STATE OF MICHIGAN

Social Services Block Grant

Intended Use Plan and Pre-Expenditure Report

Fiscal Year 2017

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I. State/Federal Fiscal Year covered in Pre-expenditure Plan (REQUIRED)

Specify the fiscal year, including start and end dates, covered in the pre-expenditure plan.

Fiscal Year (select one):

☑ State
☐ Federal

Dates (start and end date of fiscal year):

Start Date: 10/01/2016
End Date: 09/30/2017
Ms. Marsha Werner  
Social Services Block Grant Team Lead  
Office of Community Services  
Administration for Children and Families  
U.S. Department of Health and Human Services  
370 L'Enfant Promenade, S.W.  
Washington, DC 20447

Dear Ms. Werner:

Enclosed is the Social Services Block Grant Intended Use Plan and pre-expenditure report for the State of Michigan. The report covers Federal Fiscal Year 2017, which runs from 10/1/16 to 09/30/17.

The State SSBG official receiving the SSBG Grant Award is:  
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The Authorized Organizational Representative is:  
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If you have any questions regarding this report, please contact MDHHS-BudgetServices@michigan.gov.

Sincerely,

[Signature]

Chris Stickney  
Analyst, Centralized Grants Management
III. Public Inspection

The governor of Michigan has designated the Michigan Department of Health and Human Services as the state agency to receive and administer the Title XX Social Services Block Grant. The department has produced this plan to meet the requirements for receiving Title XX Social Services Block Grant funds and to facilitate public comment on the services to be supported by Title XX funds.

A public hearing for the SSBG State plan was held on July 30, 2016. The draft plan was published and made electronically available for public comment and review during the month of July 2016, and announced to the Michigan Department of Health and Human Services local offices, the Legislature, and other interested groups and individuals for comment. A designated electronic mailbox (DHS-SSBGMail@michigan.gov) was created to receive comments from interested groups and individuals on the draft plan.

A copy of the press release and newspaper articles is provided in Appendix A.
IV. Narrative

A. Administrative Operations

1. State Administrative Agency

Agency Designated to Administer SSBG Program:
Michigan Department of Health and Human Services (MDHHS)

Vision:
Develop and encourage measurable health, safety and self-sufficiency outcomes that reduce and prevent risks, promote equity, foster healthy habits, and transform the health and human services system to improve the lives of Michigan families.

Guiding Principles:
- Ensure that Michigan youth are healthy, protected, and supported on their path to adulthood.
- Safeguard, respect, and encourage the wellbeing of Michigan adults in our communities and our care.
- Support families and individuals on their road to self-sufficiency through responsive, innovative, and accessible service delivery.
- Transform the healthcare system and behavioral health coordination to improve outcomes for residents.
- Promote and protect the health, wellness, and safety of all Michigan residents.
- Strengthen opportunities, promote diversity, and empower our workforce to contribute to Michigan’s economic development.

Agency Responsibilities:
MDHHS provides assistance to clients in the following areas: food, child care, cash, medical and emergency relief. MDHHS is also responsible for providing services for the following programs: child support, foster care and adoption, abuse and neglect, juvenile justice, Native American Affairs, migrant and refugee programs, rehabilitation services, adult and children’s services, disability determination, domestic violence prevention and family and community services.

Agency Goals and Objectives:
The following are the goals and objectives of MDHHS:

Goal 1: Children exit foster care to permanent placements.
   Objective 1. 83% of children exiting foster care each month to a permanent placement.

Goal 2: Children free from recurrence of maltreatment.
   Objective 1. 94.60% of child victims of abuse and/or neglect not victimized again in a
6-month period.

Goal 3: Food assistance payment accuracy rate.
   Objective 1. 94% of benefits accurately issued to clients each month.

Goal 4: Children free from abuse or neglect in foster care.
   Objective 1. 99.68% of child victims of abuse and/or neglect not victimized again by a
   foster parent or child caring institution staff person.

Goal 5: Children adopted within 24 months.
   Objective 1. 36.60% of children adopted within 24 months of latest removal from home.

Goal 6: Food Assistance Program recoupment from client error or intentional fraud.
   Objective 1. $2,700,000 in benefits retained annually by the state for recovery of Food
   Assistance Program client error and Intentional Program Violation claims.

2. State Offices/Departments

   Below are descriptions of MDHHS program areas where Title XX funds are intended to
   be allocated:

   Adult Protective Services: 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.

   Adult Community Placement: Provides services that assist in achieving the least
   restrictive community-based care settings for adults who require care in licensed
   community placement: Adult Foster Care facilities or Homes for the Aged.

   Adoption Services Program: Provides for adoption planning and placement of children
   who are permanent state 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.

   Children's Foster Care: 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 MDHHS for placement, care and
   supervision. Also several programs are provided to support older youth in foster care
   and youth that have exited foster care.

   Michigan Youth Opportunities Initiative: Provides improved outcomes for youth
   transitioning from foster care to adulthood by bringing 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.
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, provides services for the children and family as needs are identified and, if necessary, initiates actions needed to protect children in the home.

Runaway and Homeless Youth Services: Provides crisis-based services to runaway youth ages 12-17 and their siblings and families, including crisis intervention, community education, prevention, case management, counseling, skill building and placement. Provides services to homeless youth ages 16-21 that require support for a longer period of time including crisis management, community education, counseling, placement and life skills.

Child Welfare Licensing: Protects vulnerable children by regulating and consulting with licensees. This industry is regulated through initial licensure, original and renewal inspections, complaint investigations, approval of corrective action plans and taking disciplinary action as needed to protect individuals served.

Community Resource Program (CRP): Offers numerous services and locally customized programs to meet community needs with the assistance of volunteers, donations and grant funding. MDHHS employs Community Resource Coordinators who focus on building relationships to provide additional services to families within the community. Some coordinators are housed within local schools, bringing services directly to clients and low income families. The CRP responds to the unique and changing needs of MDHHS staff, recipients and community partners. MDHHS volunteers provide services in the following areas:

- Transportation;
- Peer Counseling;
- Tutoring;
- Child Care; and
- Community Engagement and Partnerships.

Domestic and Sexual Violence Prevention and Treatment: Provides funding for domestic violence shelters, sexual assault programs, advocacy and services.

Migrant Affairs: Provides policy and program development, assessment, coordination of services and advocacy for Michigan's migrant and seasonal farmworkers, their family members and dependents through specialized MDHHS field staff, the Interagency Migrant Services Committee, and regional migrant resource councils.

Native American Affairs: Delivers a broad range of services to Michigan's American Indian and Alaska Native population, tribes, urban Indian organizations, MDHHS field staff, and private agency foster care providers (PAFC). Services provided include: policy and program development, resource coordination, advocacy, training and technical assistance, coordination of efforts to ensure implementation of applicable state and federal laws, and tribal consultation.
Juvenile Programs: Provides technical assistance, consultation, assessment services and training for state community-based juvenile justice programs and youth in state-operated residential facilities. Assessment services include providing educational services, vocational services, short-term assessment services, cognitive restructuring, family assistance, crises intervention and recreation.

Multicultural Services: MDHHS contractors provide information, referral, and advocacy services to low income Arab-American or Chaldean applicants or recipients of public assistance. Services include orientation of applicants to the American culture including legal, educational, economic, social, or health matters.

B. Fiscal Operations

1. Criteria for Distribution

SSBG funds constitute approximately 0.2% of total funding and about 2.7% of all federal funding for MDHHS. The distribution of SSBG funds is influenced by many factors, such as the availability of other federal, state and local funds; the availability of services from other federal or state agencies, private non-profit agencies, local agencies or family members; and the priorities of MDHHS.

2. Planning Process for Use and Distribution of Funds:

Temporary Assistance to Needy Families (TANF) regulations authorize the use of up to 10% of a state’s TANF grant to carry-out programs pursuant to Title XX of the Social Security Act.

TANF-transferred SSBG funds will support activities as described in this report subject to the federal requirement that TANF funds transferred to SSBG shall be used only for programs and services to children and their families whose income is below 200% of the federal income poverty guidelines.

3. Financial Operations System:

MDHHS uses a public assistance cost allocation plan to assign costs to federal and state fund sources for program administration and service delivery. Through the use of appropriate cost allocation methodologies, the department identifies eligible costs for federal funds.

Annually, the state has eligible claims in excess of its Title XX block grant and transfer funds. At that time, Title XX claims across all program areas are reduced to within the state’s available funding. Remaining costs are supported with state funds as is necessary. Allowable costs are directed to Title XX per this intended use plan.
C. Program Operations

1. SSBG Statutory Goals the State Plans to Achieve

SSBG Statutory Goals:

☒ 1. Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency

☒ 2. Achieving or maintaining self-sufficiency, including reduction or prevention of dependency

☒ 3. Preventing or remedying neglect, abuse or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating or reuniting families

☒ 4. Preventing or reducing inappropriate institutional care by providing for community-based care, home-based care or other forms of less intensive care

☒ 5. Securing referral or admission for institutional care when other forms of care are not appropriate, or providing services to individuals in institutions

2. Characteristics of Individuals to be Served

Definitions

Child: For MDHHS protective services programs, child is a person under 18 years of age (MCL 722.622(e)). For all other programs, child is an individual who is not emancipated under 1968 PA 293, MCL 722.1 to 722.6, who lives with a parent or caretaker, and who is either of the following:

(i) Under the age of 18.

(ii) Age 18 and a full-time high school student.

Adult: An adult in need of services is a vulnerable person not less than 18 years of age (MCL 400.11). *Note that there are additional Michigan statutes that define an adult as a person 18 years of age or older and a child as a person under 18 years of age.

Family: For limited purposes of the family independence program, family is defined in MCL 400.57 as a household consisting of a child and either a parent or stepparent of the child, or a caretaker of the child; a pregnant woman; a parent of a child in foster care.

Eligibility Criteria:
Adult Protective Services: Any adult who is reported as at risk of harm from abuse, neglect or exploitation, and there is a reasonable belief that the person is a vulnerable adult in need of protective services.

Adult Community Placement: Adults who are elderly, frail, physically handicapped, emotionally impaired or mentally ill.

Adoption Services Program: All children legally free for adoption under the agency’s care and supervision.

Children’s Foster Care: Children who have been abused and/or neglected, and who cannot remain in their family homes because they would be at risk of further harm.

Michigan Youth Opportunities Initiative: Youth 14-21 who are active in the foster care system or placed out of their home due to a finding of abuse and neglect. Youth ages 18-21 must have been in foster care on or after their 14th birthday, but are no longer under MDHHS supervision.

Children’s Protective Services: All children and families when any of the following conditions exist: a child is reported, known, or suspected to be in danger of abuse, neglect or exploitation by a person responsible for the child’s health or welfare; a child is without proper custody or guardianship; a child is adjudicated neglected and the court requests supervision by MDHHS in the child’s home; a child or family is referred for investigation.

Runaway and Homeless Youth Services: Youths, ages 12-20, who are voluntarily admitted for services and have run away from their caretaker, are contemplating running away, are homeless or have been thrown out of their homes, or are in crisis or in need of protection. Families of eligible youth may also receive services.

Child Welfare Licensing: Vulnerable children receiving services from licensed facilities including all child caring institutions, child placing agencies, foster family and foster family group homes, and juvenile court-operated facilities.

Community Resource Program: Children, adults and families that have been identified as needing services.

Domestic and Sexual Violence Prevention and Treatment: Adult victims of domestic violence and their children and sexual assault victims of any age.

Migrant Affairs: Migrant and seasonal farm workers and their family members and dependents.
Native American Affairs and Indian Outreach Services: People and/or families who self-declare as having American Indian or Alaska Native ancestry or are federally recognized tribal members and have developed or are at risk for the development of social, educational, and economic problems, particularly but not limited to: children, families, elders, low-income individuals and disabled persons.

Youth in Transition: Youth who are active in the foster care system, placed out of their home based on abuse and neglect, starting at age 14 and up to age 21; youth, ages 18 to 21, that have been in foster care on or after their 14th birthday but are no longer under MDHHS/Tribal supervision; a youth who has or had an open juvenile justice case and is placed in an eligible placement under the supervision of MDHHS.

Juvenile Programs: Adjudicated delinquent youth who have been committed under Public Act 150, 1974, or who are court wards ordered to the MDHHS for placement and care. Youth who are at risk of becoming delinquent because of home or community involvement.

Multicultural Services: Clients served are low income Arab-American or Chaldean applicants or recipients of public assistance.

Income Guidelines:

Adult Protective Services, Adult Community Placement, Adoption Services Program, Children’s Foster Care, Michigan Youth Opportunities Initiative, Children’s Protective Services, Runaway and Homeless Youth Services, Child Welfare Licensing, Community Resource Program, Domestic and Sexual Violence Prevention and Treatment Board, Native American Affairs, Indian Outreach Services, Migrant Affairs and Juvenile Programs are provided without regard to income.

Multicultural services require a person or family to have an income level 200% below the federal income poverty guidelines.

3. Types of Activities to be Supported

ADOPTION SERVICES

MDHHS provides permanent homes for Michigan Children’s Institute wards (permanent state wards) and permanent court wards under the supervision of the department. In certain situations, MDHHS may also provide a subsidy to assist in supporting the day-to-day care of the child, treatment of medical conditions, or both.

Services are provided to all children legally free for adoption under the care and supervision of MDHHS. The Department’s direct adoption services concentrate on special needs children including children who are members of sibling groups, children with physical and emotional handicaps and older children.
MDHHS ensures child welfare clients have access to health care services such as medical, dental and mental health. MDHHS provides medical, psychological and psychiatric services to clients of the Adoption Services. MDHHS contracts with a medical consultant who provides policy direction advice, trains MDHHS staff, administers the Health Advisory Resource Team, and meets with state partners on health related issues.

- SSBG Statutory Goal(s) Supported: 3
- Method of Delivery: Public and Private
- Geographic Area: Statewide

CASE MANAGEMENT

MDHHS administers and provides oversight of case management services throughout the state for MDHHS clients.

A. Adult and Child Welfare Case Management

MDHHS provides the daily administrative rate paid to child placing agencies that deliver foster care case management services on behalf of MDHHS. MDHHS supports the delivery of case management services and intervention by front-line staff, supervisors and program managers in Adult Services; Prevention; Adult and Children’s Protective Services (Maltreatment in Care, Centralized Intake); Foster Care (Health Unit/Liaison Officers, Michigan Youth Opportunities Initiative, Educational Planners, Child Welfare Financial Specialists, Permanency Resource Managers and Assistants, Peer Coaches); Foster Home Licensing; and Adoption. These case management services often include referrals to specific providers or direct intervention by the front-line staff in areas of health, education, independent living, housing, employment, parenting, transportation and counseling.

MDHHS also supports the organization and management of substantial reform efforts to improve child welfare case management and service delivery by developing an enhanced case practice model (MiTEAM); establishing and implementing a statewide child welfare continuous quality improvement system (with qualitative service review component); and improving the collection and evaluation of child welfare data. Due to a class action lawsuit in Michigan, Dwayne B. v. Snyder, additional monitoring activities occur by and through a federal court ordered contract with Public Catalyst Group to ensure the rights of child welfare clients under the care and supervision of MDHHS protected pursuant to the Dwayne B. Modified Settlement Agreement.

MDHHS provides training and education support to child welfare staff to ensure all child welfare professionals serving child welfare populations in the state have necessary and applicable initial and ongoing training in areas of child welfare service delivery and case management.

B. Migrant Program
MDHHS has been designated as the lead state agency responsible for the assessment, development and coordination of services for Michigan’s 90,700 migrant and seasonal farm workers, their family members and dependents, which includes an estimated 41,038 children and youth under the age of 20. MDHHS responsibilities for migrant and seasonal farm workers are accomplished through the Office of Migrant Affairs, the Interagency Migrant Services Committee, and nine regional migrant resource councils.

Case management workers throughout the state are augmented by seasonal and full time migrant program workers located in the counties with the largest number of migrant farmworkers. These staff are responsible for providing specialized case management services to migrant and seasonal farmworkers including assisting with child care, food assistance, Medicaid, emergency, and employment services.

In support of these services, migrant program staff also perform extensive outreach activities to locate unserved farmworkers and providing supportive services. They also help address other farmworker needs by collaborating with and making referrals to other migrant service providers who can help with employment services, job skills training programs, healthcare providers, housing services, free legal services, migrant education, English as a Second Language classes and GED programs.

The Office of Migrant Affairs provides specialized training on migrant assistance payments case management, MDHHS migrant policy and outreach to migrant and seasonal farm workers and their family members receiving MDHHS services.

- SSBG Statutory Goal(s) Supported: 1, 2, 3, 4
- Method of Delivery: Public and Private
- Geographic Area: Statewide

C. Native American Affairs

The Office of Native American Affairs (NAA) serves as MDHHS’ avenue to comply with federal and state requirements for consultation with American Indian tribes regarding all state plans, programs, legislative changes, and policy changes that impact Native American Indian children and families.

NAA delivers a broad range of education and training services to Michigan’s approximate 130,000 American Indian population, tribes, urban Indian organizations, and department or private agency foster care field staff including, but not limited to: child welfare/direct assistance policy and program development, client resource coordination, advocacy, training and technical assistance, cultural and educational linkages (resource guides, back to school backpacks, conferences, and foster care youth/recruitment incentives), coordination of efforts to ensure implementation of applicable state and federal laws including the federal Indian Child Welfare Act (ICWA) and Michigan Indian Family Preservation Act (MIFPA) pertaining to American Indian/Alaska Native persons, and tribal consultation annually or as requested by tribes respectively.
MDHHS supports coordinated statewide efforts and collaborations with other state entities to ensure the safety, permanency, and well-being of Indian children and families in Michigan, including: Tribal State Partnership, Urban Indian State Partnership, Michigan Tribal Child Care Task Force, Regional Indian Outreach Worker Meetings, Child Welfare Training Institute, State Court Administrative Office, Court Improvement Program, Statewide Task Force and Tribal Court Relations Subcommittees; tribal and urban Indian organization site visits.

D. Indian Outreach Services
Indian Outreach Services (IOS), through coordination and support from the MDHHS Office of Native American Affairs assists Indian people with problems of a social, education, psychological, physical, economic and/or cultural nature to improve their quality of life. Indian Outreach Workers (IOWs) who share or have a knowledge of the values, traditions, customs, and language of the Indian community assist American Indian/Alaska Native families to attain self-sufficiency with a program focus to preserve, rehabilitate, strengthen and reunite families. IOWs provide information and referral services, homemaker services, serve as a liaison between the Native American community, state and local agencies, Indian centers, schools and the non-Native American community.

E. Multicultural Services
Information, referral, and advocacy services are provided to low income Arab-American or Chaldean applicants or recipients of public assistance. Services include orientation of applicants to the American culture including legal, educational, economic, social, or health matters. Adults are oriented to the agency’s PATH requirement in order to assist them in fulfilling the responsibility to their families and MDHHS program requirements. Individuals are assisted in determining the appropriate direction to achieve gainful employment.

- SSBG Statutory Goal(s) Supported: 1, 2, 3, 4
- Method of Delivery: Public and Private
- Geographic Area: Statewide

COUNSELING SERVICES

Therapeutic counseling services are provided to MDHHS clients receiving services from a wide variety of MDHHS programs, including Juvenile Justice, Children’s Protective Services, Foster Care and Cash Assistance programs. Counseling services include clinical, outreach and group counseling.

- SSBG Statutory Goal(s) Supported: 1, 2, 3, 5
- Method of Delivery: Public and Private
- Geographic Area: Statewide

FOSTER CARE SERVICES - ADULTS
Adult Community Placement (ACP)
ACP Program provides 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. Post-placement/follow-up services are also provided, as are transitional services for individuals relocated when nursing homes close.

MDHHS 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. Specific ACP services can include: case management, counseling, education and training, health-related services, information and referral, money management, pre-placement services, post-placement services, and protection. MDHHS workers authorize personal care supplement payments each month to the AFC/HA provider for Medicaid clients residing in these facilities.

- SSBG Statutory Goal(s) Supported: 1, 2, 3
- Method of Delivery: Public
- Geographic Area: Statewide

FOSTER CARE SERVICES - CHILDREN

A. Children's Foster Care Program
MDHHS provides foster care placement activities for children who have been abused and/or neglected or who cannot remain in their family homes because they would be at risk of further harm. MDHHS provides temporary supervision of abused or neglected children when deemed necessary by the family court. MDHHS provides the following services:

- Maintains the child in the family home when possible and assists the family in resolving the situation.
- Provides access to therapeutic services designed to remediate familial problems and permit safe reunification with families.
- Supervises children placed out of their homes and works with the families to return the children to their families, if possible.
- Petitions the court for legal termination of parental rights, if necessary.
- Seeks permanent homes for children when neither return to their homes nor adoption is possible.
- Assures payments for necessary social services for children in foster care.

MDHHS provides placement and supervision of all children who are court or state wards. The Children's Foster Care program works closely with the Children's Protective Services program.
MDHHS ensures child welfare clients have access to health care services such as medical, dental and mental health. MDHHS provides medical, psychological and psychiatric services to clients of Foster Care Program. MDHHS contracts with a medical consultant who provides policy direction advice, trains MDHHS staff, administers the Health Advisory Resource Team, and meets with state partners on health related issues.

B. Child Welfare Licensing
The Children’s Services Agency, Division of Child Welfare Licensing is responsible for issuing child placing licenses and children’s foster home licenses in the state and conducting ongoing monitoring of all child foster care licenses. Foster home licensing consultants are assigned to child placing agencies to assist with the licensing and monitoring of children’s foster care licenses. Services provided can include: pre-licensing orientations to potential child placing agency (CPA) applicants; criminal background checks; consultation for the applicant on how to comply with the administrative rules and licensing statutes; training child placing agency certification staff related to the licensing of children’s foster homes; training to child placing agency and child caring institution staff related to maintaining compliance with administrative rules and statutes as well as good practices; onsite inspections to verify compliance with all administrative rules; license renewal inspections to verify the facility remains in compliance; reviews in foster homes to ensure the safety of foster children and the provision of services by the CPA or for youth in independent living arrangements; consultation to assist with compliance as needed throughout the duration of the license; special investigations when allegations of noncompliance are received; receipt and processing of complaints; special investigations and/or renewal inspections; processing of adverse actions to revoke, suspend, deny issuance or refuse to renew licenses; maintaining the licensing database.

- SSBG Statutory Goal(s) Supported: 3, 4
- Method of Delivery: Public
- Geographic Area: Statewide

HOUSING SERVICES

A. Homeless and Runaway Youth
MDHHS contracts, through a continuum of services, with homeless youth and runaway service providers to provide street outreach, prevention, crisis intervention, and basic care centers, offering temporary shelter and transitional living programs for youth needing long-term support. The service array that is offered includes, but is not limited to, assessment, independent living skills, referrals for educational and health care needs, housing referrals, financial training and counseling. Specialized services that address the needs of specific groups of youth, such as foster care alumni; dissolved adoptions or guardianships; lesbian gay bi-sexual transgendered and questioning (LGBTQ) youth; and pregnant and parenting youth are also available.

B. Michigan Domestic and Sexual Violence Prevention and Treatment Board (MDSVPTB)
MDSVPTB, administratively housed in MDHHS, is legislatively mandated to coordinate all statewide functions related to the prevention and treatment of domestic and sexual violence and is the entity responsible for enacting the congressional Violence Against Women Act in Michigan. MDSVPTB sub-contracts to local domestic and sexual violence shelter agencies for the provision of safe shelter housing coupled with voluntary supportive services as needed to assist domestic violence survivors and their dependent children. This includes onsite shelter managed by the domestic violence program and program-sponsored hotel rooms. Supportive services include 24-hour hotline, individual and group supportive counseling that is empowerment-based and related to domestic violence and/or sexual violence issues, child care during counseling sessions, children’s services, transportation, and advocacy services in obtaining health care, criminal justice assistance, financial/specific assistance, employment assistance and housing assistance.

- SSBG Statutory Goal(s) Supported: 1, 2, 3, 4
- Method of Delivery: Public and Private
- Geographic Area: Statewide

INDEPENDENT/TRANSITIONAL LIVING SERVICES

MDSVPTB sub-contracts with local domestic violence agencies for the provision of safe, decent single family occupancy units coupled with voluntary supportive services, to assist domestic violence survivors and their dependent children. Housing is available 7 days a week, 24 hours a day, 365 days a year for up to 24 months.

- SSBG Statutory Goal(s) Supported: 1, 2, 3, 4
- Method of Delivery: Public and Private
- Geographic Area: Statewide

PROTECTIVE SERVICES FOR ADULTS

Adult Protective Services (APS) provide protection to vulnerable adults who are at risk of harm due to the presence or threat of abuse, neglect, or exploitation. MDHHS provides immediate intervention to APS clients when necessary, which may include cost for placement in a safe environment; personal care aides; housecleaning; fumigation; or other needs that would assist the person to remain safely and independent.

Services in this program:
- Provide immediate (within 24 hours) investigation and assessment of situations referred to the department where an adult is suspected of being or believed to be abused, neglected, or exploited. This includes the operation of a 24-hour centralized intake center, where callers are able to call one number statewide to report suspected abuse, neglect, or exploitation.
- For those found to be in need of protection, assure that the adult is living in a safe and stable situation, including legal intervention, where required, in the least intrusive or restrictive manner.
Program services are available to any adult who is reported at risk of harm from abuse, neglect, or exploitation, and where there is a reasonable belief that the person is a vulnerable adult in need of protective services.

MDHHS purchases guardianship services for adults. Contractors deliver legal intervention services (guardianship, conservatorship, or both) which include the following duties and obligations to the ward:

- Ensuring that the ward is appropriately housed.
- Ensuring that provision is made for the care, comfort and maintenance of the ward.
- Making reasonable efforts to secure medical, psychological and social services, training, education, and social and vocational opportunities for the ward.
- Filing with the court a report on the condition of the ward in compliance with the probate code.
- Acting as fiduciary of the ward’s estate in compliance with the probate code.
- Receiving and managing benefit payments on behalf of the beneficiary.
- Keeping in regular contact with the ward and maintaining an individual client case record of contacts, service plan, progress notes, etc.
- Upon the death of the ward, notify the probate court and any department providing benefits to the ward, make funeral arrangements, apply for burial funds if necessary, turn the ward's assets over to the individual designated by the probate court and submit a final accounting of the ward's estate to the court.
- Put in writing and implement a grievance procedure.
- Have a written procedure to assist in making medical decisions.
- Carry out all other duties required by the probate code.
- Use partial guardianships (for example, finances only) when appropriate to maximize the rights maintained by the individual.

- SSBG Statutory Goal(s) Supported: 1, 2, 3, 4
- Method of Delivery: Public
- Geographic Area: Statewide

PROTECTIVE SERVICES FOR CHILDREN

The purpose of Children’s Protective Services is to assure that children are protected from further harm due to non-accidental physical or mental injury, sexual abuse, exploitation, or neglect by a person responsible for a child's health or welfare. MDHHS staff accomplish this through:

- Investigating and substantiating reported abuse and neglect.
- Assisting the family in diagnosing and resolving the problem.
- Referring families to community resources, including family preservation services when appropriate.
- Petitioning the court for removal of the child, if necessary.
- Providing public information about child abuse and neglect.
- Coordinating community service programs.
• Operating a 24-hour centralized intake center, where callers can call one number statewide to report suspected abuse, neglect, or exploitation.

MDHHS Children’s Protective Services are provided to all children (under 18 years of age) and families when any of the following conditions exist:
  • A child is reported, known, or suspected to be in danger of abuse, neglect or exploitation by a person responsible for the child’s health or welfare.
  • A child is without proper custody or guardianship.
  • A child is adjudicated as abused or neglected and the court orders supervision by MDHHS in the child’s home.
  • A child or family is referred for investigation.

MDHHS ensures child welfare clients have access to health care services such as medical, dental and mental health. MDHHS provides medical, psychological and psychiatric services to clients of the Child Protective Services. MDHHS contracts with a medical consultant who provides policy direction advice, trains MDHHS staff, administers the Health Advisory Resource Team, and meets with state partners on health related issues.

The MDHHS migrant program provides interpretation services in child protective services cases.

  • SSBG Statutory Goal(s) Supported: 3, 4
  • Method of Delivery: Public
  • Geographic Area: Statewide

RESIDENTIAL TREATMENT SERVICES

MDHHS provides care and supervision of abused, neglected and delinquent youth the court places with the department. Counseling as well as other treatment and therapeutic services are provided to youth in child placement residential facilities (child caring institutions).

  • SSBG Statutory Goal(s) Supported: 3, 5
  • Method of Delivery: Public and Private
  • Geographic Area: Statewide

SPECIAL SERVICES FOR YOUTH INVOLVED IN OR AT RISK OF INVOLVEMENT WITH CRIMINAL ACTIVITY

MDHHS may work with high quality mentoring programs in the Governor’s four core cities (Flint, Detroit, Pontiac, and Saginaw) to expand the number of disconnected youth (such as youth in foster care, children of prisoners, and youth in gangs or at risk of gang involvement) served by mentors. Youth must be matched with a mentor in a formal mentoring program as defined by Mentor Michigan. Mentor Michigan is the state’s lead agency on volunteerism. It provides support and resources to organizations around the state by providing training and research, as well as fostering partnerships to advance
mentoring. In addition, Mentor Michigan works to ensure that every young person has a safe and beneficial mentoring experience by developing and promoting the use of quality program standards.

Youth in foster care are defined as youth who have an active foster care case and are placed in the care and supervision of the Michigan Department of Health and Human Services. This includes older youth ages 18-21 that may be enrolled in Young Adult Voluntary Foster Care with the Michigan Department of Health and Human Services. Foster youth do not have to be under the jurisdiction of the court or be placed in a licensed foster home in order to be defined as a foster youth.

Children of Prisoners are defined as children with one or both parents incarcerated in a Federal or State correctional facility or in a local correctional facility if remanded there by a Federal or State court. The term is deemed to include children who are in an ongoing mentoring relationship in this program at the time of their parents' release from prison, for purposes of continued participation in the program. The match process must be initiated while one or both of the incarcerated parent(s) is serving a sentence in a Federal or State correctional facility or in a local correctional facility if remanded there by a Federal or State court.

Youth in gangs or at risk of gang involvement is defined as youth at risk of gang activity, delinquency, and youth violence.

- SSBG Statutory Goal(s) Supported: 3, 4
- Method of Delivery: Public and Private
- Geographic Area: Statewide

OTHER SERVICES

A. Community Resource Program
MDHHS provides food cards, gas cards, bus tokens and passes, and emergency food pantry of non-perishable goods. Basic hygiene supplies for personal care and house cleaning are provided to MDHHS clients in emergency situations, to children involved with protective services and foster care, to low-income children in local services, or to foster care youth transitioning into independent living arrangements. A variety of trainings and informational sessions are provided through the Community Resource Program (CRP) to eligible and potential clients to increase their understanding and knowledge of available programs and resources. CRP purchases oil changes and gas cards and provides transportation costs and reimbursement to enable MDHHS registered volunteer drivers to continue transporting MDHHS clients who are Medicaid eligible to medical providers and other service providers when there are no other available options. MDHHS provides specialized trainings to volunteers to ensure volunteer and client safety.

Holiday gifts and baskets are provided to low-income families and/or foster children who would not otherwise have the means for these things. These programs are usually
operated in partnership with community-based organizations or local chapters of national organizations like Toys for Tots.

B. Back-to-School Backpack Program
MDHHS supports the Back-to-School Backpack program that is administered by MDHHS Community Resource Coordinators (CRC) in local offices through the Community Resource Program (CRP). Free school backpacks filled with age-appropriate and grade-appropriate basic school supplies are provided to low-income school-aged children at the beginning of the school year that would otherwise not have these necessities for their education. These supplies are usually mandated by local district. This enhances not only their educational opportunities and ability to learn but also their self-esteem and self-worth as they can come to school equipped and ready to learn like their classmates.

C. Carpentry Skills for Inmates Training Partnership
Through a partnership with the Michigan Department of Corrections (DOC), MDHHS supplies lumber and other necessary materials to DOC that is used by inmates to construct beds. The inmates are taught carpentry skills that will prepare them for successful reintegration into their communities in order to reduce re-victimization and recidivism, and to promote self-sufficiency. The bed frames are given to families that have been referred by their MDHHS caseworker as having a need for beds.

- SSBG Statutory Goal(s) Supported: 1, 2, 3, 4
- Method of Delivery: Public and Private
- Geographic Area: Statewide
V. Pre-Expenditure Reporting Form
## Part A. Estimated Expenditures and Proposed Provision Method

**STATE: MICHIGAN**  
**FISCAL YEAR: 2017**  
**OBS NO.: 0970-0234**  
**EXPIRATION DATE: 09/30/2017**

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<th>Service Supported with SSBG Expenditures</th>
<th>SSBG Allocation</th>
<th>Funds Transferred to SSBG**</th>
<th>Expenditures of All Other Federal, State and Local Funds**</th>
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<th>Private</th>
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**Footnotes:**

* From which block grant(s) were these funds transferred? FAF
** Please list the sources of these funds: FAF, T.I.R.E., T.W.I.R., State General Fund
*** Please list that other services/Community resource programs
Appendix A: Documentation of Public Hearing
NOTICE OF PUBLIC HEARING

The Michigan Department of Health and Human Services (MDDHS) announces the availability of the fiscal year 2017 Title XX Social Services Block Grant (SSBG) State Plan.

The public hearing for the SSBG State plan will be held August 9, 2016, from 9-10a.m. at the Grand Tower, 235 S. Grand Ave., Dempsey Room, Lansing, Michigan. Comments on the SSBG State Plan may be submitted through August 9, 2016, by email to MDHHS-SSBGMail@michigan.gov. The plan is available for public review at www.michigan.gov/mdhhs. Click on the Inside MDHHS, Reports & Statistics, State Plans and Federal Regulations.
Bill to: Becky Robertson  
Brogan & Partners Convergence Marketing  
800 N. Old Woodward Ste 100  
Birmingham, AL 48009  

Advertiser: Michigan Department of Community Health  

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Harrisburg, PA 17110  

Invoice #: SALES0000016926  
Invoice Date: 7/31/2016  
P.O. Number:  

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Paid $0.00  
Total Due $1,209.25  

Terms: NET 30  
RETURN DUPLICATE WITH REMITTANCE  

Note: This order was placed by MANSI on behalf of Media Placement One. Any billing questions should be directed to Ken Sanford at MANSI Media at (717) 703-3089.
Township trustee challenges clerk in primary election

The Republican primary for the Township Clerk position is now underway. A number of candidates are vying for the position, with incumbent Jody Tietze facing two main challengers: Township Trustee Melissa Barnett and Independent candidate Steve Patterson.

Barnett, a long-time resident of the community, has been serving as Township Clerk for the past 10 years. She is known for her dedication to the community and her commitment to serving the residents of the township.

Patterson, on the other hand, is a newcomer to the race. He is running as an Independent candidate, hoping to bring fresh ideas and perspectives to the position.

The primary election will be held on August 8th, and the winner will face off against the Democratic candidate in the general election.

Women

"Women are no longer just second-class citizens," said McCain. "They are now leading the charge in politics,medicine,law enforcement and every other field. It's time for us to recognize their contributions and support their efforts."

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Washtenaw case is first evidence of Lyme disease-infected ticks

KEITH MATHENY
LANSING JOURNAL

A Washtenaw County resident is being treated for Lyme disease— a highly contagious bacterial infection that is transmitted through the bites of infected deer ticks. This is the first evidence that Lyme disease-infected ticks have been found in Washtenaw County, according to health officials. The report of Lyme disease in Washtenaw County is significant, as there have been no confirmed cases of Lyme disease in the county before this report. The case involves a 15-year-old boy who was bitten by a tick that was found to be infected with Lyme disease. The boy is being treated with antibiotics and is expected to make a full recovery.

Medical experts believe that the tick bite was the likely source of the infection. Lyme disease is caused by the bacterium Borrelia burgdorferi, which is carried by deer ticks. The disease can cause a variety of symptoms, including fever, rash, fatigue, and joint pain. In severe cases, it can lead to more serious complications such as heart and nervous system issues.

Prevention and treatment are critical in controlling the spread of Lyme disease. Individuals are advised to take precautions when spending time outdoors, such as wearing long sleeves and pants, using tick repellent, and checking for ticks on themselves and their pets. Early detection is crucial, as prompt treatment can prevent the development of serious complications.

Additional information:

Michigan Department of Health and Human Services www.michigan.gov/health/health-services/healthcare-provider/lyme-disease

West Branch Health District www.westbranchhealth.org

Sewer Sale

Due to an increase in sewer costs, the city of Lansing has decided to offer a sewer sale to residents who are currently paying sewer rates. The sewer sale is designed to help residents reduce their sewer costs and make budgeting for utilities easier.

The sewer sale will offer a discount on sewer services for qualifying customers. The discount will be applied to the sewer bill for a limited time. Customers are encouraged to take advantage of this offer to reduce their monthly sewer expenses.

Sewage disposal is an essential service provided by the city of Lansing. The sale is intended to support the city's wastewater treatment plant and maintain the quality of services provided to residents.

For more information, please contact the city of Lansing's customer service representatives at 517-272-2027 or visit www.cityoflansing.com.

Nonprofit Opportunity

MSU Concessions
seeks nonprofit to work events

Nonprofit organizations interested in working with MSU Concessions are encouraged to apply. The organization will be responsible for managing and operating a concessions stand at MSU sporting events. The position offers an opportunity to gain valuable experience in the hospitality industry and contribute to the community. The organization will be expected to work closely with MSU Concessions to ensure the success of the event.

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Flint bets with trash-hauling union

In this July 30 photo, Bob Skinner, assistant to the board of commissioners for the city of Flint, Mich., signs a contract with the Teamsters Local 270. The union represented in the contract is working to hire workers to clean up the Flint River, which has been contaminated by lead and other toxins. The contract, which includes a provision for $20 million in state funding, is intended to address the water crisis in Flint. The city, which switched from the Detroit system to the Flint River in 2014, has been battling with the contamination problem since 2015. The agreement aims to create jobs and help address the health and environmental challenges posed by the contaminated river.

Online high school to award diplomas to adult dropouts

The Bridgeway Charter School, an online high school that offers diploma to adults who have dropped out of traditional high school, is expanding its program to include adult students in Flint. The school, which is part of the Renaissance Network, will offer courses and support to help adults complete their high school education. This move is part of the city’s efforts to address the high dropout rates and improve educational outcomes.

Seat belts may return to public transportation

A new report suggests that seat belts could be reinstated on public transportation, including buses and trains. The report, commissioned by a transportation safety organization, found that seat belt use can significantly reduce the risk of injury in accidents. The findings could lead to changes in transportation policies and regulations.

COINS WANTED

Gary Dantko

 thị 305.746.9024

NOTICE OF PUBLIC HEARING

The Board of Directors of the Michigan Department of Transportation has scheduled a public hearing on the proposed budget for the upcoming fiscal year. The hearing will take place on [insert date] at [insert time] at [insert location]. The public is invited to attend and provide comments on the budget.

FOR SALE ON BIDS

The Michigan Community School District Board is conducting a sales process for the sale of property. The property, located at [insert address], is available for sale to the highest bidder. Bids must be submitted in writing and are due by [insert date and time]. The sale will be conducted under the conditions outlined in the bid documents.
Appendix B: Certifications

1. Drug-Free Workplace Requirements
2. Environmental Tobacco Smoke
3. Lobbying
4. Debarment, Suspension and Other Responsibility Matters
CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

This certification is required by the regulations implementing the Drug-Free Workplace Act of 1988: 45 CFR Part 76, Subpart, F. Sections 76.630(c) and (d)(2) and 76.645 (a)(1) and (b) provide that a Federal agency may designate a central receipt point for STATE-WIDE AND STATE AGENCY-WIDE certifications, and for notification of criminal drug convictions. For the Department of Health and Human Services, the central point is: Division of Grants Management and Oversight, Office of Management and Acquisition, Department of Health and Human Services, Room 517-D, 200 Independence Avenue, SW Washington, DC 20201.

Certification Regarding Drug-Free Workplace Requirements (Instructions for Certification)

1. By signing and/or submitting this application or grant agreement, the grantee is providing the certification set out below.

2. The certification set out below is a material representation of fact upon which reliance is placed when the agency awards the grant. If it is later determined that the grantee knowingly rendered a false certification, or otherwise violates the requirements of the Drug-Free Workplace Act, the agency, in addition to any other remedies available to the Federal Government, may take action authorized under the Drug-Free Workplace Act.

3. For grantees other than individuals, Alternate I applies.

4. For grantees who are individuals, Alternate II applies.

5. Workplaces under grants, for grantees other than individuals, need to be identified on the certification. If known, they may be identified in the grant application. If the grantee does not identify the workplaces at the time of application, or upon award, if there is no application, the grantee must keep the identity of the workplace(s) on file in its office and make the information available for Federal inspection. Failure to identify all known workplaces constitutes a violation of the grantee’s drug-free workplace requirements.

6. Workplace identifications must include the actual address of buildings (or parts of buildings) or other sites where work under the grant takes place. Categorical descriptions may be used (e.g., all vehicles of a mass transit authority or State highway department while in operation, State employees in each local unemployment office, performers in concert halls or radio studios).

7. If the workplace identified to the agency changes during the performance of the grant, the grantee shall inform the agency of the change(s), if it previously identified the workplaces in question (see paragraph five).

8. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees’ attention is called, in particular, to the following definitions from these rules:


**Controlled substance** means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

**Conviction** means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes;

**Criminal drug statute** means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, use, or possession of any controlled substance;

**Employee** means the employee of a grantee directly engaged in the performance of work under a grant, including: (i) All direct charge employees; (ii) All indirect charge employees unless their impact or involvement is insignificant to the performance of the grant; and, (iii) Temporary personnel and consultants who are directly engaged in the performance of work under the grant and who are on the grantee’s payroll. This definition does not include workers not on the payroll of the grantee (e.g., volunteers, even if used to meet a matching requirement; consultants or independent contractors not on the grantee’s payroll; or employees of subrecipients or subcontractors in covered workplaces).

---

**Certification Regarding Drug-Free Workplace Requirements**

**Alternate I. (Grantees Other Than Individuals)**

The grantee certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee’s workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an ongoing drug-free awareness program to inform employees about - -

(1) The dangers of drug abuse in the workplace;

(2) The grantee’s policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(e) Making it a requirement that each employee be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will - -

(1) Abide by the terms of the statement; and
(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

(e) Notifying the agency in writing, within 10 calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted:

1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

(B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

Check if there are workplaces on file that are not identified here.

Alternate II. (Grantees Who Are Individuals)

(a) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant;

(b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.
August 15, 2016

Signature and Date
Christopher Stickney

Printed Name
Analyst, Centralized Grants Management, Authorized Organizational Representative

Title
Michigan Department of Health and Human Services

Organization
CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, Part C Environmental Tobacco Smoke, also known as the Pro Children Act of 1994, requires that smoking not be permitted in any portion of any indoor routinely owned or leased or contracted for by an entity and used routinely or regularly for provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children’s services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1000 per day and/or the imposition of an administrative compliance order on the responsible entity by signing and submitting this application the applicant/grantee certifies that it will comply with the requirements of the Act.

The applicant/grantee further agrees that it will require the language of this certification be included in any subawards which contain provisions for the children’s services and that all subgrantees shall certify accordingly.

__________________________
Signature and Date
August 15, 2016
Christopher Stickney
Printed Name

Analyst, Centralized Grants Management, Authorized Organization Representative
Title
Michigan Department of Health and Human Servie
Organization
CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, “Disclosure Form to Report Lobbying,” in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, “Disclosure Form to Report Lobbying,” in accordance with its instructions. Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Signature and Date
Christopher Stickney

Printed Name
Christopher Stickney

Title
Analyst, Centralized Grants Management, Authorized Organizational Representative

Organization
Michigan Department of Health and Human Services
CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

Certification Regarding Debarment, Suspension, and Other Responsibility Matters - - Primary Covered Transactions

Instructions for Certification

1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.

2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.

3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

5. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.

6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.

7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusive-Lower Tier Covered Transaction," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant
may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

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Certification Regarding Debarment, Suspension, and Other Responsibility Matters - Primary Covered Transactions

(1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
   (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;
   (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
   (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
   (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.

(2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions

Instructions for Certification

1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below.

2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other
remedies available to the Federal Government the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or had become erroneous by reason of changed circumstances.

4. The terms covered transaction, debarred, suspended, ineligible, lower tier covered transaction, participant, person, primary covered transaction, principal, proposal, and voluntarily excluded, as used in this clause, have the meaning set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this proposal is submitted for assistance in obtaining a copy of those regulations.

5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.

6. The prospective lower tier participant further agrees by submitting this proposal that it will include this clause titled “Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction,” without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from covered transactions, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

9. Except for transactions authorized under paragraph five of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

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Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - - Lower Tier Covered Transactions

(1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared
ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

(2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

August 15, 2016

Signature and Date
Christopher Stickney

Printed Name

Analyst, Centralized Grants Management, Authorized Organizational Representative

Title
Michigan Department of Health and Human Services

Organization
Appendix C: Proof of Audit

*Federal regulations state that:* “Each State shall, not less often than every two years, audit its expenditures from amounts received (or transferred for use) under this title...Within 30 days following the completion of each audit, the State shall submit a copy of that audit to the legislature of the State and to the Secretary.” (Sec. 2006 [42 U.S.C. 1397a, Sec. 2006]).
Proof of Audit
The single audit report for the year ended September 30, 2015 is posted on the Michigan Office of the Auditor General's website at:


In addition, the audit report has been received by the Federal Audit Clearinghouse.
Appendix D: Grant Authority Signing Letter
November 4, 2015

Dear Grant Administrator:

This letter is to assign authority to the Michigan Department of Health and Human Services Centralized Grants Management section to sign and certify all grant-related documentation with federal agencies as this department’s Authorized Organizational Representative.

Due to the size of the Michigan Department of Health and Human Services and the large number of grants it administers, the Centralized Grants Management section has been created to facilitate the coordination of the application, receipt and management of grants within the department. The professional staff within the Centralized Grants Management section are hereby authorized to apply for and enter into grant agreements with federal agencies as the organization’s Authorized Organizational Representative. Enclosed with this authorization is a current organizational chart listing the staff members currently within the Centralized Grants Management section.

Any questions regarding this authorization may be directed to Beth Nagel, Centralized Grants Management Manager, at (517) 241-2064 or NagelB@Michigan.gov.

Sincerely,

Nick Lyon

Attachment
VII. Additional Information

PROTECTION OF RIGHTS OF PERSONS
APPLYING FOR OR RECEIVING SERVICES
FUNDED BY THE SOCIAL SERVICES BLOCK GRANT

Confidentiality

Michigan Act 280 of Public Acts of 1939 contains provisions that govern the use and disclosure of information in social services records. These are found in Section 35 and 64 of Act 280, being Sections 400.35 and 400.64, Michigan Compiled Laws. In addition to the state law, the Department has promulgated Administrative Rule 400.6. Other state laws and administrative rules that apply to specific programs include:

- Section 748, Act 258, 1974, being MCLA 330.1748 (Mental Health Code).
- Section 11, Act 220, 1935, being MCLA 400.211 (MCI Act).
- Section 8, Act 150, 1974, being MCLA 803.308 (Youth Rehabilitation Act).
- Section 13, Act 442, 1977, being MCLA 15.243 (Freedom of information Act).
- Section 10, Act 116, 1973, being MCLA 772.120 (Child Care Organization Act).
- Section 12, Act 218, 1979, being MCLA 400.712 (Adult Foster Facility Licensing Act).
- The law and the administrative rules provide protection of confidentiality for clients in services programs supported by Social Services Block Grant funds.

Hearings and Appeals

Act 280 of Public Acts of 1939, Section 65, as amended by Act 401, 1965, being Section 400.65 of Michigan Compiled Laws, specifies that the department shall prescribe rules and regulations for the conduct of hearings, appeals and complaints. Administrative Rule 400.901-922 provides the same hearing procedure for all department clients.
Standards of Promptness

Administrative Rule 400.2 states that applications shall be processed within the standard of promptness established in federal regulations. With the elimination of any federal regulations governing the standard of promptness for Title XX Social Services, programming receiving Social Services Block Grant funds will be governed by department policy. Department policy will continue with standards of promptness for Social Services Block Grant funded services that require processing applications within 45 days.