

**Staff Report**

**TO:** Criminal Justice County Affairs Committee  
Board of Commissioners

**FROM:** Kerri Curtiss/Court Administrator and Toni Prabucki/DHHS Director

**DATE:** September 29, 2017

**RE:** Child Care Fund Budget Approval \$2,232,677.64 **FY2018**

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**BACKGROUND**

Each year the Court and DHHS submit budget requests to the State of Michigan Child Care Fund Unit. The purpose of said budgets are to assist with the costs to care for children who are in the court and DHHS system. These include both delinquency and neglect and abuse cases. Children are residents of Isabella County and are under the direct jurisdiction of the Isabella County Circuit Court-Family Division.

The Child Care Fund reimburses the county 50% of approved expenses for items such as foster care, institutional care, in-home care and independent living. Some of the items reimbursed at 50% are the costs paid to McBride Homes for the operation of Day Treatment and Non Secure, the Intensive Probation Officer position and the costs to house youth in residential facilities.

We receive 100% reimbursement for approved basic grant programs up to a maximum of \$15,000. The current basic grant programs include \$10,000 for drug testing supplies and \$5,000 toward a volunteer probation officer program.

**ALTERNATIVES**

There are not currently any other alternatives that would be cost effective. Frequent collaboration between the Court Administrator, other court staff and the MDHHS assists in cost containment.

**FINANCIAL IMPACT**

The financial impact to counties is very high caring for youth who are either delinquent or victims of abuse/neglect. Utilizing the Child Care Fund is a way offset some of these high but necessary costs to care for the children of our community.

**OTHER CONSIDERATIONS**

Federal funding, if the youth meets the eligibility criteria, is also used to provide for out of home

care expenses for both abuse/neglect and delinquent youth that cannot be safely maintained in their own home. Approximately 26% of children are funded through the county child care fund, whereas the State of Michigan reimburses 50% of the cost. 14% are 100% state funded, 23% are federally funded and 38% do not require funding (children placed in relative care or with a parent)

### **RECOMMENDATIONS**

It is recommended the county child care budget be approved for children under the jurisdiction of the Isabella County Circuit Court-Family Division to assure child safety, well-being, permanency and rehabilitation of our most vulnerable population.

### **ATTACHMENT**

FY 18 Application

# County Child Care Budget Summary (DHS-2091)

Michigan Department of Health and Human Services (MDHHS)

Children's Services Agency

Isabella County for October 01, 2017 through September 30, 2018

Organization Isabella County	Court Contact Person Kerri R. Curtiss - CCF Organization Management	Telephone Number (989) 317-4213	E-Mail Address kcurtiss@isabellacounty.org
Fiscal Year October 01, 2017 through September 30, 2018	MDHHS Contact Person Antoinette Prabucki - CCF Organization Management	Telephone Number (989) 772-8502	E-Mail Address prabuckia@michigan.gov

TYPE OF CARE I. CHILD CARE FUND	ANTICIPATED EXPENDITURES		
	MDHHS	COURT	COMBINED
A. Family Foster Care.....	\$353,125.00	\$35,000.00	\$388,125.00
B. Institutional Care.....	\$290,015.00	\$1,159,390.00	\$1,449,405.00
C. In-Home Care.....	\$34,275.00	\$714,372.64	\$748,647.64
D. Independent Living.....	\$40,000.00	\$0.00	\$40,000.00
E. SUBTOTALS.....	\$717,415.00	\$1,908,762.64	\$2,626,177.64
F. Revenue.....	\$159,000.00	\$250,000.00	\$409,000.00
G. Net Expenditure.....	\$558,415.00	\$1,658,762.64	\$2,217,177.64

COST SHARING RATIOS	County 50% / State 50%
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II. CHILD CARE FUND	COURT	COMBINED
Foster Care During Release Appeal Period.....	\$500.00	\$500.00

COST SHARING RATIOS	County 0% / State 100%
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III. JUVENILE JUSTICE SERVICES FUND	MDHHS	COURT	COMBINED
Basic Grant.....	\$0.00	\$15,000.00	\$15,000.00

COST SHARING RATIOS	County 0% / State 100% \$15,000.00 Maximum
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IV. TOTAL EXPENDITURE.....	\$2,232,677.64
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## BUDGET DEVELOPMENT CERTIFICATION

THE UNDERSIGNED HAVE PARTICIPATED IN DEVELOPING THE PROGRAM BUDGET PRESENTED ABOVE. We certify that the budget submitted above represents an anticipated gross expenditure for the fiscal year: October 01, 2017 through September 30, 2018; and any requests for reimbursement shall adhere to all state law, administrative rules and child care fund handbook authority.

Presiding Judge <i>William J. Egan</i>	Date 9-29-17
County Director of MDHHS Signature <i>[Signature]</i>	Date 10-5-2017
Chairperson, Board of Commissioner's Signature	Date
And/or County Executive Signature	Date

Michigan Department of Health & Human Services (MDHHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an	AUTHORITY: Act 87, Publication of 1978, as amended COMPLETION: Required. PENALTY: State reimbursement will be withheld from local government.
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## In-Home Care / Basic Grant Budget Detail Report (DHS-2094)

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

<b>Service Component (Full Title/Name) *</b>	<input checked="" type="radio"/> In-Home Care <input type="radio"/> Basic Grant
In Home Services 2018	

**A. Personnel (Employees of the Court)**      **Administrative Unit:\***      ☐ MDHHS      ☒ Court

<b>1. Salary and Wages</b>			
Name(s)	Job Title	Hours/Week	Yearly Cost
<b>2. Fringe Benefits</b>			
Total Personnel			\$0.00

### B. Program Support (For employees identified in "A" above)

<b>1. Travel</b>	Rate/Mile	Estimate No. of Miles	Yearly Cost
Transportation, including mileage reimbursement for VPO	\$0.5350	2,719.00	\$1,454.66
<b>2. Supplies and Materials (Description/Examples)</b>			Yearly Cost
<b>3. Other Costs (Description/Examples)</b>	Rate/Unit		Yearly Cost
Total Program Support			\$1,454.66

\* Must comply with the definitions and limits listed for court operated facilities in the Child Care Fund Handbook.

### C. Contractual Services

<b>1. Unit Rates</b>				
Name(s)	Rate	Unit Type	Total Units/ Contract	Yearly Cost
Electronic Monitors	\$20.00	Each	50.00	\$1,000.00
Counseling/Treatment/Groups/C MH Cost Share	\$800.00	Each	100.00	\$80,000.00
Evaluations/Assessments	\$60.00	Each	360.00	\$21,600.00
<b>2. Closed End Contracts</b>				
Total Contractual				\$102,600.00

### D. Non-Scheduled Payments

Type of Service (Description)	Anticipated No. Units to be Provided	Average Cost of Each Service Unit	Yearly Cost
Drug testing	728.00	\$6.87	\$5,001.36
Camps/Field Trips	5.00	\$500.00	\$2,500.00
Bus tokens/gas cards	20.00	\$20.00	\$400.00
Gymnasium/pro social Activities	10.00	\$100.00	\$1,000.00

Total Non-Scheduled	\$8,901.36
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**E. Service Component - In-Home Care or Basic Grant**

(Add Totals for A, B, C, and D above)	Total Service Component Cost	\$112,956.02
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**F. Public Revenue:**

If you plan to fund any portion of this service component with other public revenue including other Child Care Funds or Basic Grant monies, or if this component is generating revenue (i.e. third party payments) specify the following:

SOURCE	To Be Provided	Yearly Cost
Total Public Revenue		\$0.00

**G. Subtract Total Public Revenue from Total Service Component Cost (E-F)**

Total Cost to Basic Grant, Net Anticipated IHC Matchable Expenditure (Gross Costs Less Other Revenue)	\$112,956.02
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AUTHORITY: Act 87, Public Acts of 1978, as amended.  
 COMPLETION: is Required.  
 PENALTY: State reimbursement will be withheld from local government

Michigan Department of Health & Human Services (MDHHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an MDHHS office in your area.

# In-Home Care / Basic Grant Program Component (DHS-4471) Report/Request

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

One of these forms must be completed for EACH In-Home Care or Basic Grant Service component for which there was State Reimbursement during the past fiscal year or proposed for next fiscal year as a new, revised, or continued component.

Component Manager	Telephone Number
Honorable Ervin, William - CCF Judges	

## I. Program Specific Information:

<b>1. Component Status</b>	
<input checked="" type="checkbox"/> Continued	<input type="checkbox"/> Terminated
<input type="checkbox"/> Revised	<input type="checkbox"/> New
<b>2. Target Population(s) Served - Check all that apply.</b>	
<b>A. Children Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Delinquent <input type="checkbox"/> Neglect	
<b>B. Children NOT Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Written Complaint <input type="checkbox"/> CPS Category I, II, or III <input checked="" type="checkbox"/> Children likely to come under Jurisdiction of the Court	
<b>3. Area(s) of Intended Impact - Check primary area(s) only.</b>	
<b>A Reduction In:</b> <input checked="" type="checkbox"/> Number of Youth Petitioned <input checked="" type="checkbox"/> Number of Days of Out-of-Home Detention <input checked="" type="checkbox"/> Number of Adjudications <input type="checkbox"/> Number of Days of Shelter Care <input checked="" type="checkbox"/> Number of Days of Family Foster Care <input checked="" type="checkbox"/> Number of Days of Residential Treatment Care <input type="checkbox"/> Number of State Wards Committed (Act 150 & 220)	
<b>4. Service Focus - Check all that apply.</b>	
<input checked="" type="checkbox"/> Provide early intervention to treat within the child's home <input checked="" type="checkbox"/> Effect early return from foster or institutional care	

## II. Service and Cost Information for Fiscal Year Completed or Being Requested for Next Fiscal Year:

### Instructions:

- In columns 6 & 7 enter the actual number and costs from the last full year.
- In columns 8 & 9 enter the number and costs projected for the next fiscal year.

Time Period Reported (for full prior fiscal year)			Time Period Reported	
5.	6. Actual Number	7. Actual Cost	8. Projected Number	9. Projected Cost
A. Number of Youth Served	66.00		70.00	
B. Number of Service Units (Define): youth or family members	200.00		200.00	
C. Total Component Cost		\$60,187.00		\$60,190.00
D. Average Cost Per Unit		\$300.93		\$300.95
E. Average Cost Per Youth		\$911.92		\$859.85

**III. Impact Evaluation - Must be completed for continuing or ending components.**

Expected Area(s) of Impact	10. Number of Youth Served	Estimated Reductions	
		11. Number of Days	12. Cost
A. Youth Petitioned	20	95	\$40,000.00
B. Adjudications	15	125	\$30,000.00
C. Days of Family Foster Care	3	90	\$8,100.00
D. Days of Out-of-Home Detention	7	200	\$30,000.00
E. Days of Shelter Care	0	0	\$0.00
F. Days of Residential Treatment Care	8	150	\$60,000.00
G. State Wards Committed	0	0	\$0.00

**IV. Program Assessment / Evaluation - (Use Data from October 01, 2016 through September 30, 2017)**

<b>Program Service Type: Non-Scheduled Payments</b>			
Count each youth only once for the following data regarding this program.			
A. Total number of youth served in this program during the previous fiscal year.	66.00	100.00%	<input type="checkbox"/> N/A
B. Number of youth released from this program within the previous fiscal year, who have achieved the goals of this program.	30.00	45.45%	<input type="checkbox"/> N/A
C. Number of youth released from this program within the previous fiscal year, who did not achieve the goals of this program.	10.00	15.15%	<input type="checkbox"/> N/A
D. Number of youth continuing services with the program.	20.00	30.30%	<input type="checkbox"/> N/A
E. Number of youth moved from this program to Out-of-Home care within the previous fiscal year.	4.00	6.06%	<input type="checkbox"/> N/A
F. Number of youth released from Out-of-Home Care and placed into this program within the previous fiscal year.	2.00	3.03%	<input type="checkbox"/> N/A
G. Average length of time (in days) a youth was involved in the program within the previous fiscal year. Select if this is a one-time service <input type="checkbox"/>	206.00		<input type="checkbox"/> N/A
H. Specify which date was used as beginning date. Ending date is date discharged from program (as stated on discharge summary): <b>Date of Court Order</b>			

**V. Program Description - Must be completed for all components, except those being terminated, each year.**

The In-Home Care Program provides 8 components/services to youth in their own homes and/or earlier return to their home from an out-of-home placement. The components are:

Electronic Monitors - Used to provide security to the public and keep the children in their homes.

Counseling/Treatment/Groups - Used to identify problems, seek solutions and open communication. For 2018, the local Community Mental Health is implementing a new Multi-Systemic Therapy Model of counseling to treat youth who are at risk of removal or have been removed and are returning or should be returning to their home. Most of these youth will be covered by Medicaid, but for those who are not covered but are court wards ordered into IHC, the court may need to cover a rate for the counseling services. The standard rate is around \$100 per unit offered so we are increasing our counseling line item in anticipation of the possible cost of the new program participants who do not have any other means for payment.

Evaluations/Assessments - Used to establish a baseline and identify treatment areas.

Transportation, including mileage reimbursement VPO, Nicole Foster.

Drug Testing - Due to our drug testing policies we anticipate drug testing costs to be \$6.87 per test x 7 clients = \$48.08. Drug tests are given as much as two times per week or 14 times X 52 weeks = \$5,000.00.

Camps/Field Trips-Camps and field trips are used to equip youth with skills to make better choices, encourage healthy communication and expression and empower them to be positive role models.

Bus tokens/gas cards ? enable participants to travel to and from program meetings and activities

Gymnasium/pro social activities ? allows youth membership in healthy activities and programs to improve their overall wellbeing

The Program is designed to be an intensive, therapeutic, in-home family based incentive in an attempt to treat the youth in the home of their family, relative or guardian. This program is administered by the Juvenile Probation Office. The child, parents and other family members are included in the treatment plan as a means to attempting to achieve stability and family positive goal achievement. These are intensive programs that are designed to prevent placement or allow early return to home. They include intensive services with face to face contact and no more than 20 youth per full time worker. These funds are not used for judicial costs. The non-scheduled payments are not used to pay for basic family needs that are available under another funding source. These youth are either ordered into the program or have a signed parent/youth agreement in place. The case plans include notification that the intent is early return and services are provided to the family of the youth as well. The participants have weekly face to face contact with the probation officer.

Through these services, the court intends to decrease the number of petitions and subsequent adjudications for youth. Our research and experience shows that if we can put in place resources to track the activities of the youth we serve and to provide proper screening for substance abuse while also providing positive reinforcement through reward systems, we can help these youth achieve positive outcomes. If we can provide services to the youth and achieve a positive outcome, we may be able to prevent further petitions and adjudications for not only the youth currently in the system, but other youth in the family.

AUTHORITY: Act 87, Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

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## In-Home Care / Basic Grant Budget Detail Report (DHS-2094)

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

<b>Service Component (Full Title/Name) *</b>	<input type="radio"/> In-Home Care <input checked="" type="radio"/> Basic Grant
Volunteer Probation Officer Program 2018	

**A. Personnel (Employees of the Court)**      **Administrative Unit:\***      ☐ MDHHS      ☒ Court

<b>1. Salary and Wages</b>			
Name(s)	Job Title	Hours/Week	Yearly Cost
Nicole Foster	Director - VPO Program	2.50	\$5,000.00
<b>2. Fringe Benefits</b>			
FICA			\$1,433.00
Health Insurance			\$3,500.00
Workman's Comp			\$375.00
Total Personnel			\$10,308.00

**B. Program Support (For employees identified in "A" above)**

<b>1. Travel</b>	Rate/Mile	Estimate No. of Miles	Yearly Cost
<b>2. Supplies and Materials (Description/Examples)</b>			Yearly Cost
Taped and printed materials and supplies			\$300.00
<b>3. Other Costs (Description/Examples)</b>	Rate/Unit		Yearly Cost
Total Program Support			\$300.00

\* Must comply with the definitions and limits listed for court operated facilities in the Child Care Fund Handbook.

**C. Contractual Services**

<b>1. Unit Rates</b>				
Name(s)	Rate	Unit Type	Total Units/ Contract	Yearly Cost
<b>2. Closed End Contracts</b>				
Total Contractual				\$0.00

**D. Non-Scheduled Payments**

Type of Service (Description)	Anticipated No. Units to be Provided	Average Cost of Each Service Unit	Yearly Cost

Total Non-Scheduled	\$0.00
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**E. Service Component - In-Home Care or Basic Grant**

(Add Totals for A, B, C, and D above)	Total Service Component Cost	\$10,608.00
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**F. Public Revenue:**

If you plan to fund any portion of this service component with other public revenue including other Child Care Funds or Basic Grant monies, or if this component is generating revenue (i.e. third party payments) specify the following:

SOURCE	To Be Provided	Yearly Cost
Isabella County General Fund	Fringe Benefits	\$5,308.00
Isabella County Trial Court	Taped & printed materials and supplies	\$300.00
Total Public Revenue		\$5,608.00

**G. Subtract Total Public Revenue from Total Service Component Cost (E-F)**

Total Cost to Basic Grant, Net Anticipated IHC Matchable Expenditure (Gross Costs Less Other Revenue)	\$5,000.00
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AUTHORITY: Act 87, Public Acts of 1978, as amended.  
 COMPLETION: is Required.  
 PENALTY: State reimbursement will be withheld from local government

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# In-Home Care / Basic Grant Program Component (DHS-4471) Report/Request

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

One of these forms must be completed for EACH In-Home Care or Basic Grant Service component for which there was State Reimbursement during the past fiscal year or proposed for next fiscal year as a new, revised, or continued component.

Component Manager	Telephone Number
Honorable Ervin, William - CCF Judges	

## I. Program Specific Information:

<b>1. Component Status</b>	
<input checked="" type="checkbox"/> Continued	<input type="checkbox"/> Terminated <input type="checkbox"/> Revised <input type="checkbox"/> New
<b>2. Target Population(s) Served - Check all that apply.</b>	
<b>A. Children Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Delinquent <input type="checkbox"/> Neglect  <b>B. Children NOT Under Jurisdiction of Court</b> <input type="checkbox"/> Written Complaint <input type="checkbox"/> CPS Category I, II, or III <input checked="" type="checkbox"/> Children likely to come under Jurisdiction of the Court	
<b>3. Area(s) of Intended Impact - Check primary area(s) only.</b>	
<b>A Reduction In:</b> <input checked="" type="checkbox"/> Number of Youth Petitioned <input type="checkbox"/> Number of Days of Out-of-Home Detention <input checked="" type="checkbox"/> Number of Adjudications <input type="checkbox"/> Number of Days of Shelter Care <input type="checkbox"/> Number of Days of Family Foster Care <input type="checkbox"/> Number of Days of Residential Treatment Care <input type="checkbox"/> Number of State Wards Committed (Act 150 & 220)	
<b>4. Service Focus - Check all that apply.</b>	
<input checked="" type="checkbox"/> Provide early intervention to treat within the child's home <input checked="" type="checkbox"/> Effect early return from foster or institutional care	

## II. Service and Cost Information for Fiscal Year Completed or Being Requested for Next Fiscal Year:

### Instructions:

- In columns 6 & 7 enter the actual number and costs from the last full year.
- In columns 8 & 9 enter the number and costs projected for the next fiscal year.

Time Period Reported (for full prior fiscal year)			Time Period Reported	
5.	6. Actual Number	7. Actual Cost	8. Projected Number	9. Projected Cost
A. Number of Youth Served	2.00		5.00	
B. Number of Service Units (Define): # of contacts between VPO and Youth	36.00		36.00	
C. Total Component Cost		\$10,000.00		\$5,000.00
D. Average Cost Per Unit		\$277.77		\$138.88
E. Average Cost Per Youth		\$5,000.00		\$1,000.00

**III. Impact Evaluation - Must be completed for continuing or ending components.**

Expected Area(s) of Impact	10. Number of Youth Served	Estimated Reductions	
		11. Number of Days	12. Cost
A. Youth Petitioned	2	20	\$6,000.00
B. Adjudications	2	20	\$6,000.00
C. Days of Family Foster Care	0	0	\$0.00
D. Days of Out-of-Home Detention	0	0	\$0.00
E. Days of Shelter Care	0	0	\$0.00
F. Days of Residential Treatment Care	0	0	\$0.00
G. State Wards Committed	0	0	\$0.00

**IV. Program Assessment / Evaluation - (Use Data from October 01, 2016 through September 30, 2017)**

<b>Program Service Type: Family Preservation</b>			
Count each youth only once for the following data regarding this program.			
A. Total number of youth served in this program during the previous fiscal year.	2.00	100.00%	<input type="checkbox"/> N/A
B. Number of youth released from this program within the previous fiscal year, who have achieved the goals of this program.	0.00	0.00%	<input type="checkbox"/> N/A
C. Number of youth released from this program within the previous fiscal year, who did not achieve the goals of this program.	0.00	0.00%	<input type="checkbox"/> N/A
D. Number of youth continuing services with the program.	2.00	100.00%	<input type="checkbox"/> N/A
E. Number of youth moved from this program to Out-of-Home care within the previous fiscal year.	0.00	0.00%	<input type="checkbox"/> N/A
F. Number of youth released from Out-of-Home Care and placed into this program within the previous fiscal year.	0.00	0.00%	<input type="checkbox"/> N/A
G. Average length of time (in days) a youth was involved in the program within the previous fiscal year.  Select if this is a one-time service <input type="checkbox"/>	180.00		<input type="checkbox"/> N/A
H. Specify which date was used as beginning date. Ending date is date discharged from program (as stated on discharge summary): <b>Date of Referral</b>			

**V. Program Description - Must be completed for all components, except those being terminated, each year.**

The purpose of this program is to keep children in their home or press for an early return from care, and attempt to support families by empowering them to control their own lives through community based programs. All families referred to the VPO program are at imminent high risk classifications. Initially, the program coordinator screens the volunteers and makes an appropriate match. The coordinator then meets with the minor and a parent, along with the VPO volunteer, to review the program rules and expectations of all parties involved. The minimum time commitment for volunteers is 2 hours per week for 6 months. After the initial meeting, the volunteer meets with the minor, oftentimes in public places such as libraries, local food establishments, or on the campus of Central Michigan University. Benefits to the youth and his/her family include interaction with a positive role model and mentor for the youth, as well as tutoring services. The program coordinator generally recruits from the Central Michigan University student population. Training includes explanation of the rules and expectations of probation, of the program, and scenario examples. This program deals with youth who are on probation with this court. To be on probation the youth must have had a history of school truancy, suspensions or expulsions; run away from home; use of alcohol or drugs, ineffective, inconsistent or nonexistent parental control and/or negative or delinquent peer relationships. The youth almost always have negative or delinquent peer relationships along with at least one other, but often more factors present. Regardless, the youth meet two of the required factors. The taped, printed, binded and other supplies would include booklets that the youth may create during their sessions and supplies that are directly related to the program such as paper and pens. The youth may also receive take home materials that they can refer to for guidance.

For FY 2017, we reduced this program by half in an effort to be the most cost effective. We will continue the \$5,000 request for 2018 as it worked well.

AUTHORITY: Act 87, Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

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## In-Home Care / Basic Grant Budget Detail Report (DHS-2094)

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

<b>Service Component (Full Title/Name) *</b>	<input checked="" type="radio"/> In-Home Care <input type="radio"/> Basic Grant
Non Scheduled Payments (DHS) 2017-2018	

**A. Personnel (Employees of the Court)**      **Administrative Unit:\***      ☒ MDHHS      ☐ Court

<b>1. Salary and Wages</b>			
Name(s)	Job Title	Hours/Week	Yearly Cost
<b>2. Fringe Benefits</b>			
Total Personnel			\$0.00

**B. Program Support (For employees identified in "A" above)**

<b>1. Travel</b>	Rate/Mile	Estimate No. of Miles	Yearly Cost
Mileage Reimbursement	\$0.5500	40,000.00	\$22,000.00
<b>2. Supplies and Materials (Description/Examples)</b>			Yearly Cost
<b>3. Other Costs (Description/Examples)</b>		Rate/Unit	Yearly Cost
Total Program Support			\$22,000.00

\* Must comply with the definitions and limits listed for court operated facilities in the Child Care Fund Handbook.

**C. Contractual Services**

<b>1. Unit Rates</b>				
Name(s)	Rate	Unit Type	Total Units/ Contract	Yearly Cost
<b>2. Closed End Contracts</b>				
Total Contractual				\$0.00

**D. Non-Scheduled Payments**

Type of Service (Description)	Anticipated No. Units to be Provided	Average Cost of Each Service Unit	Yearly Cost
Substance Abuse Screening	50.00	\$45.00	\$2,250.00
Unmet Program Needs (Examples would include: diapers, formula, crib, bedding linens, carbon monoxide detectors, fire alarms, door alarms)	60.00	\$50.00	\$3,000.00
Meals for Volunteer Transporters	100.00	\$7.25	\$725.00

Total Non-Scheduled	\$5,975.00
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**E. Service Component - In-Home Care or Basic Grant**

(Add Totals for A, B, C, and D above)	Total Service Component Cost	\$27,975.00
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**F. Public Revenue:**

If you plan to fund any portion of this service component with other public revenue including other Child Care Funds or Basic Grant monies, or if this component is generating revenue (i.e. third party payments) specify the following:

SOURCE	To Be Provided	Yearly Cost
Total Public Revenue		\$0.00

**G. Subtract Total Public Revenue from Total Service Component Cost (E-F)**

Total Cost to Basic Grant, Net Anticipated IHC Matchable Expenditure (Gross Costs Less Other Revenue)	\$27,975.00
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AUTHORITY: Act 87, Public Acts of 1978, as amended.  
 COMPLETION: is Required.  
 PENALTY: State reimbursement will be withheld from local government

Michigan Department of Health & Human Services (MDHHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an MDHHS office in your area.

# In-Home Care / Basic Grant Program Component (DHS-4471) Report/Request

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

One of these forms must be completed for EACH In-Home Care or Basic Grant Service component for which there was State Reimbursement during the past fiscal year or proposed for next fiscal year as a new, revised, or continued component.

Component Manager	Telephone Number
Prabucki, Antoinette - CCF Organization Management	(989) 772-8502

## I. Program Specific Information:

<b>1. Component Status</b>	
<input type="checkbox"/> Continued	<input type="checkbox"/> Terminated
<input checked="" type="checkbox"/> Revised	<input type="checkbox"/> New
<b>2. Target Population(s) Served - Check all that apply.</b>	
<b>A. Children Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Delinquent <input checked="" type="checkbox"/> Neglect	
<b>B. Children NOT Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Written Complaint <input checked="" type="checkbox"/> CPS Category I, II, or III <input checked="" type="checkbox"/> Children likely to come under Jurisdiction of the Court	
<b>3. Area(s) of Intended Impact - Check primary area(s) only.</b>	
<b>A Reduction In:</b> <input checked="" type="checkbox"/> Number of Youth Petitioned <input checked="" type="checkbox"/> Number of Adjudications <input checked="" type="checkbox"/> Number of Days of Family Foster Care	<input type="checkbox"/> Number of Days of Out-of-Home Detention <input type="checkbox"/> Number of Days of Shelter Care <input type="checkbox"/> Number of Days of Residential Treatment Care <input type="checkbox"/> Number of State Wards Committed (Act 150 & 220)
<b>4. Service Focus - Check all that apply.</b>	
<input checked="" type="checkbox"/> Provide early intervention to treat within the child's home	<input checked="" type="checkbox"/> Effect early return from foster or institutional care

## II. Service and Cost Information for Fiscal Year Completed or Being Requested for Next Fiscal Year:

### Instructions:

- In columns 6 & 7 enter the actual number and costs from the last full year.
- In columns 8 & 9 enter the number and costs projected for the next fiscal year.

Time Period Reported (for full prior fiscal year)			Time Period Reported	
5.	6. Actual Number	7. Actual Cost	8. Projected Number	9. Projected Cost
A. Number of Youth Served	10.00		40.00	
B. Number of Service Units (Define): Mileage, misc	727.00		44210.00	
C. Total Component Cost		\$20,247.35		\$54,544.00
D. Average Cost Per Unit		\$27.85		\$1.23
E. Average Cost Per Youth		\$2,024.73		\$1,363.60



**III. Impact Evaluation - Must be completed for continuing or ending components.**

Expected Area(s) of Impact	10. Number of Youth Served	Estimated Reductions	
		11. Number of Days	12. Cost
A. Youth Petitioned	28	162	\$15,000.00
B. Adjudications	28	162	\$15,000.00
C. Days of Family Foster Care	76	162	\$15,000.00
D. Days of Out-of-Home Detention	0	0	\$0.00
E. Days of Shelter Care	0	0	\$0.00
F. Days of Residential Treatment Care	0	0	\$0.00
G. State Wards Committed	0	0	\$0.00

**IV. Program Assessment / Evaluation - (Use Data from October 01, 2016 through September 30, 2017)**

<b>Program Service Type: Non-Scheduled Payments</b>				
Count each youth only once for the following data regarding this program.				
A. Total number of youth served in this program during the previous fiscal year.	10.00	100.00%	<input type="checkbox"/> N/A	
B. Number of youth released from this program within the previous fiscal year, who have achieved the goals of this program.	2.00	20.00%	<input type="checkbox"/> N/A	
C. Number of youth released from this program within the previous fiscal year, who did not achieve the goals of this program.	0.00	0.00%	<input type="checkbox"/> N/A	
D. Number of youth continuing services with the program.	8.00	80.00%	<input type="checkbox"/> N/A	
E. Number of youth moved from this program to Out-of-Home care within the previous fiscal year.	0.00	0.00%	<input type="checkbox"/> N/A	
F. Number of youth released from Out-of-Home Care and placed into this program within the previous fiscal year.	0.00	0.00%	<input type="checkbox"/> N/A	
G. Average length of time (in days) a youth was involved in the program within the previous fiscal year. Select if this is a one-time service <input checked="" type="checkbox"/>	98.00		<input type="checkbox"/> N/A	
H. Specify which date was used as beginning date. Ending date is date discharged from program (as stated on discharge summary): <b>Date of Intake</b>				

**V. Program Description - Must be completed for all components, except those being terminated, each year.**

For FY-2018, we are requesting non-scheduled payments funding of:

Transportation - Mileage reimbursement at the anticipated number of units of 40,000 miles at an average cost of \$.55/mile for a yearly cost of \$22,000. The strength of the service is that it provides needed transportation funding for the Foster Care children. This service was underutilized so a reduction in FY 18 was requested.

This was Substance Abuse Screening - 50 anticipated units is requested at an average cost of \$45.00/unit for a yearly cost of \$2250.00. The strength of the service is that it provides payment for substance abuse screening when no other resource is available. No weakness or problem areas were found. Other funding sources were utilized in FY 17, so the service was not utilized and has been reduced accordingly.

Miscellaneous - 50 Anticipated Units is requested at an average cost of \$50.00/unit for a yearly cost of \$2500.00. The strength of the service is that it provides payment for the required costs for unexpected client needs that cannot be covered from other immediate funding sources. Examples would include infant needs-diapers, formula, minor expenses to assure safety (Examples would include: crib, bedding linens, carbon monoxide detectors, fire alarms, door alarms etc.) No weakness or problem areas were found. This service was also underutilized and has been reduced, accordingly.

Transportation - Meals at the anticipated rate of 100 units at \$7.25/meal for a yearly cost of \$725.00 is requested. The strength of the service is that it reimburses the Volunteer Transporter for the cost of feeding themselves and the Foster Care children during the transport. No weakness or problem areas were found. During FY-2015, our actual costs were less than our projection.

10 children and their families were provided services at an actual cost of \$4598.89 for an average cost per unit \$459.89 for non-scheduled payments listed above.

For FY-2018, It is projected that we will serve 40 Youth/Family with a projected cost of \$27,975.00. Section III, 11A, B, and C represent our goal of reducing the total number of days of requested foster care of 6090 by 2% for FY-2017. Sections III, 12 A, B, and C are computed by multiplying the requested amount of Foster Care payments of \$643,139.86 by 4%. This is the amount requested to fund 11,563 days of Foster Care expenses at the average rate of \$55.62/day. Our goal is to reduce the number of petitions, adjudications, and the amount of days of family foster care.

This program does not pay for basic family needs that can be met by another funding source. The target population is youth that are CPS category I,II, or Juvenile Justice Youth to prevent removal or facilitate reunification.

Program eligibility includes:The local MDHHS may provide IHC services for Category I and II Children's Protective Services cases (or equivalent in tribal law cases), provided that one of the following apply to the service:

- a. It is ordered as an alternative to out-of-home care, OR,
- b. It prevents the need to petition the juvenile court for removal or prevent placement in voluntary foster care, OR,
- c. It accelerates an early return home and services are directed at the family/parent/guardian/anticipated placement for the youth.

AUTHORITY: Act 87,Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

Michigan Department of Health & Human Services (MDHHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an MDHHS office in your area.

## In-Home Care / Basic Grant Budget Detail Report (DHS-2094)

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

<b>Service Component (Full Title/Name) *</b>	<input checked="" type="radio"/> In-Home Care <input type="radio"/> Basic Grant
Juvenile Drug Court 2018	

### A. Personnel (Employees of the Court)

Administrative Unit:\*

☐ MDHHS

☒ Court

<b>1. Salary and Wages</b>			
Name(s)	Job Title	Hours/Week	Yearly Cost
Maria Reiser	Juvenile Drug Court Coordinator	37.50	\$56,834.00
<b>2. Fringe Benefits</b>			
FICA			\$4,117.00
Health Insurance			\$21,000.00
Disability			\$560.00
Life Insurance			\$80.00
Retirement			\$3,280.98
Workman's Comp			\$130.00
Total Personnel			\$86,001.98

### B. Program Support (For employees identified in "A" above)

<b>1. Travel</b>	Rate/Mile	Estimate No. of Miles	Yearly Cost
Mileage	\$0.5350	7,572.00	\$4,051.02
<b>2. Supplies and Materials (Description/Examples)</b>			Yearly Cost
Misc Items: Supplies, Graduation Supplies, Bus Tickets, Movie Passes			\$5,780.00
<b>3. Other Costs (Description/Examples)</b>	Rate/Unit		Yearly Cost
Cell phone		\$125.00	\$1,500.00
Training		\$3.00	\$1,500.00
Printing, binding, copies		\$2.00	\$1,000.00
Total Program Support			\$13,831.02

\* Must comply with the definitions and limits listed for court operated facilities in the Child Care Fund Handbook.

### C. Contractual Services

<b>1. Unit Rates</b>				
Name(s)	Rate	Unit Type	Total Units/ Contract	Yearly Cost
PBT/Monitoring	\$170.00	Each	30.00	\$5,100.00
<b>2. Closed End Contracts</b>				
Total Contractual				\$5,100.00

**D. Non-Scheduled Payments**

Type of Service (Description)	Anticipated No. Units to be Provided	Average Cost of Each Service Unit	Yearly Cost
Total Non-Scheduled			\$0.00

**E. Service Component - In-Home Care or Basic Grant**

(Add Totals for A, B, C, and D above)	Total Service Component Cost	\$104,933.00
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**F. Public Revenue:**

If you plan to fund any portion of this service component with other public revenue including other Child Care Funds or Basic Grant monies, or if this component is generating revenue (i.e. third party payments) specify the following:

SOURCE	To Be Provided	Yearly Cost
Juvenile Drug Court grant	Wages/Fringes	\$85,000.00
Total Public Revenue		\$85,000.00

**G. Subtract Total Public Revenue from Total Service Component Cost (E-F)**

Total Cost to Basic Grant, Net Anticipated IHC Matchable Expenditure (Gross Costs Less Other Revenue)	\$19,933.00
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AUTHORITY: Act 87, Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

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# In-Home Care / Basic Grant Program Component (DHS-4471) Report/Request

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

One of these forms must be completed for EACH In-Home Care or Basic Grant Service component for which there was State Reimbursement during the past fiscal year or proposed for next fiscal year as a new, revised, or continued component.

Component Manager	Telephone Number
Honorable Ervin, William - CCF Judges	

## I. Program Specific Information:

<b>1. Component Status</b>	
<input checked="" type="checkbox"/> Continued	<input type="checkbox"/> Terminated
<input type="checkbox"/> Revised	<input type="checkbox"/> New
<b>2. Target Population(s) Served - Check all that apply.</b>	
<b>A. Children Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Delinquent <input type="checkbox"/> Neglect  <b>B. Children NOT Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Written Complaint <input type="checkbox"/> CPS Category I, II, or III <input checked="" type="checkbox"/> Children likely to come under Jurisdiction of the Court	
<b>3. Area(s) of Intended Impact - Check primary area(s) only.</b>	
<b>A Reduction In:</b> <input checked="" type="checkbox"/> Number of Youth Petitioned <input checked="" type="checkbox"/> Number of Days of Out-of-Home Detention <input checked="" type="checkbox"/> Number of Adjudications <input type="checkbox"/> Number of Days of Shelter Care <input type="checkbox"/> Number of Days of Family Foster Care <input checked="" type="checkbox"/> Number of Days of Residential Treatment Care <input type="checkbox"/> Number of State Wards Committed (Act 150 & 220)	
<b>4. Service Focus - Check all that apply.</b>	
<input checked="" type="checkbox"/> Provide early intervention to treat within the child's home <input type="checkbox"/> Effect early return from foster or institutional care	

## II. Service and Cost Information for Fiscal Year Completed or Being Requested for Next Fiscal Year:

### Instructions:

- In columns 6 & 7 enter the actual number and costs from the last full year.
- In columns 8 & 9 enter the number and costs projected for the next fiscal year.

Time Period Reported (for full prior fiscal year)			Time Period Reported	
5.	6. Actual Number	7. Actual Cost	8. Projected Number	9. Projected Cost
A. Number of Youth Served	26.00		30.00	
B. Number of Service Units (Define): Contacts with juveniles	1549.00		1780.00	
C. Total Component Cost		\$76,292.00		\$86,658.00
D. Average Cost Per Unit		\$49.25		\$48.68
E. Average Cost Per Youth		\$2,934.30		\$2,888.60

**III. Impact Evaluation - Must be completed for continuing or ending components.**

Expected Area(s) of Impact	10. Number of Youth Served	Estimated Reductions	
		11. Number of Days	12. Cost
A. Youth Petitioned	15	180	\$45,000.00
B. Adjudications	13	180	\$45,000.00
C. Days of Family Foster Care	0	0	\$0.00
D. Days of Out-of-Home Detention	5	60	\$5,400.00
E. Days of Shelter Care	0	0	\$0.00
F. Days of Residential Treatment Care	5	362	\$60,000.00
G. State Wards Committed	0	0	\$0.00

**IV. Program Assessment / Evaluation - (Use Data from October 01, 2016 through September 30, 2017)**

<b>Program Service Type: Substance Abuse</b>			
Count each youth only once for the following data regarding this program.			
A. Total number of youth served in this program during the previous fiscal year.	26.00	100.00%	<input type="checkbox"/> N/A
B. Number of youth released from this program within the previous fiscal year, who have achieved the goals of this program.	8.00	30.77%	<input type="checkbox"/> N/A
C. Number of youth released from this program within the previous fiscal year, who did not achieve the goals of this program.	3.00	11.54%	<input type="checkbox"/> N/A
D. Number of youth continuing services with the program.	11.00	42.31%	<input type="checkbox"/> N/A
E. Number of youth moved from this program to Out-of-Home care within the previous fiscal year.	4.00	15.38%	<input type="checkbox"/> N/A
F. Number of youth released from Out-of-Home Care and placed into this program within the previous fiscal year.	0.00	0.00%	<input type="checkbox"/> N/A
G. Average length of time (in days) a youth was involved in the program within the previous fiscal year. Select if this is a one-time service <input type="checkbox"/>	246.00		<input type="checkbox"/> N/A
H. Specify which date was used as beginning date. Ending date is date discharged from program (as stated on discharge summary): <b>Date of Court Order</b>			

**V. Program Description - Must be completed for all components, except those being terminated, each year.**

**Juvenile Drug Treatment Court Program Description**

The purpose of the Juvenile Drug Treatment Court is to rehabilitate youth, reduce youth petitions, reduce adjudications for youth and their siblings and to lower the number of day of detention and residential treatment.

A juvenile can be referred to the Drug Treatment court by an interested person who has reason to believe that the juvenile has substance abuse problems and has committed an offense.

The Juvenile Drug Treatment Court Program involves three treatment phases and a fourth phase, which is after-care. The first phase is a minimum of 8 weeks; the second and third phases are a minimum of 12 weeks, and the fourth phase a minimum of 8 weeks. Transition to the next phase is contingent upon performance and points earned in the previous stage.

**PHASE I (Minimum 8 weeks)**

The goal of Phase 1 is to get and stay clean and sober. Phase I is characterized by a needs and risks assessment; development of goals and services plans; stabilization of the juvenile's behavior in school, home and the community and familiarizing the juvenile with Drug Treatment Court Program expectations. During Phase I, school attendance and drug counseling, and recovery support group will be required and monitored. The juvenile will meet with the Juvenile Drug Court Coordinator at least once per week. Drug testing will be conducted randomly at least twice per week by the Court or by a treatment agency. Transition to Phase II will be determined by participation and a point system.

**Purpose**

This phase is a period of initial adjustments to the Juvenile Drug Treatment Court Program. Juveniles will be involved in highly structured programming. The programming will provide the opportunity to develop skills, self-discipline, and the necessary supports to assist the juvenile in attaining sobriety and a crime-free lifestyle. Successful progress on goals in the phase will result in the movement to Phase II.

Phase I is characterized by: Assessment of needs and risk factors, orientation and development of goals and action plans, stabilizing behavior in home, school and community demonstrated personal investment by clients/families to program mission

Programming: Drug Treatment Court programming in Phase I will involve juvenile participation in:

Substance abuse screening and drug testing

Possible PBT monitoring

Skill development through required group work and individual counseling

Monitoring for adherence to program rules and probation orders

Attendance and participation in an approved educational program and or employment

Participation in recreational, cultural and challenge activities

Family/parent joint sessions

A system of rewards and sanctions based on performance

The following requirements must be met to transition to Phase II: Submit to all required drug screens and testing. Rate of attendance at 90% or higher for all required program components. Demonstrated satisfactory progress on Phase I goals and action plan. Attendance at and satisfactory participation in substance abuse group sessions.

Satisfactory attendance and conduct in educational program and or employment

Attend all court review hearings

Participate in Phase I successfully (Minimum 8 weeks)

Negative drug screens a minimum of 4 weeks consecutively

**PHASE II (Minimum 12 weeks)**

The focus of Phase II is to maintain sobriety and increase individual responsibility. Phase II is characterized by maintenance of recovery gains made in Phase I; the development of new goals and plans; the juvenile's demonstration of responsible decision making and commitment to the Drug Treatment Court Program. The juvenile will continue to attend school daily, submit to weekly drug testing; attend support programs and individual/family counseling. During this phase community service hours and restitution are addressed. The juvenile will continue to meet with the Juvenile Drug Court Coordinator at least weekly. Court review hearings will continue weekly. Transition to Phase III will continue to be determined by participation and a point system.

Purpose: The purpose of this phase will be to give additional time to the juvenile to practice skills and in maintaining sobriety and participating in drug court expectations. This phase provides the juvenile the opportunity to display sustained overall success.

Phase II is characterized by:

- Maintaining Phase I recovery progress
- Development of new treatment goals/action plans
- Juvenile's active demonstration of responsible decision making
- Practicing skills and abstinence learned in Phase I
- Continued personal investment in successfully completing the program

Programming: Drug Treatment Court programming in Phase II will involve juvenile's participation in:

- Drug and alcohol testing
- PBT monitoring if necessary
- Counseling
- A system of rewards and sanctions based on performance
- Continued attendance and participation in an approved educational program and or employment
- Monitoring for adherence to program rules and probation orders
- Community Service and restitution
- Weekly review hearings

Phase II Requirements:

- The following requirements must be met to transfer to Phase III of the program:
- Successfully passing drug screens and testing for 6 Weeks consecutively
- Maintain Phase I and Phase II progress and treatment goals
- Completion of all required community service hours and restitution
- Successful participation in all required Phase II activities
- Maintenance of good standing in an educational program and/or employment
- Attendance at scheduled appointments
- Recommendation to pass to Phase III from the Drug Treatment Court Team
- Continued acceptable compliance with program rules and court ordered probation
- Participate in Phase II successfully (Minimum 12 weeks)

PHASE III (Minimum 12 weeks)

Phase III is characterized by increased self-monitoring and decreased Court involvement. The juvenile and his/her family are expected to demonstrate an ability to function in a less structured program. The focus of Phase III is to maintain a drug-free lifestyle, pursue job training and placement, pursue extra-curricular activities, and work towards completion of community service hours and/or restitution. The juvenile will continue to attend school, attend a support program and to attend counseling as required. Court review hearings continue at every other week and drug testing remains at minimum of once per week. The juvenile shall meet with the Juvenile Drug Court Coordinator at least weekly in a face to face manner. Graduation to aftercare will be determined by participation and by the point system.

Purpose: The purpose of this phase is to help integrate juveniles into community-based support:

Phase III is characterized by:

- Increased self-monitoring and decreased court involvement
- Increased use of family supports and community-based supports
- Juvenile demonstrated readiness to function in less structured programming
- Increased level of demonstrated responsibility by the juvenile through involvement in education and/or employment and extra-curricular activities

Programming: Programming in Phase III will involve the juvenile's participation in:

- Random drug screens
- PBT monitoring if necessary
- Community supervision by staff
- Self-help support group
- An approved educational program and/or employment
- Attendance at status review hearings
- Required group or individual substance abuse sessions

Requirements:

- The following requirements must be met to transition to After Care phase:
- Successfully passing drug screens and testing for 6 weeks consecutively
- Maintaining Phase I, II, III treatment progress
- Complete all required community service hours and restitution



Attend and successfully participate in required group/individual sessions  
Attend review hearings every other week  
Receive recommendation for graduation by the Drug Treatment Court Team  
Successful participation in educational program and/or employment

#### PHASE IV - AFTERCARE (Minimum 8 weeks)

This phase will focus on the juvenile's use of community resources with less reliance on the drug treatment court. The juvenile will continue meeting with the Juvenile Drug Court Coordinator a minimum of one time per week in a face to face manner.

##### Purpose:

This phase will allow continued support while monitoring the juvenile's ability to maintain progress.

##### Aftercare is characterized by:

Increased self-monitoring/decreased court involvement  
Increased use of family supports and community-based supports  
Juvenile demonstrated readiness to function in less structured programming  
Increased level of demonstrated responsibility by the juvenile through involvement in education and/or employment and extra-curricular activities

##### Programming:

Individualized program for each juvenile  
Drug test minimum of every other week  
Meeting with Juvenile Drug Court Coordinator a minimum of once per week face to face.  
Focus on reintegration back into the community with utilization of community resources and less reliance on Drug Treatment Court programming  
Attend court hearings  
Continued participation in a support group

##### Requirements:

The following requirements must be met to be discharged from the program:  
Successfully pass drug screening/testing  
Maintaining Phase I, II, III treatment progress  
Complete all required community service hours and restitution  
Attend and successfully participate in required group/individual sessions  
Attend monthly court hearings  
Receive successful recommendation for discharge from Drug Treatment Court Team  
Successful participation in a support group  
Successful participation in an educational program and/or employment

#### DRUG TREATMENT COURT 17 YEAR-OLD TRACK

##### PHASE I

Minimum 12 weeks

Phase I is characterized greater structure and monitoring than standard probation, and by increased self-monitoring and decreased Court involvement by the end of the phase. The focus of Phase I is to maintain a drug-free lifestyle, demonstrate school success, pursue job training and placement, pursue extra-curricular activities and complete community service hours, pay off restitution and Court fees. The juvenile will attend school and counseling as required. Court review hearings are weekly for the first two weeks and then every other week for the remainder of the phase. Drug testing occurs a minimum of twice per week. The juvenile and family shall meet with the Juvenile Drug Court Coordinator weekly in addition to attending the review hearings. Transition to Phase II will be determined by participation and by the point system.

##### PURPOSE

The purpose of this phase is to offer increased monitoring of substance use and to help integrate juveniles into community-based support:

##### CHARACTERISTICS

1. More intensive monitoring of substance use and support than standard probation
2. Increased self-monitoring and decreased court involvement towards latter part of phase
3. Increased use of family supports and community-based supports
4. Juvenile demonstrated readiness to maintain substance-free lifestyle
5. Increased level of demonstrated responsibility by the juvenile through involvement in education and/or employment and extra-curricular activities

## PROGRAMMING

Programming in Phase I will involve the juvenile's participation in:

1. Random drug screens
2. Community, school/work supervision by staff
3. Positive peer and social activities
4. Successful educational program and/or employment
5. Attendance at status review hearings
6. Required group or individual substance abuse sessions

## REQUIREMENTS

The following requirements must be met to transition to Phase II:

1. Successfully passing drug screens and testing for 8 weeks consecutively
2. Maintaining Phase I progress
3. Complete all required community service hours and make measurable proportionate progress on restitution and court fees
4. Attend and successfully participate in required group/individual sessions
5. Attend review hearings weekly for two weeks, and every other week for the remainder of phase
6. Receive recommendation for transition by the Drug Treatment Court Team
7. Successful participation in educational program and/or employment

## Phase II - Minimum of 8 Weeks

This phase will focus on the juvenile's use of community resources with less reliance on the drug treatment court.

**PURPOSE:** This phase will allow continued support while monitoring the juvenile's ability to maintain progress.

## CHARACTERISTICS

1. Increased self-monitoring/decreased court involvement
2. Increased use of family supports and community-based supports
3. Juvenile demonstrated readiness to function in less structured programming
4. Increased level of demonstrated responsibility by the juvenile through involvement in education and/or employment and extra-curricular activities

## PROGRAMMING

Individualized program for each juvenile

1. Drug test minimum of once per week
2. Meeting with Juvenile Drug Court Coordinator a minimum of once per week
3. Focus on reintegration back into the community with utilization of community resources and less reliance on Juvenile Drug Treatment Court programming
4. Attend monthly review hearings
5. Continued participation in positive peer/support activities

## REQUIREMENTS

The following requirements must be met to be discharged from the program:

1. Successfully pass drug screening/testing
2. Maintaining Phase I & II treatment progress
3. Complete all required community service hours and restitution
4. Attend and successfully participate in required group/individual sessions
5. Attend monthly court hearings
6. Receive successful recommendation for discharge from Drug Treatment Court Team
7. Successful participation in a support group
8. Successful participation in an educational program and/or employment

## DRUG TREATMENT COURT PHASE ADVANCEMENT

### CRITERIA 17 YEAR-OLD TRACK

During each Phase of drug court you will earn points weekly. Your progress through each phase, and therefore consideration for phase transition, will be monitored according to the following:

Phase I:

1. Successful participation for a minimum of 12 weeks
2. Attendance at review hearings weekly for the first 4 weeks, every other week for the remainder of the phase
3. Submission to all required drug tests twice a week or per the discretion of court staff
4. Negative drug tests for 8 consecutive weeks to be eligible for transition to Phase II
5. Satisfactory progress on Phase I goals and action plan
6. Successful participation in positive peer group and support activities
7. Completion of all required community service hours and make measurable proportionate progress on restitution, and current on any court fees.
8. Attend and successfully participate in required group/individual counseling.
9. Maintenance of good standing in school and/or work
10. Continued acceptable compliance with program rules and court ordered probation
11. Recommendation from the Drug Court Treatment Team to transition to Phase
12. You must earn 10 points the week you are scheduled to transition to Phase

#### Phase II /Discharge Criteria:

1. Successful participation for a minimum of 8 weeks
2. Submission to all required drug tests weekly, or per the discretion of court staff
3. Negative drug tests
4. Maintenance of Phase I, II, & III treatment progress
5. Successful participation in positive peer group and support activities
6. Complete all required community service hours, restitution, and court fees
7. Attend and successfully participate in required group/individual sessions
8. Attend monthly review hearings
9. Receive successful recommendation for discharge from the Drug Court Treatment Team
10. Successful participation in an educational program and/or employment

#### WEEKLY POINT SYSTEM

Behavior	Points
Negative drug screens*	2
School/Work Attendance	1
School/Work Behaviors	1
Positive Support Activities/Peer Group	1
Treatment Attendance	1
Treatment Participation	1
Home Rules	1
Following Program Rules**	2
Bonus	1

\*refusal, no-shows, no specimen within 45-minutes maximum, diluted, tampered, or adulterated in anyway all count as a positive test

\*\*includes rules of probation

#### SANCTION SCHEDULE FOR JUVENILE DRUG COURT 17-YEAR OLD TRACK

Juvenile Drug Court 17-year Old Track is intended to provide additional support and monitoring for minors who are on probation and yet struggle with substance use. Therefore, the primary focus of this track will be on substance use and abstinence. All participants are expected to participate in a substance abuse program in the community. All other issues concerning the Order of Probation will be dealt with through the probation order.

If a minor enters the Juvenile Drug Court 17-year Old track while actively using, the team will work with that minor to establish sobriety. Once the minor is clean, the sanction schedule that appears below shall be utilized. If the minor is unable to successfully establish sobriety after 45 days, then they will be referred for residential treatment and removed from the program.

The following sanction schedule will be followed for non-compliance (positive drug screens):

1st offense                      2 days in non-secure detention

2nd 3rd offense                3-4 days in non-secure detention

4th or more offense            5 days minimum in non-secure detention

- Or jail time for up to 48 hours and unsuccessful discharge from drug court and probation

Note: If a participant is positive for any substance at any time during the program, the drug court judge may order that participant

to remain in non-secure detention until lab test results no longer detect the presence or metabolites of the said substance.

The services in this program are intensive and include weekly face to face contact with the drug court coordinator. There are no more than 20 youth assigned to a full time worker. Judicial costs are not paid from this program. No basic family needs that may be paid from another funding source will be paid from this program. There is a court order or signed parent/youth agreement for youth in this program.

AUTHORITY: Act 87,Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

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# In-Home Care / Basic Grant Budget Detail Report (DHS-2094)

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

<b>Service Component (Full Title/Name) *</b>	<input checked="" type="radio"/> In-Home Care <input type="radio"/> Basic Grant
Intensive Probation Program 2018	

## A. Personnel (Employees of the Court)

Administrative Unit:\*

☐ MDHHS

☒ Court

1. Salary and Wages			
Name(s)	Job Title	Hours/Week	Yearly Cost
Paul Marsh	Intensive Juvenile Probation Officer	37.50	\$56,845.00
Matt Hagen	Juvenile Referee	2.00	\$0.00
2. Fringe Benefits			
FICA (MARSH)			\$4,020.00
FICA (HAGEN 5%)			\$240.52
Insurance (Life, Disability, Health) (HAGEN 5%)			\$831.34
Workman's Comp (HAGEN 5%)			\$69.17
Retirement (HAGEN 5%)			\$220.09
Health Insurance (MARSH)			\$16,249.00
Disability Insurance (MARSH)			\$560.00
Life Insurance (MARSH)			\$80.00
Retirement Expenses (MARSH)			\$10,200.00
Workman's Comp (MARSH)			\$750.00
Total Personnel			\$90,065.12

## B. Program Support (For employees identified in "A" above)

1. Travel	Rate/Mile	Estimate No. of Miles	Yearly Cost
Mileage	\$0.5400	15,275.00	\$8,248.50
2. Supplies and Materials (Description/Examples)			Yearly Cost
Misc. Items: Supplies, bus tickets, movie tickets			\$1,200.00
3. Other Costs (Description/Examples)	Rate/Unit		Yearly Cost
Car Telephone	\$125.00		\$960.00
Training	\$400.00		\$2,000.00
Total Program Support			\$12,408.50

\* Must comply with the definitions and limits listed for court operated facilities in the Child Care Fund Handbook.

## C. Contractual Services

1. Unit Rates				
Name(s)	Rate	Unit Type	Total Units/ Contract	Yearly Cost
PBT Monitoring	\$6.00	Each	335.00	\$2,010.00
2. Closed End Contracts				
Total Contractual				\$2,010.00

**D. Non-Scheduled Payments**

Type of Service (Description)	Anticipated No. Units to be Provided	Average Cost of Each Service Unit	Yearly Cost
Total Non-Scheduled			\$0.00

**E. Service Component - In-Home Care or Basic Grant**

(Add Totals for A, B, C, and D above)	Total Service Component Cost	\$104,483.62
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**F. Public Revenue:**

If you plan to fund any portion of this service component with other public revenue including other Child Care Funds or Basic Grant monies, or if this component is generating revenue (i.e. third party payments) specify the following:

SOURCE	To Be Provided	Yearly Cost
Total Public Revenue		\$0.00

**G. Subtract Total Public Revenue from Total Service Component Cost (E-F)**

Total Cost to Basic Grant, Net Anticipated IHC Matchable Expenditure (Gross Costs Less Other Revenue)	\$104,483.62
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AUTHORITY: Act 87, Public Acts of 1978, as amended.  
 COMPLETION: is Required.  
 PENALTY: State reimbursement will be withheld from local government

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# In-Home Care / Basic Grant Program Component (DHS-4471) Report/Request

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

One of these forms must be completed for EACH In-Home Care or Basic Grant Service component for which there was State Reimbursement during the past fiscal year or proposed for next fiscal year as a new, revised, or continued component.

Component Manager	Telephone Number
Honorable Ervin, William - CCF Judges	

## I. Program Specific Information:

<b>1. Component Status</b>	
<input checked="" type="checkbox"/> Continued	<input type="checkbox"/> Terminated
<input type="checkbox"/> Revised	<input type="checkbox"/> New
<b>2. Target Population(s) Served - Check all that apply.</b>	
<b>A. Children Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Delinquent <input type="checkbox"/> Neglect	
<b>B. Children NOT Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Written Complaint <input type="checkbox"/> CPS Category I, II, or III <input checked="" type="checkbox"/> Children likely to come under Jurisdiction of the Court	
<b>3. Area(s) of Intended Impact - Check primary area(s) only.</b>	
<b>A Reduction In:</b> <input checked="" type="checkbox"/> Number of Youth Petitioned <input checked="" type="checkbox"/> Number of Days of Out-of-Home Detention <input checked="" type="checkbox"/> Number of Adjudications <input checked="" type="checkbox"/> Number of Days of Shelter Care <input type="checkbox"/> Number of Days of Family Foster Care <input type="checkbox"/> Number of Days of Residential Treatment Care <input type="checkbox"/> Number of State Wards Committed (Act 150 & 220)	
<b>4. Service Focus - Check all that apply.</b>	
<input checked="" type="checkbox"/> Provide early intervention to treat within the child's home <input type="checkbox"/> Effect early return from foster or institutional care	

## II. Service and Cost Information for Fiscal Year Completed or Being Requested for Next Fiscal Year:

### Instructions:

- In columns 6 & 7 enter the actual number and costs from the last full year.
- In columns 8 & 9 enter the number and costs projected for the next fiscal year.

Time Period Reported (for full prior fiscal year)			Time Period Reported	
5.	6. Actual Number	7. Actual Cost	8. Projected Number	9. Projected Cost
A. Number of Youth Served	26.00		35.00	
B. Number of Service Units (Define): # of contacts w/youth	3562.00		5000.00	
C. Total Component Cost		\$104,283.00		\$106,368.00
D. Average Cost Per Unit		\$29.27		\$21.27
E. Average Cost Per Youth		\$4,010.88		\$3,039.08

**III. Impact Evaluation - Must be completed for continuing or ending components.**

Expected Area(s) of Impact	10. Number of Youth Served	Estimated Reductions	
		11. Number of Days	12. Cost
A. Youth Petitioned	15	3333	\$50,000.00
B. Adjudications	15	3333	\$50,000.00
C. Days of Family Foster Care	0	0	\$0.00
D. Days of Out-of-Home Detention	19	266	\$35,910.00
E. Days of Shelter Care	1	30	\$3,000.00
F. Days of Residential Treatment Care	6	180	\$22,500.00
G. State Wards Committed	0	0	\$0.00

**IV. Program Assessment / Evaluation - (Use Data from October 01, 2016 through September 30, 2017)**

<b>Program Service Type:</b> Intensive Probation			
Count each youth only once for the following data regarding this program.			
A. Total number of youth served in this program during the previous fiscal year.	26.00	100.00%	<input type="checkbox"/> N/A
B. Number of youth released from this program within the previous fiscal year, who have achieved the goals of this program.	4.00	15.38%	<input type="checkbox"/> N/A
C. Number of youth released from this program within the previous fiscal year, who did not achieve the goals of this program.	1.00	3.85%	<input type="checkbox"/> N/A
D. Number of youth continuing services with the program.	19.00	73.08%	<input type="checkbox"/> N/A
E. Number of youth moved from this program to Out-of-Home care within the previous fiscal year.	1.00	3.85%	<input type="checkbox"/> N/A
F. Number of youth released from Out-of-Home Care and placed into this program within the previous fiscal year.	1.00	3.85%	<input type="checkbox"/> N/A
G. Average length of time (in days) a youth was involved in the program within the previous fiscal year. Select if this is a one-time service <input type="checkbox"/>	225.00		<input type="checkbox"/> N/A
H. Specify which date was used as beginning date. Ending date is date discharged from program (as stated on discharge summary): Date of Court Order			



**V. Program Description - Must be completed for all components, except those being terminated, each year.**

The Intensive Probation Program objective is to provide intensive probation and counseling for young people who would otherwise be placed in the county's foster homes, group homes, or out of county placement, or who are identified as high placement risks in terms of eventual placements. Juveniles are referred by their current Probation Officer into the program as they have been identified as unsuccessful in regular probation and/or needing more direct supervision. In Intensive Probation participants have a minimum contact of four times weekly. Intensive Probation Candidates are selected on the basis of criteria developed by the court, which predicts probability of recidivism and type of probable offense. However, new youths could be eligible for intensive probation if they score high in probability for out of home placement.

On Intensive Probation, the expectations are high, and a great deal of effort is required. This effort does not go unrewarded. A system of consequences, both positive and negative, is used to reinforce your efforts. Phase advancement and tokens, in addition to developing a sense of accomplishments, are all benefits you gain by putting forth positive effort. There are consequences for probation and rule violations. Youth may be placed on PBT monitoring if it is determined to be an effective tool to assist in their success. Through restrictions, shelter home placements, and slower movement through the phases, you will learn that misbehavior is responded to immediately.

The Intensive Probation Officer utilizes a cell phone in the scope of his duties and may be required to be on call for youth in crisis. The same is true for mileage.

County Juvenile Office and Juvenile Referee Matt Hagen spends about 5% of his time handling issues associated with the Intensive Probation Program. A portion of Referee Hagen's wages are reimbursed through the CJO program. We are seeking reimbursement of a portion of the fringes for Referee Hagen.

Services in this program are intensive in nature and meet with the probation officer face to face at least weekly; often much more than required. There are no more than 20 youth assigned to a full time worker. None of the expenses of this program are for judicial costs. No basic family needs are being paid that have other funding sources available. All youth are either court ordered or have a signed parent/youth agreement in place.

AUTHORITY: Act 87, Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

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## In-Home Care / Basic Grant Budget Detail Report (DHS-2094)

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

<b>Service Component (Full Title/Name) *</b>	<input checked="" type="radio"/> In-Home Care <input type="radio"/> Basic Grant
Counseling (DHS) 2017-2018	

**A. Personnel (Employees of the Court)**      **Administrative Unit:\***      ☒ MDHHS      ☐ Court

<b>1. Salary and Wages</b>			
Name(s)	Job Title	Hours/Week	Yearly Cost
<b>2. Fringe Benefits</b>			
<b>Total Personnel</b>			<b>\$0.00</b>

### B. Program Support (For employees identified in "A" above)

1. Travel	Rate/Mile	Estimate No. of Miles	Yearly Cost
2. Supplies and Materials (Description/Examples)			Yearly Cost
3. Other Costs (Description/Examples)	Rate/Unit		Yearly Cost
* Must comply with the definitions and limits listed for court operated facilities in the		Total Program Support	\$0.00

\* Must comply with the definitions and limits listed for court operated facilities in the Child Care Fund Handbook.

### C. Contractual Services

<b>1. Unit Rates</b>				
Name(s)	Rate	Unit Type	Total Units/ Contract	Yearly Cost
Licensed/Contracted Practitioners	\$63.00	1 hour	100.00	\$6,300.00
<b>2. Closed End Contracts</b>				
<b>Total Contractual</b>				<b>\$6,300.00</b>

### D. Non-Scheduled Payments

Type of Service (Description)	Anticipated No. Units to be Provided	Average Cost of Each Service Unit	Yearly Cost
<b>Total Non-Scheduled</b>			<b>\$0.00</b>

### E. Service Component - In-Home Care or Basic Grant

(Add Totals for A, B, C, and D above)	<b>Total Service Component Cost</b>	<b>\$6,300.00</b>
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**F. Public Revenue:**

If you plan to fund any portion of this service component with other public revenue including other Child Care Funds or Basic Grant monies, or if this component is generating revenue (i.e. third party payments) specify the following:

SOURCE	To Be Provided	Yearly Cost
Total Public Revenue		\$0.00

**G. Subtract Total Public Revenue from Total Service Component Cost (E-F)**

Total Cost to Basic Grant, Net Anticipated IHC Matchable Expenditure (Gross Costs Less Other Revenue)	\$6,300.00
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AUTHORITY: Act 87, Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

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# In-Home Care / Basic Grant Program Component (DHS-4471) Report/Request

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

One of these forms must be completed for EACH In-Home Care or Basic Grant Service component for which there was State Reimbursement during the past fiscal year or proposed for next fiscal year as a new, revised, or continued component.

Component Manager	Telephone Number
Prabucki, Antoinette - CCF Organization Management	(989) 772-8502

## I. Program Specific Information:

<b>1. Component Status</b>	
<input checked="" type="checkbox"/> Continued	<input type="checkbox"/> Terminated
<input type="checkbox"/> Revised	<input type="checkbox"/> New
<b>2. Target Population(s) Served - Check all that apply.</b>	
<b>A. Children Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Delinquent <input checked="" type="checkbox"/> Neglect	
<b>B. Children NOT Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Written Complaint <input checked="" type="checkbox"/> CPS Category I, II, or III <input checked="" type="checkbox"/> Children likely to come under Jurisdiction of the Court	
<b>3. Area(s) of Intended Impact - Check primary area(s) only.</b>	
<b>A Reduction In:</b> <input checked="" type="checkbox"/> Number of Youth Petitioned <input checked="" type="checkbox"/> Number of Adjudications <input checked="" type="checkbox"/> Number of Days of Family Foster Care	<input type="checkbox"/> Number of Days of Out-of-Home Detention <input type="checkbox"/> Number of Days of Shelter Care <input type="checkbox"/> Number of Days of Residential Treatment Care <input type="checkbox"/> Number of State Wards Committed (Act 150 & 220)
<b>4. Service Focus - Check all that apply.</b>	
<input checked="" type="checkbox"/> Provide early intervention to treat within the child's home	<input checked="" type="checkbox"/> Effect early return from foster or institutional care

## II. Service and Cost Information for Fiscal Year Completed or Being Requested for Next Fiscal Year:

### Instructions:

- In columns 6 & 7 enter the actual number and costs from the last full year.
- In columns 8 & 9 enter the number and costs projected for the next fiscal year.

	Time Period Reported (for full prior fiscal year)		Time Period Reported	
5.	6. Actual Number	7. Actual Cost	8. Projected Number	9. Projected Cost
A. Number of Youth Served	1.00		10.00	
B. Number of Service Units (Define): Counseling	95.00		250.00	
C. Total Component Cost		\$6,400.00		\$15,750.00
D. Average Cost Per Unit		\$67.36		\$63.00
E. Average Cost Per Youth		\$6,400.00		\$1,575.00

**III. Impact Evaluation - Must be completed for continuing or ending components.**

Expected Area(s) of Impact	10. Number of Youth Served	Estimated Reductions	
		11. Number of Days	12. Cost
A. Youth Petitioned	28	162	\$15,000.00
B. Adjudications	28	162	\$15,000.00
C. Days of Family Foster Care	76	162	\$15,000.00
D. Days of Out-of-Home Detention	0	0	\$0.00
E. Days of Shelter Care	0	0	\$0.00
F. Days of Residential Treatment Care	0	0	\$0.00
G. State Wards Committed	0	0	\$0.00

**IV. Program Assessment / Evaluation - (Use Data from October 01, 2016 through September 30, 2017)**

<b>Program Service Type: Counseling</b>			
Count each youth only once for the following data regarding this program.			
A. Total number of youth served in this program during the previous fiscal year.	1.00	100.00%	<input type="checkbox"/> N/A
B. Number of youth released from this program within the previous fiscal year, who have achieved the goals of this program.	1.00	100.00%	<input type="checkbox"/> N/A
C. Number of youth released from this program within the previous fiscal year, who did not achieve the goals of this program.	0.00	0.00%	<input type="checkbox"/> N/A
D. Number of youth continuing services with the program.	1.00	100.00%	<input type="checkbox"/> N/A
E. Number of youth moved from this program to Out-of-Home care within the previous fiscal year.	0.00	0.00%	<input type="checkbox"/> N/A
F. Number of youth released from Out-of-Home Care and placed into this program within the previous fiscal year.	0.00	0.00%	<input type="checkbox"/> N/A
G. Average length of time (in days) a youth was involved in the program within the previous fiscal year. Select if this is a one-time service <input type="checkbox"/>	90.00		<input type="checkbox"/> N/A
H. Specify which date was used as beginning date. Ending date is date discharged from program (as stated on discharge summary): <b>Date of Intake</b>			

**V. Program Description - Must be completed for all components, except those being terminated, each year.**

Counseling services include psychological/psychiatric evaluations, as well as contractual clinical, outreach, individual, family, and group counseling. Counseling services target youth at risk for out of home placement, or effect a child's early return to his or her home from family foster care or institutional care.

Referrals for psychological/psychiatric evaluations are made to licensed professionals and initiated by the Children's Services Worker that are pre-approved by their Supervisor. A comprehensive written report is received prior to payment being made. The report provides an assessment of the individual along with recommendations for service/treatment to reduce the risk of child abuse/neglect.

Referrals for counseling services are made to Fair Market Rate Contract Counseling Providers. Referrals are initiated by the Children's Services Worker and approved by their Supervisor. Referrals for counseling services are time and counseling session limited. Payment is not made without a monthly written report from the Counselor that clearly reflects the progress of the youth being served. The report provides an assessment of the individuals progress toward goals that are needed to reduce the risk of child abuse/neglect.

This program does not pay for basic family needs that can be met by another funding source. The target population is youth that are CPS category I or II or Juvenile Justice Youth to prevent removal or facilitate reunification.

Only licensed practitioners will be used including:

Dr. Petras, Dr. Barnes, Ronan Psychological services and service providers that are licensed and hold a fair market rate contract with the State of Michigan for counseling services.

AUTHORITY: Act 87,Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

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**In-Home Care / Basic Grant Budget Detail Report (DHS-2094)**

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

<b>Service Component (Full Title/Name) *</b>	<input type="radio"/> In-Home Care <input checked="" type="radio"/> Basic Grant
In-Home Care Drug Testing 2018	

**A. Personnel (Employees of the Court)**      **Administrative Unit:\***      ☐ MDHHS      ☒ Court

<b>1. Salary and Wages</b>			
Name(s)	Job Title	Hours/Week	Yearly Cost
<b>2. Fringe Benefits</b>			
Total Personnel			\$0.00

**B. Program Support (For employees identified in "A" above)**

1. Travel	Rate/Mile	Estimate No. of Miles	Yearly Cost
2. Supplies and Materials (Description/Examples)			Yearly Cost
3. Other Costs (Description/Examples)		Rate/Unit	Yearly Cost
Drug Testing supplies for In-Home Care youth.		\$7.00	\$10,000.00
* Must comply with the definitions and limits listed for court operated facilities in the Child Care Fund Handbook			
Total Program Support			\$10,000.00

\* Must comply with the definitions and limits listed for court operated facilities in the Child Care Fund Handbook.

**C. Contractual Services**

<b>1. Unit Rates</b>				
Name(s)	Rate	Unit Type	Total Units/ Contract	Yearly Cost
<b>2. Closed End Contracts</b>				
Total Contractual				\$0.00

**D. Non-Scheduled Payments**

Type of Service (Description)	Anticipated No. Units to be Provided	Average Cost of Each Service Unit	Yearly Cost
Total Non-Scheduled			\$0.00

**E. Service Component - In-Home Care or Basic Grant**

(Add Totals for A, B, C, and D above)	Total Service Component Cost	\$10,000.00
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**F. Public Revenue:**

If you plan to fund any portion of this service component with other public revenue including other Child Care Funds or Basic Grant monies, or if this component is generating revenue (i.e. third party payments) specify the following:

SOURCE	To Be Provided	Yearly Cost
Total Public Revenue		\$0.00

**G. Subtract Total Public Revenue from Total Service Component Cost (E-F)**

Total Cost to Basic Grant, Net Anticipated IHC Matchable Expenditure (Gross Costs Less Other Revenue)	\$10,000.00
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AUTHORITY: Act 87, Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

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# In-Home Care / Basic Grant Program Component (DHS-4471) Report/Request

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

One of these forms must be completed for EACH In-Home Care or Basic Grant Service component for which there was State Reimbursement during the past fiscal year or proposed for next fiscal year as a new, revised, or continued component.

Component Manager	Telephone Number
Honorable Ervin, William - CCF Judges	

## I. Program Specific Information:

<b>1. Component Status</b>	
<input checked="" type="checkbox"/> Continued	<input type="checkbox"/> Terminated
<input type="checkbox"/> Revised	<input type="checkbox"/> New
<b>2. Target Population(s) Served - Check all that apply.</b>	
<b>A. Children Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Delinquent <input type="checkbox"/> Neglect	
<b>B. Children NOT Under Jurisdiction of Court</b> <input type="checkbox"/> Written Complaint <input type="checkbox"/> CPS Category I, II, or III <input checked="" type="checkbox"/> Children likely to come under Jurisdiction of the Court	
<b>3. Area(s) of Intended Impact - Check primary area(s) only.</b>	
<b>A Reduction In:</b> <input checked="" type="checkbox"/> Number of Youth Petitioned <input checked="" type="checkbox"/> Number of Adjudications <input type="checkbox"/> Number of Days of Family Foster Care	<input type="checkbox"/> Number of Days of Out-of-Home Detention <input type="checkbox"/> Number of Days of Shelter Care <input checked="" type="checkbox"/> Number of Days of Residential Treatment Care <input type="checkbox"/> Number of State Wards Committed (Act 150 & 220)
<b>4. Service Focus - Check all that apply.</b>	
<input checked="" type="checkbox"/> Provide early intervention to treat within the child's home <input type="checkbox"/> Effect early return from foster or institutional care	

## II. Service and Cost Information for Fiscal Year Completed or Being Requested for Next Fiscal Year:

### Instructions:

- In columns 6 & 7 enter the actual number and costs from the last full year.
- In columns 8 & 9 enter the number and costs projected for the next fiscal year.

Time Period Reported (for full prior fiscal year)			Time Period Reported	
5.	6. Actual Number	7. Actual Cost	8. Projected Number	9. Projected Cost
A. Number of Youth Served	59.00		59.00	
B. Number of Service Units (Define): 60 partic. X 6.87 per test X about 25 tests each	1455.00		1455.00	
C. Total Component Cost		\$10,000.00		\$10,000.00
D. Average Cost Per Unit		\$6.87		\$6.87
E. Average Cost Per Youth		\$169.49		\$169.49

**III. Impact Evaluation - Must be completed for continuing or ending components.**

Expected Area(s) of Impact	10. Number of Youth Served	Estimated Reductions	
		11. Number of Days	12. Cost
A. Youth Petitioned	2	60	\$12,000.00
B. Adjudications	2	60	\$12,000.00
C. Days of Family Foster Care	0	0	\$0.00
D. Days of Out-of-Home Detention	0	0	\$0.00
E. Days of Shelter Care	0	0	\$0.00
F. Days of Residential Treatment Care	1	90	\$18,000.00
G. State Wards Committed	0	0	\$0.00

**IV. Program Assessment / Evaluation - (Use Data from October 01, 2016 through September 30, 2017)**

<b>Program Service Type: Substance Abuse</b>			
Count each youth only once for the following data regarding this program.			
A. Total number of youth served in this program during the previous fiscal year.	59.00	100.00%	<input type="checkbox"/> N/A
B. Number of youth released from this program within the previous fiscal year, who have achieved the goals of this program.	29.00	49.15%	<input type="checkbox"/> N/A
C. Number of youth released from this program within the previous fiscal year, who did not achieve the goals of this program.	0.00	0.00%	<input type="checkbox"/> N/A
D. Number of youth continuing services with the program.	30.00	50.85%	<input type="checkbox"/> N/A
E. Number of youth moved from this program to Out-of-Home care within the previous fiscal year.	0.00	0.00%	<input type="checkbox"/> N/A
F. Number of youth released from Out-of-Home Care and placed into this program within the previous fiscal year.	0.00	0.00%	<input type="checkbox"/> N/A
G. Average length of time (in days) a youth was involved in the program within the previous fiscal year. Select if this is a one-time service <input type="checkbox"/>	120.00		<input type="checkbox"/> N/A
H. Specify which date was used as beginning date. Ending date is date discharged from program (as stated on discharge summary): <b>Date of Court Order</b>			

**V. Program Description - Must be completed for all components, except those being terminated, each year.**

All probationers with drug or alcohol related offenses and/or have an identified drug or alcohol issue must submit to random drug and alcohol testing approximately 1-2 times per week. Due to our drug testing policies we anticipate drug testing costs to be \$6.87 per test x 59clients X 25 tests per client. This is an intensive program that is designed to prevent placement or allow early return to home. All of the youth in this program use drugs or alcohol. In addition, each meet at least one of the other required factors such as a history of abuse/neglect, school truancy, suspensions or expulsions, run away, poor or nonexistent parenting and/or negative peer relationships.

<p><b>AUTHORITY:</b> Act 87, Public Acts of 1978, as amended.</p> <p><b>COMPLETION:</b> is Required.</p> <p><b>PENALTY:</b> State reimbursement will be withheld from local government</p>	<p>Michigan Department of Health &amp; Human Services (MDHHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an MDHHS office in your area.</p>
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# In-Home Care / Basic Grant Budget Detail Report (DHS-2094)

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

Service Component (Full Title/Name) *	<input checked="" type="radio"/> In-Home Care <input type="radio"/> Basic Grant
Day Treatment Program 2018	

A. Personnel (Employees of the Court)      Administrative Unit:\*      ☐ MDHHS      ☒ Court

1. Salary and Wages			
Name(s)	Job Title	Hours/Week	Yearly Cost
2. Fringe Benefits			
Total Personnel			\$0.00

## B. Program Support (For employees identified in "A" above)

1. Travel	Rate/Mile	Estimate No. of Miles	Yearly Cost
2. Supplies and Materials (Description/Examples)			Yearly Cost
3. Other Costs (Description/Examples)	Rate/Unit		Yearly Cost
Total Program Support			\$0.00

\* Must comply with the definitions and limits listed for court operated facilities in the Child Care Fund Handbook.

## C. Contractual Services

1. Unit Rates				
Name(s)	Rate	Unit Type	Total Units/ Contract	Yearly Cost
2. Closed End Contracts				
Contract with McBride Homes				\$477,000.00
Total Contractual				\$477,000.00

## D. Non-Scheduled Payments

Type of Service (Description)	Anticipated No. Units to be Provided	Average Cost of Each Service Unit	Yearly Cost
Total Non-Scheduled			\$0.00

## E. Service Component - In-Home Care or Basic Grant

(Add Totals for A, B, C, and D above)	Total Service Component Cost	\$477,000.00
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**F. Public Revenue:**

If you plan to fund any portion of this service component with other public revenue including other Child Care Funds or Basic Grant monies, or if this component is generating revenue (i.e. third party payments) specify the following:

SOURCE	To Be Provided	Yearly Cost
Total Public Revenue		\$0.00

**G. Subtract Total Public Revenue from Total Service Component Cost (E-F)**

Total Cost to Basic Grant, Net Anticipated IHC Matchable Expenditure (Gross Costs Less Other Revenue)	\$477,000.00
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AUTHORITY: Act 87, Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

Michigan Department of Health & Human Services (MDHHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an MDHHS office in your area.

## In-Home Care / Basic Grant Program Component (DHS-4471) Report/Request

Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

One of these forms must be completed for EACH In-Home Care or Basic Grant Service component for which there was State Reimbursement during the past fiscal year or proposed for next fiscal year as a new, revised, or continued component.

Component Manager	Telephone Number
Honorable Ervin, William - CCF Judges	

### I. Program Specific Information:

<b>1. Component Status</b>	
<input checked="" type="checkbox"/> Continued	<input type="checkbox"/> Terminated
<input type="checkbox"/> Revised	<input type="checkbox"/> New
<b>2. Target Population(s) Served - Check all that apply.</b>	
<b>A. Children Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Delinquent <input type="checkbox"/> Neglect	
<b>B. Children NOT Under Jurisdiction of Court</b> <input checked="" type="checkbox"/> Written Complaint <input type="checkbox"/> CPS Category I, II, or III <input checked="" type="checkbox"/> Children likely to come under Jurisdiction of the Court	
<b>3. Area(s) of Intended Impact - Check primary area(s) only.</b>	
<b>A Reduction In:</b> <input checked="" type="checkbox"/> Number of Youth Petitioned <input checked="" type="checkbox"/> Number of Days of Out-of-Home Detention <input checked="" type="checkbox"/> Number of Adjudications <input checked="" type="checkbox"/> Number of Days of Shelter Care <input checked="" type="checkbox"/> Number of Days of Family Foster Care <input checked="" type="checkbox"/> Number of Days of Residential Treatment Care <input type="checkbox"/> Number of State Wards Committed (Act 150 & 220)	
<b>4. Service Focus - Check all that apply.</b>	
<input checked="" type="checkbox"/> Provide early intervention to treat within the child's home <input checked="" type="checkbox"/> Effect early return from foster or institutional care	

### II. Service and Cost Information for Fiscal Year Completed or Being Requested for Next Fiscal Year:

**Instructions:**

- In columns 6 & 7 enter the actual number and costs from the last full year.
- In columns 8 & 9 enter the number and costs projected for the next fiscal year.

Time Period Reported (for full prior fiscal year)			Time Period Reported	
5.	6. Actual Number	7. Actual Cost	8. Projected Number	9. Projected Cost
A. Number of Youth Served	30.00		32.00	
B. Number of Service Units (Define): days/year	3780.00		6436.00	
C. Total Component Cost		\$492,000.00		\$477,000.00
D. Average Cost Per Unit		\$130.15		\$74.11
E. Average Cost Per Youth		\$16,400.00		\$14,906.25

**III. Impact Evaluation - Must be completed for continuing or ending components.**

Expected Area(s) of Impact	10. Number of Youth Served	Estimated Reductions	
		11. Number of Days	12. Cost
A. Youth Petitioned	20	175	\$35,000.00
B. Adjudications	20	175	\$35,000.00
C. Days of Family Foster Care	2	90	\$8,100.00
D. Days of Out-of-Home Detention	15	450	\$63,000.00
E. Days of Shelter Care	1	30	\$3,000.00
F. Days of Residential Treatment Care	6	1050	\$315,000.00
G. State Wards Committed	0	0	\$0.00

**IV. Program Assessment / Evaluation - (Use Data from October 01, 2016 through September 30, 2017)**

<b>Program Service Type: Day Treatment</b>			
Count each youth only once for the following data regarding this program.			
A. Total number of youth served in this program during the previous fiscal year.	30.00	100.00%	<input type="checkbox"/> N/A
B. Number of youth released from this program within the previous fiscal year, who have achieved the goals of this program.	11.00	36.67%	<input type="checkbox"/> N/A
C. Number of youth released from this program within the previous fiscal year, who did not achieve the goals of this program.	1.00	3.33%	<input type="checkbox"/> N/A
D. Number of youth continuing services with the program.	9.00	30.00%	<input type="checkbox"/> N/A
E. Number of youth moved from this program to Out-of-Home care within the previous fiscal year.	6.00	20.00%	<input type="checkbox"/> N/A
F. Number of youth released from Out-of-Home Care and placed into this program within the previous fiscal year.	3.00	10.00%	<input type="checkbox"/> N/A
G. Average length of time (in days) a youth was involved in the program within the previous fiscal year. Select if this is a one-time service <input type="checkbox"/>	174.00		<input type="checkbox"/> N/A
H. Specify which date was used as beginning date. Ending date is date discharged from program (as stated on discharge summary): <b>Date of Intake</b>			

**V. Program Description - Must be completed for all components, except those being terminated, each year.**

The mission of the Isabella County Day Treatment Program is to offer at-risk youth and their families professional services and support. The Day Treatment Program strives to serve at-risk youth by providing them with the skills necessary to manage their behavior in socially acceptable ways, and providing them with an environment which will offer youth the opportunity to reach their fullest potential while achieving educational and treatment goals. The Program recognizes the strengths and identifies the needs of the family as a whole. It is designed as a process, offering strategies for changes that will positively enhance the environment in which families live.

**Introduction**

The Isabella County Day Treatment Program is an intensive, local, community-based, educational and family-oriented therapeutic rehabilitation program that addresses the needs of up to 20 youth, and their families, who display severe emotional and behavioral difficulties. The Day Treatment Program provides a wide range of intensive rehabilitative services to youth in a highly structured day time setting while allowing the youth to return and live at home nightly. The Program transports youth to and from the on-site location and operates Monday through Friday 8:00 am to 7:30 pm (excluding Holidays). In addition to on-site rehabilitation and supervision, which the youth receive during Program hours of operation, the Program also provides intensive surveillance of youth during non-Program hours.

The Day Treatment Program includes an on-site component and an aftercare component. The actual length of the on-site component of the Program is determined by each youth's own progress. Although it is possible for a youth to complete the on-site portion in four and half months, it frequently requires more time to adequately prepare youth for their full-time transition back into the home, community, and schools. Aftercare is designed to provide support and supervision to the youth and family during the youth's transition back into the community. The aftercare component embodies the same philosophies and methodologies as those utilized in the Day Treatment setting.

**Rationale**

Prior to the establishment of the Day Treatment Program, the Court made use of out-of-county or out-of-state facilities to provide treatment services to its juvenile offenders. Non-local placement has several inherent disadvantages including high cost, lack of sufficient family involvement in the treatment process, and a low success rate.

Sound community-based treatment can provide a more cost effective, beneficial program to juvenile offenders in the following ways:

1. Local community-based programs are normally small and can be designed to provide a more intensive treatment of individual problems.
2. Youth have a tendency to be more responsive to treatment efforts when they can have regular contact with their families and exposure to a familiar environment.
3. The youth's family is close at hand to receive services from the Program and provide the love, support, and active participation that are vital ingredients of the youth's successful rehabilitation.
4. The ultimate goal of Day Treatment is to assimilate the youth back into the community where they will live, work, and attend school. The transition back into the community and schools is much smoother when youth receive services in their own community.
5. The youth have daily contact with their families when returning home in the evening hours.
6. The youth and families have the opportunity to regularly practice their new skills.
7. The youth can learn to become involved in the community while in Day Treatment and then continue this involvement once discharged from the Program.
8. In comparison to the non-local residential treatment, community-based treatment costs are minimal.

**Problem Areas for Youth**

**Low Self-Image**

It is proven that many times delinquent, negative, inappropriate, self-defeating behaviors are a result of low self-image. Low self-image is directly correlated with an individual's behavior and is characteristic of youth who:

- ? have negative labels placed on them by the community, schools, peers, and parents
- ? have been unable to live up to expectations of others including family, teachers, and peers
- ? are victims of physical and/or emotional abuse
- ? have unrealistic expectations of themselves which they have been unable to fulfill

Youth communicate poor self-esteem in a variety of ways, including:

- ? continually putting others down
- ? displaying negative behavior in order to attract attention to themselves
- ? denying responsibility for their own actions and frequently demonstrating responsibility
- ? using defense mechanisms to justify inappropriate behaviors

- ? frequently acting out against the community in the form of law breaking

The goal of Day Treatment is to enhance the youth's self-concept so that they may begin to demonstrate feelings of self worth. This is achieved in the following ways:

- ? using positive reinforcement for appropriate behaviors such as approval, praise, rewards, and recognition
- ? using program expectations that are realistic and obtainable, thus allowing the youth to achieve success
- ? building on the youth's positive attributes and behaviors

Youth whose self-concept is enhanced will:

- ? demonstrate feelings of self-worth by displaying positive self-expression and behavior
- ? demonstrate care and acceptance toward their peers
- ? respect the rights and properties of others, including peers and authority figures
- ? appreciate assistance and accept the help of peers without feeling judged or criticized

#### Problem Solving Skills

Another problem area is the development of problem solving skills. Many delinquents do not clearly understand the cause and effect relationship. They lack adequate self-understanding and are unable to account for their own behaviors. Through individual intervention, the group process, and involvement of peers, the treatment staff will attempt to achieve the following:

- ? Guide the youth in becoming more aware of their motivations for a particular behavior. Encouraging the youth to voice their attitudes and opinions on a particular subject will enhance their ability to recognize their feelings and motivations for a particular behavior.

- ? Once the youth begin to recognize and understand their motivations, the staff can then help them take ownership of their issues.

#### Social Skills

Youth often have difficulty with the development of social skills. Lack of appropriate social skills is displayed in a number of ways:

- ? aggression toward individuals they care about
- ? settle disputes with aggression instead of discussion
- ? display insensitivity toward others
- ? use emotions in a hurting way
- ? interact with peers and adults in a way that results in disapproval or rejection
- ? experience anxiety or express hostility when in the presence of members of the opposite sex

Day Treatment staff make use of the group process, peer interaction, modeling, role playing, and feedback to assist youth in developing appropriate social skills. Youth who develop social skills:

- ? demonstrate respect for peers and staff
- ? help peers problem solve
- ? discourage inappropriate behaviors among peers
- ? demonstrate problem solving skills
- ? express emotions and feelings in a positive way
- ? appropriately communicate with others

#### Academic Skills

A very important area for youth is the development and enhancement of academic skills. The ultimate goal of the educational portion of the Program is to improve the youth's basic educational and behavioral skills to a degree that allows the youth to return and succeed in their home school.

#### Productive Behavior

The development of productive behavior is one of the most important aspects of the Day Treatment Program. The youth learn to replace irresponsible, self-defeating behaviors with productive ones. While youth progress through the Day Treatment Program, they:

- ? learn to change their distorted perception of reality
- ? gain a better understanding of themselves and their environment
- ? develop academically, socially, and culturally
- ? develop better decision making skills so their self-concept grows
- ? develop survival skills
- ? demonstrate personal responsibility
- ? achieve classroom success
- ? show support for programming and staff

#### Goals and Objectives of Day Treatment

To rehabilitate youth who participate in the Program to such an extent that they develop skills that will enable them to lead more



productive, responsible, and positive lives.

- ? To increase youth's self-esteem or self-concept
- ? To increase youth's decision making and problem solving
- ? To increase youth's social skills
- ? To increase youth's academic skills

To empower and strengthen the family so that a stable, supportive, and positive home environment can be developed and maintained.

- ? To improve family communication
- ? To develop or increase parenting skills
- ? To increase family cohesion and routines
- ? To increase sense of control for parent(s)
- ? To increase family's conflict resolution skills
- ? To develop family roles that are developmentally appropriate

#### Program Description

The Day Treatment Program uses a treatment team approach to working with youth and their families. The treatment team includes (at a minimum): Program Director, Therapist, Aftercare Specialist, Direct Care Counselors, Court Representatives, and Educational Staff.

The Day Treatment Program addresses the variety of difficulties youth and their families may be experiencing and provides opportunities for youth and family development. The Program provides intensive therapy services, which include, but are not limited to: individual, group, recreational, and family. As part of the Program, the Direct Care Counselors will provide life skills, skill builders, and educational workshops on self-esteem, decision making, substance abuse, problem solving, social skills, self-awareness, academic development, and more.

The Isabella County Day Treatment Program also includes intensive educational services to youth in the Program. The Program has an on-site school with a maximum of two classrooms. Each classroom has at a minimum of one teacher to help the youth with any educational needs and prepare youth for return to their regular school at the time of Program completion.

As a supplement to the intensive on-site services, the Program also includes a surveillance component for youth placed in the Program. The surveillance component includes, but is not limited to: electronic monitoring, telephone surveillance, and home visits.

After youth have completed the on-site requirements of the Day Treatment Program, they are transitioned into the aftercare component. The Aftercare Specialist works with the youth and the families in developing the resources and supports that will enable them to maintain and continue with the changes and progress already obtained.

In addition, the Day Treatment Program includes many additional services and components such as coordination of family resources, field trips, outdoor activities, daily structured activities, and 24-hour crisis support for youth and their families.

Services are intensive in nature and exceed weekly face to face contacts with youth. No more than 20 youth are assigned to a full time worker. None of the expenses are for judicial costs. All youth are court ordered into this program. Their case plans reflect that early return is the goal and services are provided to members of the family of the youth in placement. No basic family needs that can be met by another funding source are paid from this program.

The Isabella County Trial Court contracts with McBride Quality Care (McBride Homes) for the day to day operation of the Day Treatment program. In summary, the target population are at risk youth in the court system who are struggling academically due to low grades, excess absences or other issues and family dynamics. The purpose is to reduce the overall petitions which reduces adjudications, days of family foster care, out of home detention, days of shelter care and residential care. For those situations where preventing petitions is not possible, the goal of this program is to give youth the tools they need to reduce behaviors that lead to out of home placement.

AUTHORITY: Act 87, Public Acts of 1978, as amended.

COMPLETION: is Required.

PENALTY: State reimbursement will be withheld from local government

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**In-Home Care Summary (DHS-2093)**  
Michigan Department of Health & Human Services (MDHHS)  
Children's Services Agency  
Isabella County for October 01, 2017 through September 30, 2018

I. List all service components which make up the IHC program and specify the requested information for each.

Court Service Components		Administration Unit	Gross Expenditure	Public Funding	CCF Net Expenditure
1	Day Treatment Program 2018	Court	\$477,000.00	\$0.00	\$477,000.00
2	In Home Services 2018	Court	\$112,956.02	\$0.00	\$112,956.02
3	Intensive Probation Program 2018	Court	\$104,483.62	\$0.00	\$104,483.62
4	Juvenile Drug Court 2018	Court	\$104,933.00	\$85,000.00	\$19,933.00
Subtotals - Court			\$799,372.64	\$85,000.00	\$714,372.64

MDHHS Service Components		Administration Unit	Gross Expenditure	Public Funding	CCF Net Expenditure
1	Counseling (DHS) 2017-2018	MDHHS	\$6,300.00	\$0.00	\$6,300.00
2	Non Scheduled Payments (DHS) 2017-2018	MDHHS	\$27,975.00	\$0.00	\$27,975.00
Subtotals - MDHHS			\$34,275.00	\$0.00	\$34,275.00

Total IHC	\$833,647.64	\$85,000.00	\$748,647.64
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II. For each service component listed above, complete a separate IN-HOME CARE/BASIC GRANT BUDGET DETAIL REPORT (DHS-2094), filling in the appropriate budget items.

AUTHORITY: Act 87, Public Acts of 1978, as amended. COMPLETION: is Required. PENALTY: State reimbursement will be withheld from local government	Michigan Department of Health & Human Services (MDHHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an MDHHS office in your area.
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