Senate.

The goals of the board are to:

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

Specific services provided:

- Domestic Violence Comprehensive Services: The following services are provided under contracts with 44 nonprofit domestic violence programs: emergency shelter; emergency intervention (24-hour crisis lines and emergency response services); supportive counseling (individual and group); community education and prevention services; personal and support advocacy with health care, criminal justice systems, housing location, financial assistance, transportation and child care; and children's services.
- STOP Violence Against Women Grant: The federal STOP Violence Against Women Grant for FY 2012 provided more than \$3 million to local collaborative projects to improve victim services and the criminal justice response to violent crimes against women. Local projects address domestic violence, sexual assault, dating violence and stalking throughout the state, including specialized Sexual Assault Nurse Examiner programs. These funds also support the development of statewide policies, protocols, and training in collaboration with state agencies and statewide organizations.

- Sexual Assault Comprehensive Services Program: The board currently funds 23 nonprofit sexual assault programs to provide comprehensive services (24-hour crisis line, individual and group counseling, emergency response, and advocacy) to sexual assault survivors and their significant others, including sexual assault forensic examinations.
- Transitional Supportive Housing Program: The board currently funds 17 nonprofit domestic violence programs to provide for safe transitional housing and supportive services for up to 24 months.
- Children's Advocacy Centers: The board currently funds 19 nonprofit children's advocacy centers to provide investigative, assessment, counseling, support and educational services to victims of child sexual abuse and their non-offending family members.

Population Description:

- The Michigan State Police Michigan Incident Crime Reporting in 2010 (latest complete data available) indicates that 95,024 domestic violence victims and 4,290 sexual assault victims were reported. Data on these victims include:

DOMESTIC VIOLENCE				SEXUAL ASSAULT			
Age of Victim		Race of Victim		Age of Victim		Race of Victim	
19 Or Under	20.4%	White	60.6%	19 Or Under	68.8%	White	71.2%
20 – 29	30.2%	Black	36%	20 – 29	16.8%	Black	22.8%
30 – 39	21%	Other/Unknown	3.4%	30 – 39	7.2%	Other/Unknown	6%
40+/Unknown	28.4%			40+/Unknown	7.2%		

SOURCES OF FINANCING

- Sexual Assault Victims Medical Forensic Intervention and Treatment Act (PA 546 of 2008).
- Children's Advocacy Center Act (PA 544 of 2008).
- TANF Block Grant.
- Federal Family Violence Prevention and Services Act grant.
- Federal Preventative Health and Health Services block grant.
- Federal Violence Against Women Act – STOP Violence Against Women grant.
- Federal Violence Against Women Act – Rural Domestic Violence, Dating Violence, Sexual Assault and Stalking Assistance grant.
- General Funds/General Purpose

LEGAL BASIS

- Michigan Domestic Violence, 1978 PA 389
- Federal Family Violence Prevention and Services Act 42 USC 10401
- Federal Violence Against Women Act of 2005, P.L. 106-386

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Michigan Domestic and Sexual Violence Prevention and Treatment Board	

- Sexual Assault Victims Medical Forensic Intervention and Treatment Act (PA 546 of 2008).
- Children's Advocacy Center Act (PA 544 of 2008).
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Domestic Violence:

All 83 counties receive services from 44 nonprofit domestic violence programs. The following figures are from FY 2012:

Number Served (Domestic Violence):		Services Provided:	
Residential adults and children	10,418	Nights of shelter	277,136
Non-residential adults and children	29,221	Crisis calls answered, includes information and referral calls	87,761

In 2011, MSP crime statistics show that there were 101 domestic violence homicides in Michigan. If not for services (including shelter) for victims and their children, this number would likely be much higher. These services are critical in preventing homicides in Michigan. These services provide access to immediate safety and support for adult victims and a multitude of children who otherwise would likely be left with no option but to stay and continue to struggle against the violence within their homes.

Sexual Assault Comprehensive Services (SACS):

42 counties received services from 23 nonprofit sexual assault programs, including eight Sexual Assault Nurse Examiner (SANE) programs serving 10 counties. The following figures are from FY 2012:

SACS Number Served:		SANE Number Served:	
Adults and children	5,862	Adults and children	1,375

Services Provided:	
Hours of Counseling	17,620
Crisis calls answered (includes information and referral calls)	10,814

National statistics say that one in three women will be sexually assaulted in their lifetime and one in six boys will be sexually assaulted before the age of 18. Because sexual assault is one of the most underreported violent crimes, sexual assault crisis programs are often the only organizations that victims access for help to try to heal from this significant trauma. Michigan has not been able to provide support services in all 83 counties, even though the need clearly exists. In addition to counseling, programs help victims with immediate needs like broken locks, reports to law enforcement and medical care. Research clearly shows that without these services, sexual assault victims are at much higher risk for more violence, long-term psychological effects and economic struggle.

Transitional Supportive Housing (TSH):

Seventeen grants were awarded to domestic violence transitional supportive housing service providers that cover 34 counties. Additionally, four previously awarded TSH grantees were provided with continuation funding for transitional housing covering five additional counties. The following figures are from FY 2012:

TSH Number Served:	Services Provided:
Adults and children 1,014	Nights of housing 223,205

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

Children's Advocacy Centers (CAC):

Public Act 544 of 2008 created the children's advocacy center fund that the board administers. The legislation was enacted in January 2009 but as stipulated, the funds could not be distributed before April 2011. The first 16 grants were awarded in FY 2011. From July 1, 2011 to June 30, 2012, 16 counties received services from 16 nonprofit children's advocacy centers. From July 1, 2012 to September 30, 2012, five additional counties received services from three additional nonprofit children's advocacy centers. Per the legislation, only Children's Advocacy Centers that are nationally accredited by the National Children's Alliance are eligible for funding. The purpose of the fund is to provide investigative, assessment, counseling, support, and educational services to victims of child sexual abuse and their families through Children's Advocacy Centers; provide training related to child sexual abuse for personnel employed by the Children's Advocacy Centers; improve the detection, investigation, treatment and prevention of child sexual abuse and to improve public awareness of child sexual abuse.

CAC Number Served	
7/1/11 – 9/30/11:	
Children – Victims of Sexual Abuse	901
Non Offending Family Members	716

Children's Services Provided	
7/1/11 – 9/30/11:	
Forensic Interviews	893
Child Therapy Hours	643

CAC Number Served	
10/1/11 – 9/30/12:	
Children – Victims of Sexual Abuse	4,676
Non Offending Family Members	2,985

Children's Services Provided	
10/1/11 – 9/30/12:	
Forensic Interviews	4,513
Child Therapy Hours	3,138

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Children's Services	Program: Michigan Domestic and Sexual Violence Prevention and Treatment Board	

The prevalence of child sexual abuse is difficult to determine, as many victims are unable to report the heinous crime that has happened to them, however, national statistics indicate that 1 in 5 girls will be sexually abused or assaulted before age 18, and for boys, studies range from 1 in 6 to 1 in 8. Children who have experienced sexual abuse are much more likely to suffer from low self-esteem, feelings of worthlessness and an abnormal or distorted view of sexuality. Additionally, they are at an elevated risk of being sexually assaulted later in their lifetimes. Michigan's Children's Advocacy Centers fulfills a crucial role in providing much-needed services to children who have been sexually abused. The Children's Advocacy Center's model aims to provide comprehensive services for child victims and their non-offending family members. They offer child-focused forensic interviews in a child-friendly space conducted by highly trained professionals. They also feature a multidisciplinary team of observers most often consisting of police officers, prosecutors and Children's Protective Services staff. The goal of this method is to ensure that children being interviewed only have to tell their story one time as opposed to many in interviews with various system personnel. Children's Advocacy Centers also offer counseling for children and prevention efforts in their local communities.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment Training Programs Overview	

PROGRAM STATEMENT

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

- Partnership. Accountability. Training. Hope. (PATH)
- Employment and Training Program for Food Assistance Recipients
- Direct Support Services (including Employment Support Services and Family Support Services)

PATH is the employment program for FIP applicants and recipients administered by the Workforce Development Agency (WDA) through the local MWAs. FIP recipients are required to participate in PATH unless they are exempt by state law. The goal of PATH participation is FIP case closure due to self-sufficiency. MWAs will continue to serve all PATH participants until their FIP case is closed by DHS, or until they are referred back to DHS due to failure to participate or have met deferral criteria. DHS will refer every non-deferred mandatory participant to PATH except those participating with a tribal contractor program or Volunteer in Service to America (VISTA) Job Corps, and AmeriCorps participants.

PATH is a partnership between DHS and WDA. Local workforce boards, the MWAs and local DHS offices provide a blended set of services to connect Michigan's families with the kind of jobs, education and training opportunities to achieve self-sufficiency and meet the workforce and skill needs of Michigan's businesses. PATH primary goals lead to a reduction in welfare cases and reduce recipients cycling on and off public assistance. An increase in job retention, earnings and participation in education and job training programs is expected to take place. A corresponding decrease in Medicaid cases and an overall reduction in program costs are also primary goals.

- Employment and Training Program for Food Assistance Recipients: This program serves former able-bodied adults without dependents (ABAWDS) that receive Food Assistance and are required to work or meet other requirements. The program is provided through the local MWAs.
- Direct Support Services (DSS):
 - Employment Support Services (ESS): These services are available through DHS and the MWAs to support FIP recipients' participation in employment and training activities. ESS are available from DHS or MWA for parents or caretaker relatives. ESS may also be available to families for a maximum of four consecutive months when receiving child care subsidy, Food Assistance or Medicaid, if the services are necessary to maintain or enhance employment. These are services not available through the PATH program and may include such things as counseling and classes in life skills that address family issues to help families toward self-sufficiency.
 - Family Support Services: Family Support Services are available through DHS for FIP recipients who are participating in PATH or are participating with the local DHS office. Family Support Services are also available to families for a maximum of four consecutive months when receiving Child Care, Food Assistance or Medicaid if the services are necessary to maintain or enhance employment. These are services not available through the PATH program and may include such things as counseling and classes in life skills that address family issues to help families toward self-sufficiency.

Federal Program Requirements:

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

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

- **Adjusted Participation Rates:** States are allowed to adjust work participation rates to take into account cash assistance caseload reductions that have occurred since 2005. Michigan’s participation rate targets have been adjusted as allowed over the years of TANF regulations. The table at the end of this section profiles TANF federal participation rate targets and Michigan adjusted and actual participation rates.

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

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment Training Programs Overview	

SOURCES OF FINANCING

- Federal TANF
- Food Stamp Employment and Training Funds

LEGAL BASIS

- Federal Social Security Act
- Social Welfare Act, 1939 PA 280
- Administrative Rules R.400.3591-R.400.3596
- 45 CFR Part 400 and 401
- Michigan Strategic Fund FY 2013 Appropriations Act, 2012 PA 200, Article XII
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS

With Michigan’s unemployment rate averaging 9 percent through the first 10 months of 2012, moving recipients off temporary assistance remains a statewide challenge. As backdrop, for all of 2012 Michigan’s unemployment rate is projected to average just under 9 percent, while the national rate is projected to average 8 percent. Month-over-month, Michigan continues to have the sixth or seventh highest unemployment rate in the country. With these circumstances in mind, in an effort to increase Michigan’s success in meeting federal participation rates, Michigan completed a review of employment programming, as well as a redevelopment of that programming. Implementation of new policy and program initiatives will continue through FY 2013. The following table provides a summary of Michigan’s past and current work participation rates.

MICHIGAN DEPARTMENT OF HUMAN SERVICES

TANF PARTICIPATION RATES

Federal Targets Compared to Michigan Adjusted and Actual Participation Rates

Fiscal Year	FEDERAL TARGET		MICHIGAN				
	All Families Percent	Two-Parent Families Percent	ADJUSTED TARGET ¹		ACTUAL PARTICIPATION RATES		
			All Families Percent	Two-Parent Families Percent	All Families Percent	Two-Parent Families Percent	Met Adjusted Rate
2000	40%	90%	0.0%	4.1%	36.4%	61.7%	Yes
2001	45%	90%	0.0%	5.0%	33.8%	53.5%	Yes
2002	50%	90%	0.0%	4.6%	28.9%	46.5%	Yes
2003	50%	90%	0.0%	6.4%	25.3%	36.2%	Yes
2004	50%	90%	0.0%	6.0%	24.5%	35.7%	Yes
2005	50%	90%	0.0%	7.6%	22.0%	30.4%	Yes
2006 ²	50%	90%	0.0%	8.2%	21.6%	26.2%	Yes
2007	50%	N/A	30.5%	N/A	24.2%	N/A	No
2008	50%	N/A	50.0%	N/A	33.6%	N/A	No
2009	50%	N/A	27.8%	N/A	27.9%	N/A	Yes
2010 ³	50%	N/A	26.8%	N/A	22.8%	N/A	²
2011	50%	N/A	45.0%	N/A	26.9%	N/A	²
2012	50%	N/A	39.4%	N/A	41.2%	N/A	²

Notes:

- 1) Federal law requires that states receiving funding under the Temporary Assistance for Needy Families (TANF) block grant meet work participation rates for cash assistance (Family Independence Program - FIP) caseloads. Michigan is required to achieve minimum work participation rates that are a percentage of the total FIP caseload.
- 2) Federal work participation rate targets were established with the passage of welfare reform. "Rates" were subsequently adjusted to recognize reductions in public assistance caseloads that states experienced since 1995 and 2005. The above data reflect federal rates adjusted target rates, and actual Michigan rates.
- 3) Beginning FY 2007, Michigan's two-parent FIP cases were 100% state-funded. After FY 2006, there were no longer federal targets associated with two-parent cases.
- 4) Federally approved rates for FY 2010 through FY 2012 have not yet been finalized.
 - ¹ Adjusted targets are those that states must meet. An adjusted rate is the federal target rate (reduced by states' caseload reduction credit).
 - ² Original TANF participation rates and caseload credits remained in effect until 9/30/06. Reauthorization of the original TANF legislation occurred on 10-01-2006.
 - ³ Federally approved rates for FY 2010, FY 2011 and FY 2012 are not yet finalized.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment and Training Programs - Employment-Related Activities

PROGRAM STATEMENT

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

Recipients served by PATH through Michigan Works! Agencies:

- Family Independence Program (FIP) applicants and recipients.
- Minor parents who have graduated from high school.

Recipients served by DHS:

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

SOURCES OF FINANCING

- Federal TANF
- Food Stamp Employment and Training Funds

LEGAL BASIS

- Federal Social Security Act
- Social Welfare Act, 1939 PA 280
- Administrative Rules R.400.3591-R.400.3596
- 45 CFR Part 400 and 401
- Michigan Strategic Fund FY 2013 Appropriations Act, 2012 PA 200, Article XII
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment and Training Programs - Employment-Related Activities	

PROGRAM EFFECTIVENESS

With Michigan’s unemployment rate averaging 9 percent through the first 11 months of 2012, moving recipients off temporary assistance remains a statewide challenge. As backdrop, for all of 2012 Michigan’s unemployment rate is projected to average just under 9 percent, while the national rate is projected to average 8 percent. Month-over-month, Michigan continues to have the sixth or seventh highest unemployment rate in the country. With such high unemployment, moving recipients off of temporary assistance is very difficult. In an effort to increase Michigan’s success in meeting federal participation rates, Michigan has undertaken a thorough review and redevelopment of its current employment program. Implementation of improvements will continue throughout the new fiscal year. The graph in the previous section outlines Michigan’s past and current work participation rates.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment and Training Programs - Employment Support Services	

PROGRAM STATEMENT

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

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

SOURCES OF FINANCING

- Federal TANF
- Food Stamp Employment and Training funds

LEGAL BASIS

- Federal Social Security Act
- 45 CFR Part 400.72, 401
- Social Welfare Act, 1939 PA 280
- 7 CFR 273.7, Michigan Strategic Fund FY 2013 Appropriations Act, 2012 PA 200, Article XII
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS

ESS is one of the most efficient ways to remove barriers to self-sufficiency for clients. Transportation and child care continue to be the biggest barriers in reaching self-sufficiency. DHS and the MWAs collaborate to provide support services in an effort to reduce barriers associated with employment maintenance and participation in employment-related activities. DHS provides these same services to non-cash recipient families in an effort to avoid the need for application of cash assistance, as well as to maintain or improve employment. DHS and the MWAs will continue to provide these services in 2013.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Employment and Training Programs - Employment and Training Program for Food Assistance Recipients	

PROGRAM STATEMENT

The Employment and Training Program for Food Assistance applicants and recipients provides services to assist Food Assistance applicants and recipients in obtaining and maintaining employment. Michigan is currently under a waiver that exempts childless adults from the three-month time limit for food assistance. Food assistance applicants and recipients are encouraged to work or engage in employment-related activities as assigned. They may also volunteer for an employment and training program component. Note: Persons employed or self-employed an average of 30 hours or more per week over the benefit period or earning on average the federal minimum wage times 30 hours per week are not required to participate in any further employment-related activities. This includes migrant or seasonal farm workers with an employer or crew chief contract/agreement to begin work within 30 days.

SOURCES OF FINANCING

- Food Stamp Employment and Training funds

PROGRAM EFFECTIVENESS

This is a voluntary program. Single adults age 18-50 without children who are not deferred may voluntarily participate in this program. In FY 2012 there were 2,373 voluntary referrals, of which 965 attended an activity and 211 clients completed program objectives. There were 726 episodes of job search, 799 episodes of education and training and 502 episodes of employment that lead to job retention services.

LEGAL BASIS

- Federal Food Stamp Act of 1977
- 7 CFR 273
- MSF FY 2013 Appropriations Act, 2012 PA 200, Article XII
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS

Participation in employment-related activities to Food Assistance-only recipients is a voluntary program. However, those recipients who chose to participate in the employment activities offered by the food assistance employment and training program have had great success in improving employment skills and increasing economic independence. INFORMATION ON THE NUMBER OF FOOD ASSISTANCE-ONLY RECIPIENTS IS NOT AVAILABLE AT THIS TIME.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: HIV/AIDS Support Services	

PROGRAM STATEMENT

The DHS HIV/AIDS Support Services Unit provides information and advocacy for anyone in Michigan infected by HIV and administers the DHS Insurance Assistance Program (IAP). The IAP was created to assist HIV-positive persons retain (or keep) their previous private health insurance benefits. Maintaining private health insurance benefits results in significant Medicaid savings. NOTE: Similar Medicaid savings are realized in the State Drug Assistance Program (administered by the Department of Community Health).

- The HIV/AIDS Services unit provides client advocacy through workshops and service worker training. Workshop and advocacy covered topics include: 1) accessing DHS public assistance benefits; 2) accessing Social Security Administration program benefits, and 3) identifying benefits available through community agencies and resources.

SOURCES OF FINANCING

- IAP – State Medicaid Offset funds

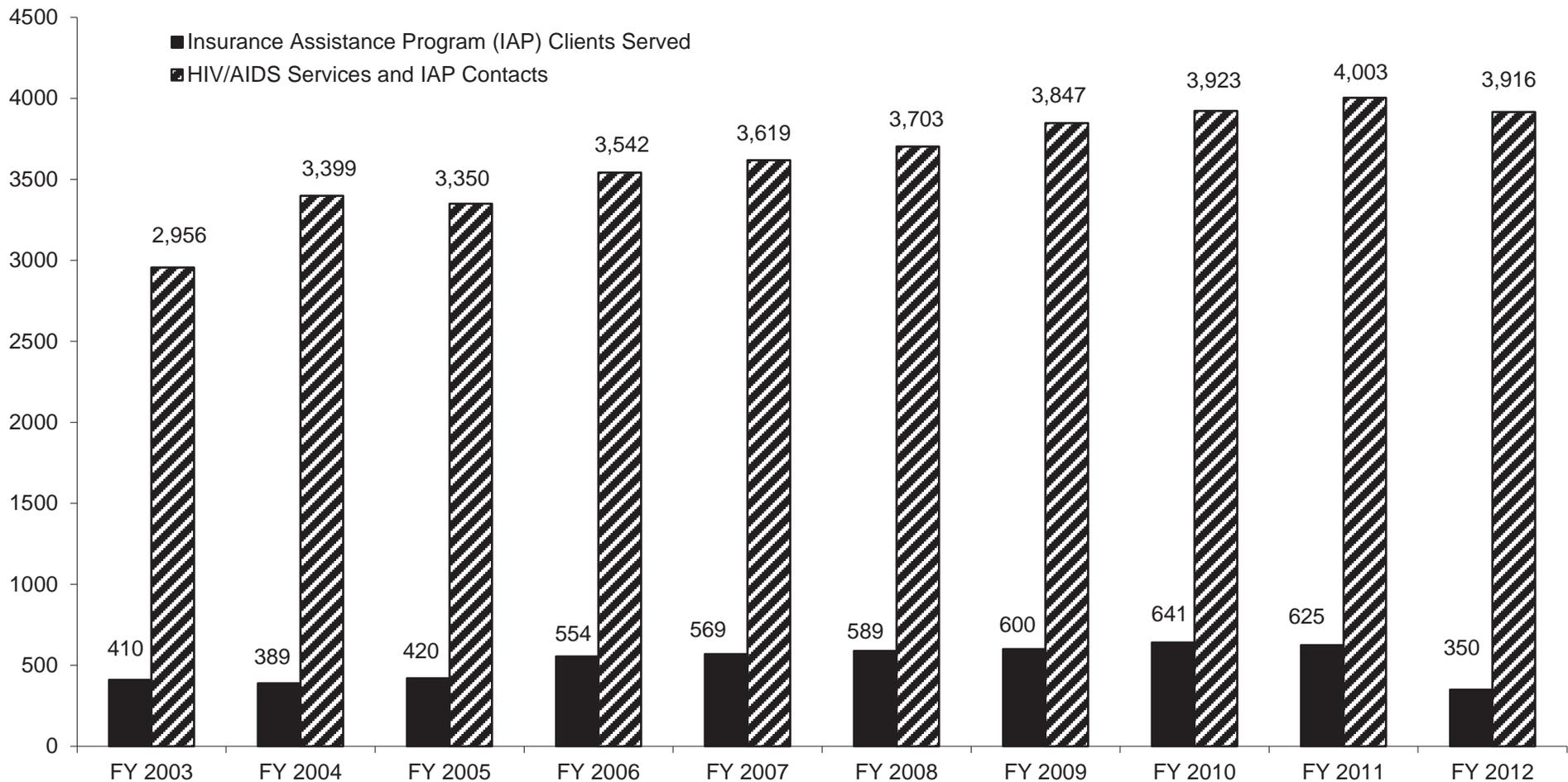
LEGAL BASIS

- DHS FY 2013 Appropriations Act, 2012 PA No. 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

HIV/AIDS services and IAP contacts and clients served (FY 2003 through FY 2012) are summarized in the following graph. In each case, contacts, HIV/AIDS services and IAP clients served essentially increased year-over-year from FY 2003 through FY 2011, before IAP clients served dropped by 46 percent in FY 2012. The drop in DHS client activity was directly linked to the transfer of IAP+ to DCH in March 2012. Before that date, DHS administered both IAP and IAP+. Still, DHS HIV/AIDS served remained at near record levels in FY 2012. Further, 350 IAP clients were served by DHS staff.

DEPARTMENT OF HUMAN SERVICES INSURANCE ASSISTANCE PROGRAM (IAP) CLIENTS SERVED & HIV/AIDS SERVICES AND IAP CONTACTS FY 2003 - FY 2012



Note: Contacts and clients served have essentially increased year-over-year since FY 2003. The Insurance Assistance Program consisted of two programs: the DHS Insurance Assistance Program (IAP) and the DHS Insurance Assistance Program Plus (IAP+). As of March 1, 2012, IAP+ was transferred to DCH, therefore the numbers above reflect the number of clients for the Insurance Assistance Program (IAP) only. IAP served 350 clients in FY 2012.

Department:
Human Services

Appropriation Unit:
Executive Operations

Program:
Michigan Community Service Commission

PROGRAM STATEMENT

The Michigan Community Service Commission (MCSC) builds a culture of service by providing vision and resources to strengthen communities through volunteerism. In FY 2013, the MCSC will grant more than \$7.5 million in federal funds to local communities for volunteer programs and activities. These federal funds are helping financially struggling nonprofit organizations and schools meet the growing social need in communities through service and volunteerism. The MCSC funds 23 AmeriCorps programs and six Volunteer Generation Fund grantees. The Governor's Service Awards and Mentor Michigan are also MCSC programs. In FY 2013, the GF/GP investment of \$715,300 will leverage nearly \$12 million in federal funds. A 25-member board appointed by the governor governs the MCSC. The MCSC maintains Michigan's position as one of the country's leading state service commissions.

- **Michigan's AmeriCorps:** AmeriCorps is a competitive grant program for organizations to host teams of individuals, called members, who provide intensive, results-driven service to meet community needs across Michigan. In FY 2013, more than 1,200 AmeriCorps members will provide foreclosure prevention and financial literacy education, help ex-offenders re-enter society, help homeless individuals and families find permanent housing, organize literacy and tutoring programs for underperforming youth, mentor and support youth from disadvantaged circumstances, preserve our environment, build houses, feed the hungry, recruit volunteers, and more. Additionally for the first time in FY 2013, the MCSC is funding a statewide AmeriCorps grant through the Michigan Department of Veterans and Military Affairs which will utilize members to identify the state's veterans and assist them in obtaining the proper care and assistance they deserve through state and federal benefits. In return for their service, AmeriCorps members receive a modest living stipend and an education award which can be used to pay for college or vocational training programs, or to repay student loans. As a result, AmeriCorps serves as a pathway to employment for many members
- **Volunteer Michigan:** Volunteer Michigan is a statewide initiative that facilitates the increased recruitment, engagement and tracking of volunteers to address key issues in communities across Michigan. It increases the capacity and infrastructure of organizations to more effectively engage volunteers, including those from specific population groups such as adults age 55 years and older and skilled volunteers. The Volunteer Michigan initiative currently provides funding to seven Michigan grantees that are test-piloting a series of volunteer strategies to address local public health or public safety issues. These seven demonstration grantees will be used to help Volunteer Michigan build a best practices model for the rest of the state that will support volunteers and community partners and meet local needs by engaging citizens.
- **Mentor Michigan:** Mentor Michigan supports more than 250 mentoring organizations. These organizations match caring adults with young people in need of role models. Mentor Michigan strengthens those organizations through training, research and partnerships with businesses, faith-based and nonprofit organizations, schools, colleges and universities, and government. Mentor Michigan also elevates public awareness of the positive impact of mentoring and the need for more quality mentors.
- **Governor's Service Awards:** The Governor's Service Awards honor and celebrate Michigan citizens who volunteer their time to make communities better places to live. The annual celebration includes a private reception hosted by the governor followed by an awards presentation. The awards are given in eight categories highlighting the diverse nature of volunteers in our state. People from across Michigan nominate their friends, colleagues, family, and neighbors for these prestigious awards.
- **Volunteer Recruitment and Promotion:** The MCSC is the lead state agency in volunteer recruitment and promotion efforts. The MCSC works with partners to recruit volunteers and promote volunteer efforts through the Martin Luther King Jr. National Day of Service, Global Youth Service Day and the September 11 National Day of Service and Remembrance – among others.

Department of Management and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Executive Operations	Program: Michigan Community Service Commission

- Disaster Response: The MCSC is also responsible for recruiting and coordinating volunteers in times of disaster. They work closely with DHS and emergency management personnel to coordinate these efforts.

SOURCES OF FINANCING

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

LEGAL BASIS

- The MCSC was established by Executive Order in 1991
- Michigan Community Service Commission, 219 PA 1994
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / RESULTS:

The MCSC granted nearly \$8 million in federal funds to local communities for volunteer programs and activities in FY 2012.

- Michigan's AmeriCorps: In 2012, Michigan's AmeriCorps members accomplished more than 1,000,000 service and training hours; members recruited, placed and supported more than 15,000 community volunteers; members also earned more than \$3.5 million in education awards. In addition, members performed the following services in communities across Michigan:
 - Members provided 9,744 individuals with housing and foreclosure assistance services including connecting them to various resources that allowed them to remain in their homes. Members also provided rental/housing assistance, employment and Section 8 voucher assistance to 1,760 homeless men, women and children.
 - Other AmeriCorps members assisted more than 5,000 children in tutoring and/or literacy services – with a high percentage of those children showing an increase in academic skills as a result of this service.
 - More than 4,400 individuals received job training or other skill-building services from AmeriCorps members and more than 2,300 individuals received placement services.

Department:
Human Services

Appropriation Unit:
Executive Operations

Program:
Michigan Community Service Commission

- Outreach and training services performed by members built community resource navigation capacity in 459 partner community organizations across Michigan with 99.17 percent of clients surveyed stating that they increased their knowledge of benefits.
- **Mentor Michigan:** More than 250 mentoring programs were supported through awareness-building, mentor recruitment, partnership development, training and recognition; there are more than 17,500 active mentors in Michigan, more than double the number since FY 2004. Michigan mentoring programs reported more than 23,500 children were matched with a caring adult.
 - Young people who participate in mentoring relationships often experience long-term benefits and face better outcomes in the following areas: educational attainment and the desire to complete high school and attend college, future employment and community engagement, good mental health that leads to higher self-esteem and life satisfaction, and reduced presence of problem behavior and criminal offending.
- **Volunteer Michigan:** By granting \$479,554 in FY 2012 to seven demonstration grantees, Volunteer Michigan was able to pilot service as a strategy to address local health and public safety issues while involving nearly 13,000 participants in various volunteer programs and projects throughout the state.
 - Volunteer Michigan capitalizes on specific strategies to increase volunteerism in the state, including National Days of Service. In addition, Volunteer Michigan and its grantees establish community collaboratives to improve the use of volunteers and leverage resources, utilize technology to enable full cycle volunteer engagement and management, and offer critical training and capacity building for volunteer connector organizations to enhance their work. The full-cycle volunteer engagement and management technology, called Hands-On-Connect, is currently available through 14 volunteer centers located across Michigan. These local systems help to both recruit local volunteers and fill local volunteer needs while supporting a statewide volunteer portal through the Michigan Community Service Commission.

Volunteering is critical to Michigan. As part of the most recent Volunteering in America research, it was found that in 2011, nearly 2.1 million Michigan residents volunteered their time in service to their communities. These volunteers' efforts are widespread and impact a variety of individuals and/or organizations. Some volunteer activities are ongoing and some are short-term commitments such as National Days of Service activities. In 2011, more than 76,096 Michigan citizens were engaged in 180 service projects on National Days of Service.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Michigan Rehabilitation Services

PROGRAM STATEMENT

MRS partners with individuals to achieve quality employment outcomes and independence for individuals with disabilities. Vocational rehabilitation services are specific to an individual's disability, related functional limitation(s) and the essential job functions of a position. Eligibility for vocational rehabilitation services is determined by vocational counselors who are required to have a master's degree in rehabilitation counseling or related field.

Eligibility Factors

Vocational Rehabilitation Customer:

Federal regulations require three conditions to be met for persons to be eligible for vocational rehabilitation services: 1) have a physical or mental disability that constitutes or results in a substantial barrier to employment, and 2) can benefit from vocational rehabilitation services, and 3) want to work. Eligibility decisions must be made by rehabilitation counselors employed by the state; federal rules require persons receiving Social Security Disability benefits due to their personal disability to be presumed eligible.

Independent Living Customer:

Individuals with severe physical, mental, cognitive, or sensory impairment(s) whose abilities to function independently in their family or community and for whom the delivery of services will improve their abilities and independence.

Business Customer:

Private sector companies, governmental agencies and non-profit agencies who desire to develop and/or expand a diverse work force by utilizing skills and abilities of MRS vocational rehabilitation customers, while retaining employees with disabilities and promoting wellness and safety. Business customers may be established or are developed through various marketing and networking strategies. This partnership recognizes that the success and growth of business directly benefits our vocational rehabilitation customers in terms of employment opportunities. A broad range of services are offered in this dual relationship which can include: 1) Prevention/At Risk, 2) Employee Retention, 3) Return to Work, 4) Accommodation/Accessibility and 5) Recruitment/Acquisition of job candidates.

Personal Assistance Services Customer:

Individuals with disabilities must meet five criteria for the reimbursement program: 1) have a significant disability which requires personal assistance to perform routine daily living activities; 2) be employed or self-employed or have a bona fide offer of employment for an average of at least 24 hours per week, earning at least minimum wage; 3) require no less than 5 hours per week of personal services to begin or maintain employment; 4) have the ability to employ and manage personal assistants, maintain records and file timely reports; and 5) be unable to cover the full cost of personal assistance from income and other resources. Program participants must pay 15 percent of their gross income above 300 percent of current federal poverty level for personal assistance services.

SOURCES OF FINANCING

The primary source of funding for MRS is the United States Department of Education, Rehabilitation Services Administration and Vocational Rehabilitation Title I grant, which requires a 21.3 percent state match.

Department:
Human Services

Appropriation Unit:
Adult and Family Services

Program:
Michigan Rehabilitation Services

- DED-OSERS, Rehabilitation Services, Vocational Rehabilitation, State Grants, Title I
- DED-OSERS, Rehabilitation Services, Vocational Rehabilitation, State Grants, Supported Employment, Title VIB
- DED-OSERS, Rehabilitation Services, Vocational Rehabilitation, State Grants, Independent Living, Title VIIB
- DED-OSERS, Rehabilitation Services, Vocational Rehabilitation, State Grants, Long Term Training, Title VIII
- DED-OPSE, Rehabilitation Services, Vocational Rehabilitation, State Grants, PELL Grant, Title IVA Subpart 1
- DED-OPSE, Rehabilitation Services, Vocational Rehabilitation, State Grants, SEOG, Title IVA Subpart 3
- State GF/GP
- Restricted Funds
- Private Gifts, Bequests, Donations
- Second Injury Funds
- Local Vocational Rehabilitation Match
- HHS-SSA, Supplemental Security Income

LEGAL BASIS

- 1) The Vocational Rehabilitation Programs are state and federal programs, authorized under the Rehabilitation Act of 1964 (P.A. 232) as referenced in Michigan Codified law, Miscellaneous statues 395.81 through 395.90. The federal enabling legislation is the Rehabilitation Act of 1973, as amended. Compliance with EDGAR/OMB Circulars and policy is required.
- 2) Michigan Codified law, Miscellaneous Statutes, 395.81 through 395.90. Specific program authorization: Senate Concurrent Resolution No. 822 of 1984.
- 3) Executive Order Number 2012-10, Signed June 27, 2012 (moving program administration of Michigan Rehabilitation Services from the Michigan Department of Licensing and Regulatory Affairs to the Michigan Department of Human Services).
- 4) In order to receive federal funding, MRS must meet at least five of seven Federal Evaluation Standards and Performance Indicators. Michigan has met all (or all but one) for the past several years. FY 2011 results are summarized below. FY 2012 data are not available.

MRS Performance on Federal Evaluation Standards and Performance Indicators – FY2011

Performance Measures	Federal Standards	MRS Performance
Number Employment Outcomes	Michigan Benchmark = 7,375	7,705
Percent Employed	≥55.8%	50.5%
Employed Competitively	≥72.6%	99.0%
Significantly Disabled	≥62.4%	95.8%
Earnings Ratio	≥0.52	0.59
Self-Support	≥53.0%	61.2%
Minority Ratio	≥0.80	0.83

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Adult and Family Services	Program: Michigan Rehabilitation Services

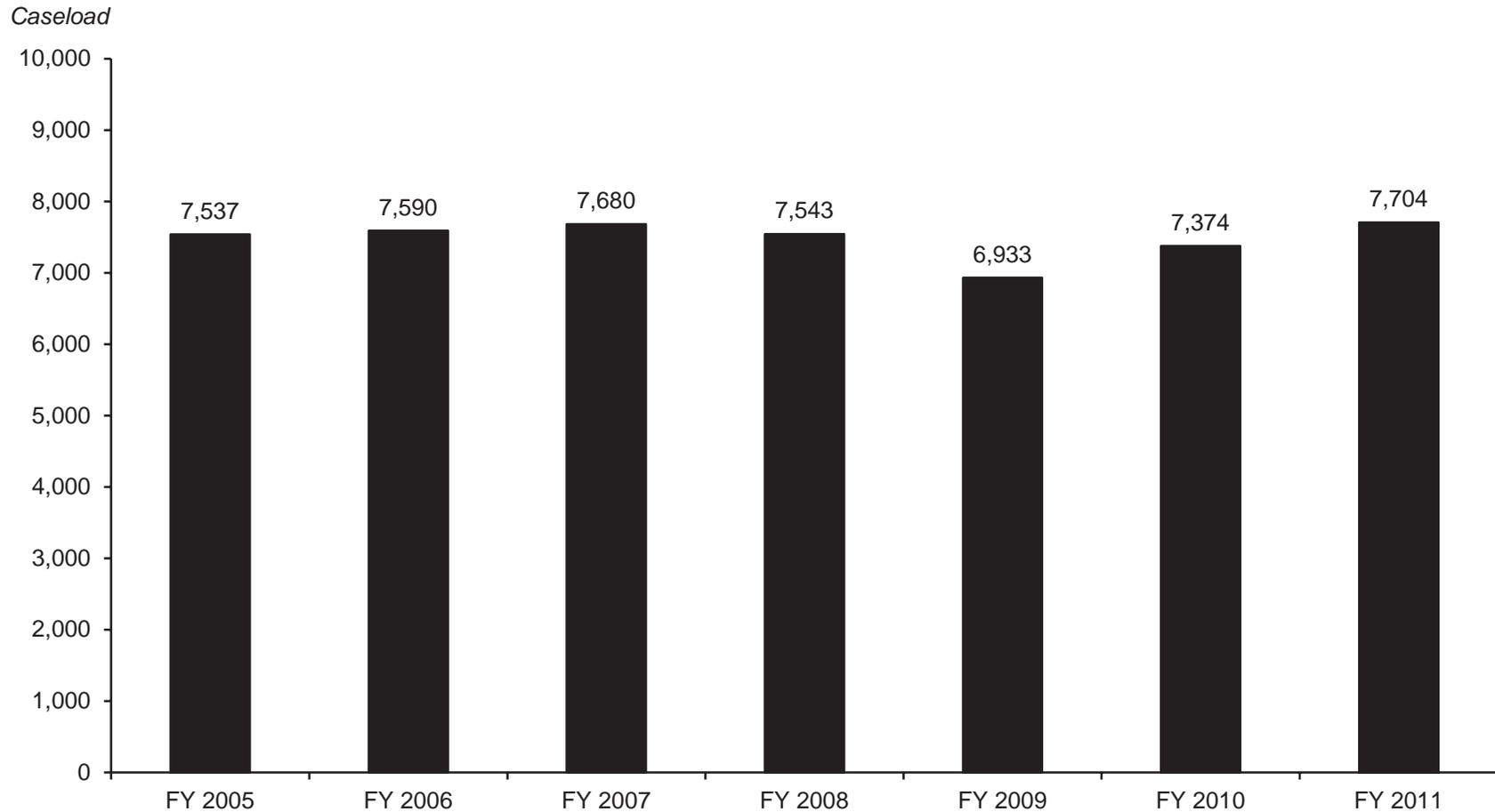
PROGRAM EFFECTIVENESS/PROGRAM OUTCOMES

A key measurement of the agency’s effectiveness is the number of applicants who complete an individualized service plan, receive needed vocational rehabilitation services, obtain employment paying at least the minimum wage and remain on the job for at least 90 days. This is referred to as an “employment outcome.” Since FY 2005, MRS has achieved an average of 7,480 employment outcomes each fiscal year. In FY 2011, MRS ranked third in the nation on this variable among the 24 state general rehabilitation agencies. Michigan data for FY 2005 through FY 2011 are summarized in the first graph of this MRS narrative section. FY 2012 comparative data are not yet available.

Another key measurement of the agency’s effectiveness is the “customer satisfaction rate,” based on responses to nine questions MRS customers are asked. Questions range from customers’ involvement in setting employment goals to their satisfaction with services actually received. As shown in the second graph following this narrative section, from FY 2005 through FY 2011 satisfaction rates averaged 82 percent. The customer satisfaction rate represents the proportion of respondents who rated their overall MRS experience as one in which they were “very satisfied” or “satisfied.”

DEPARTMENT OF HUMAN SERVICES MICHIGAN REHABILITATION SERVICES (MRS)

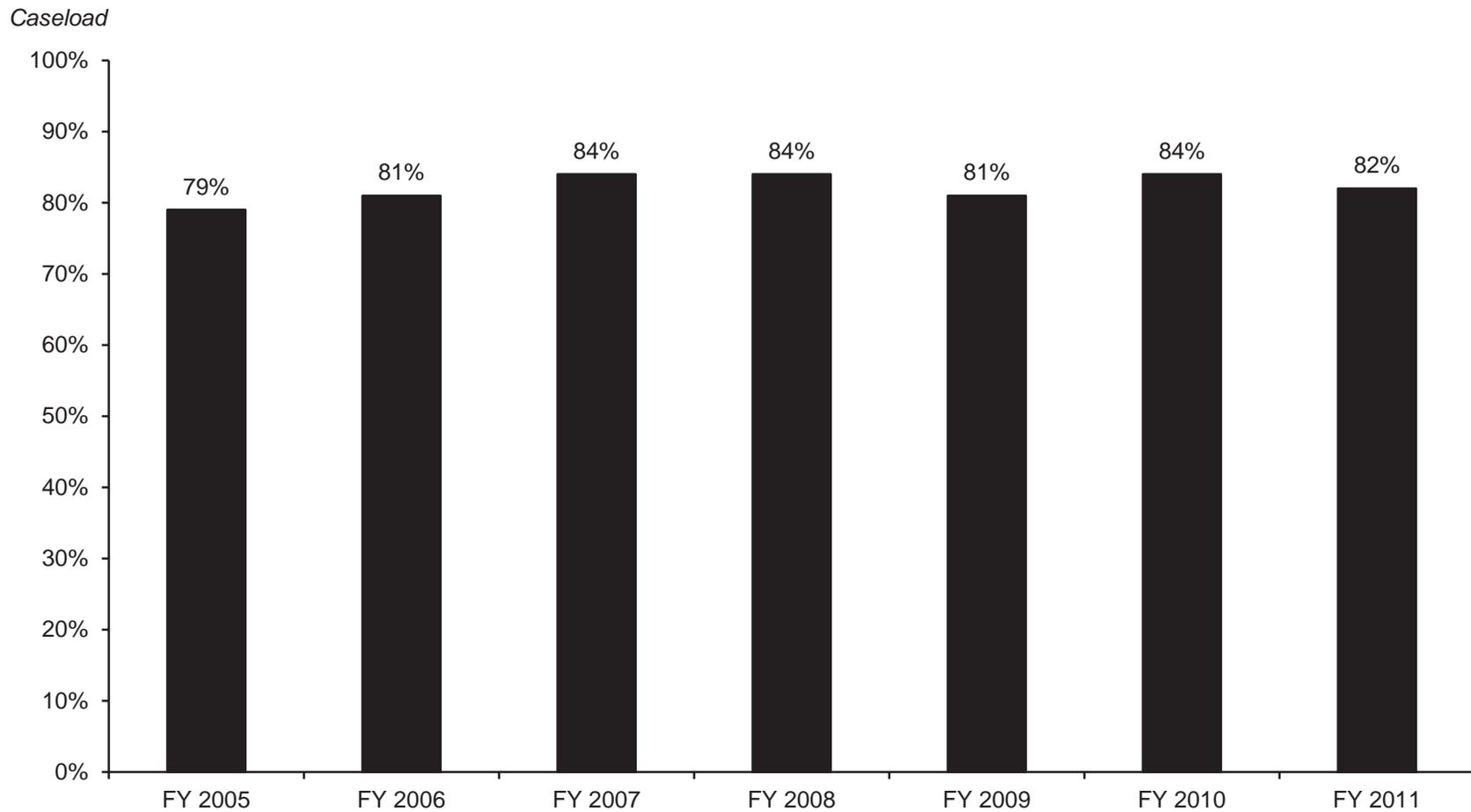
Employment Outcomes¹ FY 2005 - FY 2012



¹ An Employment Outcome results when an applicant: 1) completes an individualized service plan; 2) receives vocational services; 3) obtains employment paying minimum wage (or higher) and remains on the job for 90 days (or longer). **NOTE:** FY 2012 data are not yet available.

DEPARTMENT OF HUMAN SERVICES MICHIGAN REHABILITATION SERVICES (MRS)

Customer Satisfaction Rates¹ FY 2005 - FY 2012



¹ Percentage of respondents who rated their overall MRS experience to be "Satisfied," or "Very Satisfied." **NOTE:** FY 2012 data are not yet available.

Department of Technology, Management, and Budget		PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Migrant Affairs	

PROGRAM STATEMENT

DHS has been designated the lead state agency responsible for the assessment, development and coordination of services for Michigan’s estimated 45,800 migrant and seasonal farmworkers, their family members and dependents. The number of migrant and seasonal farmworkers, family and dependents is estimated to total more than 90,000. DHS responsibilities are accomplished through the Office of Migrant Affairs (OMA). OMA provides a quick-response, human services safety net through a DHS staff of more than 50 seasonal and full-time bilingual (English/Spanish) workers. These staff/workers are housed in 23 counties, with some offices serving more than one county.

OMA enhances the Delivery of DHS Services to Migrant Families By:

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

OMA Facilitates Statewide Coordination of Migrant Services Through:

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

Client Characteristics

- Population estimate: More than 90,000 migrant farmworkers, non-working family members and dependents. Michigan has the sixth-largest migrant worker population in the nation (behind California, Texas, Florida, Washington and North Carolina). Previously, Michigan ranked as one of the top five states with migrant workers.
- Michigan’s migrant and seasonal farmworker student populations are from the following states: 31 percent from Florida; 26 percent from Texas; 20 percent from Michigan. The remaining 23 percent are from other states and countries.
- An estimated 41,000 children and youth are younger than 20 years of age, 31 are from migrant families and 10,300 are from seasonal farmworker families.
- In 2012, DHS programs were provided to 12,092 migrant and seasonal farmworkers and family members. Food Assistance, Medicaid and Child Care were the most common DHS programs.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Migrant Affairs

SOURCES OF FINANCING

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

LEGAL BASIS

- Federal Social Security Act
- DHS 2013 Appropriations Act, PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES (FY 2012)

- In 2012, DHS programs were provided to 12,092 migrant and seasonal farmworkers and family members. Food Assistance, Medicaid and Child Care were the most common DHS programs.
- OMA sought and secured funding for a new, temporary emergency assistance program for migrant farmworker families. MSHDA provided \$172,000 in funds for a temporary emergency rent assistance program for migrant farmworker families impacted by the poor crops this season. OMA coordinated with the DHS Bureau of Community Action for nine local Community Action Agencies in west Michigan to make payments to eligible farmworker families. Data on the number of families who received the emergency rent assistance are not yet available.
- OMA chaired Interagency Migrant Services Committee meetings each month and secured the involvement of key partners for collaborative service provision to migrant and seasonal farmworkers: United States Department Of Labor Wage & Hour Division, Michigan Department of State and Michigan State University’s C.S. Mott Group for Sustainable Food Systems, Western Michigan’s College Assistance Migrant Program, and Ferris State University’s Center for Latino Studies.
- OMA co-chaired the Migrant Child Task Force with a partner nonprofit and coordinated outreach visits to approximately 25 migrant labor camps and distribution of over 70 car seats and booster seats and over 100 each of first aid kits, sanitizers, blankets, backpacks, toys and books.
- OMA improved communications with Migrant Program staff by developing a Migrant Program SharePoint site.
- OMA worked with various policy offices to address policy that adversely affects migrant and seasonal farmworker families.

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES (Ongoing)

- OMA is overseeing a statewide update to the 2006 enumeration of migrant and seasonal farmworkers and dependents, which is funded by a federal HUD grant obtained by the Michigan Department of Civil Rights. OMA coordinated the release of an Internet survey to over 300 service providers, state and federal agencies and agricultural producers. OMA facilitated the researcher’s access to data in other state departments and arranged meetings with DHS Migrant Program staff, other state and federal agencies and agricultural groups. The enumeration update report, which will provide an estimate of all farmworkers and dependents in each Michigan county, will be released in April 2013.
- OMA is working in partnership with the Michigan Department of Civil Rights to develop a progress report on the recommendations from the MDCR Commission released in March 2010. The 3-year progress report will be presented to the MDCR Commission in March 2013.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Local Office Staff and Operations	Program: Migrant Affairs

- OMA is revamping training for Migrant Program staff, to be conducted in March and April 2013 for all Migrant Program staff statewide.
- OMA is carrying out a program goal of strengthening the nine Migrant Resource Councils throughout the state. OMA has visited four MRCs, provided technical assistance to three and is developing training for MRC officers to be held in March 2013.
- OMA is implementing recommendations from the Bilingual Task Force, which OMA convened from 2009-2011. OMA is assessing the current foreign-language capabilities of DHS staff in all county offices and will coordinate with Field Operations for target increases in staff with foreign-language capabilities.

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department of Human Services	Appropriation Unit Local Office Staff and Operations	Program Native American Affairs

PROGRAM STATEMENT

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

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

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

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

SOURCES OF FINANCING:

- Title XX Social Services Block grant.

LEGAL BASIS:

- Federal Indian Child Welfare Act of 1978, Public Law 95-608
- Federal Indian Child Protection and Family Violence Protection Act, Public Law 101-630
- Michigan Juvenile Court Rules-subchapter 3.980

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION		Fiscal Year 2014
Department of Human Services	Appropriation Unit Local Office Staff and Operations	Program Native American Affairs	

- Presidential Memorandum on Tribal Consultation (2009) Governor Granholm Executive Directive 2004-5)).
- Governor Snyder Executive Directive 2012-2.
- DHS FY 2013 Appropriation Act, 2012 PA Act 200, Article X

PROGRAM EFFECTIVENESS:

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

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

Department of Technology, Management, and Budget	PROGRAM DESCRIPTION	Fiscal Year 2014
Department: Human Services	Appropriation Unit: Community Action & Economic Opportunity	Program: Weatherization Assistance

PROGRAM STATEMENT

The goal of the Weatherization Assistance Program (WAP) is to assist low-income households with reducing their energy consumption and lowering their energy bills. Michigan’s WAP is a federally funded, residential energy conservation program. The program provides free home energy conservation services to eligible Michigan homeowners and renters. Community Action Agencies (CAAs) and one Limited Purpose Agency (LPA) provide weatherization services at the local level throughout the state. Michigan’s 29 CAAs and one LPA serve all 83 counties. **NOTE:** CAAs are listed on the following page.

SOURCES OF FINANCING

- Federal Department of Energy Weatherization Assistance Program funds.

LEGAL BASIS

- Weatherization Assistance Program for Low-Income Persons, Title 10, Part 440
- DHS FY 2013 Appropriations Act, 2012 PA 200, Article X

PROGRAM EFFECTIVENESS / PROGRAM OUTCOMES

Weatherized homes typically realize a 20 percent to 25 percent reduction in energy bills. This results in savings of about \$300 per year, per household. In the 2011 program year¹, just over 18,000 low-income Michigan households received weatherization services. 2011 funding included a significant amount of American Recovery and Reinvestment Act funds resulting in substantial program production increases. Services provided may include wall insulation, attic insulation and ventilation, foundation insulation, air leakage reduction, smoke detectors, dryer venting, furnace repair/replacement, water heater repair/replacement, combustion appliance testing, and energy conservation education. To date, over 316,000 low-income homes have been made more energy-efficient.²

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

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

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