

**WAYS AND MEANS COMMITTEE
AGENDA
TUESDAY, AUGUST 2, 2011**

4:00 P.M.

COMMISSION CHAMBERS, FOURTH FLOOR, BAY COUNTY BUILDING

PAGE NO.

- I CALL TO ORDER
- II ROLL CALL
- 1-4 III MINUTES (7/5/11)
- IV PUBLIC INPUT
- V PETITIONS AND COMMUNICATIONS
- 5-6 A. Register of Deeds - Graphic Sciences Scanning Project (**Seeking approval of additional cost (\$5,500) to complete scanning project at a total cost of \$14,700, monies from automation fund; authorization for Board Chair to sign contract if required; approval of required budget adjustments proposed resolution attached**)
- 7-8 B. Probate Court Administrator - Amended 2010-2011 Child Care Fund Budget (**Seeking approval of amended budget; authorization for Board Chair to sign required documents; approval of required budget adjustments - proposed resolution attached**)[Amended budget is separate attachment)
- 9-11 C. Assistant County Executive for Recreation and Administrative Services - Revised Bay 3 TV Contract (**Seeking approval of revised contract between two partners, i.e. Bay City Public Schools and Bay County; authorization for Board Chair to sign required documents; approval of required budget adjustments - proposed resolution attached**)
- D. Health Director
- 12-13 1. Amendment # 3 to CPBC Agreement (**Seeking approval of amendment # 3 which reflects negative adjustment to funding levels; authorization for Board Chair to sign required documents; approval of required budget adjustments - proposed resolution attached**)
- 14-15 2. Agreement with Michigan Association of Local Public Health (**Seeking approval agreement to provide consulting services; authorization for Board Chair to sign required documents; approval of required budget adjustments - proposed resolution attached**)
- 16 3. Medical Examiner Budget (Receive)

E. Finance

- 17-28 1. Budget Adjustments (**Approval required**)
- 29-30 2. Contract Extension - Third Party Administrator Services - Workers' Compensation (**Seeking approval of 5 year contract extension w/Citizens' Management, Inc.; authorization for Board Chair to sign required documents; approval of required budget adjustments - proposed resolution attached**)
- 31-32 3. Travel to Certified Public Manager Conference in Salt Lake City, Utah (**Seeking authorization for Tim Quinn to travel to conference utilizing budget funds in Personnel Department budget - proposed resolution attached**)
- 33 4. Analysis of General Fund Unreserved/Undesignated Fund Balance 2011 (**Receive**)
- 34 5. Executive Directive # 2007-11 (**Receive**)

VI REFERRALS

VII UNFINISHED BUSINESS

VIII NEW BUSINESS

IX CLOSED SESSION (when requested)

A. Personnel Director - Labor Negotiations

Motion: To go into closed session pursuant to MCLA 15.268, Sec. 8 (c): For strategy and negotiation sessions connected with the negotiation of a collective bargaining agreement when either negotiating party requests a closed hearing.

X MISCELLANEOUS

XI ANNOUNCEMENTS

XII ADJOURNMENT

PLEASE NOTE: THE COMMITTEE CHAIR HAS REQUESTED THAT ANY ELECTED OFFICIAL, DEPARTMENT/DIVISION HEAD PLACING AN ITEM ON THE WAYS AND MEANS COMMITTEE AGENDA BE PRESENT OR HAVE A REPRESENTATIVE PRESENT TO SPEAK TO THEIR REQUEST AND/OR ANSWER ANY QUESTIONS POSED BY COMMITTEE MEMBERS.

**WAYS AND MEANS COMMITTEE
MINUTES**

MEETING OF THE BAY COUNTY WAYS AND MEANS COMMITTEE HELD ON TUESDAY, JULY 5, 2011, HELD IN THE COMMISSION CHAMBERS, FOURTH FLOOR, BAY COUNTY BUILDING.

CALL TO ORDER BY CHAIR KRYGIER AT 4:04 P.M.

ROLL CALL:

		MOTION NO.											
COMMISSIONERS PRESENT:		1	2	3	4	5	6	7	8	9	10	11	12
ERNIE KRYGIER, CHRMN	P	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
KIM COONAN, V.CHRMN.	P	Y	M/Y	Y	Y	Y	Y	M/Y	Y	Y	Y	Y	M/Y
MICHAEL J. DURANCZYK	P	M/Y	S/Y	Y	S/Y	M/Y	Y	S/Y	M/Y	S/Y	Y	Y	S/Y
BRANDON KRAUSE		E	X	C	U	S	E	D					
VAUGHN J. BEGICK	P	S/Y	Y	M/Y	Y	Y	Y	Y	Y	Y	Y	S/Y	Y
JOE DAVIS	P	Y	Y	Y	Y	Y	S/Y	Y	S/Y	Y	S/Y	Y	Y
TOM RYDER	P	Y	Y	Y	M/Y	Y	M/Y	Y	Y	M/Y	Y	M/Y	M/Y
CHRISTOPHER RUPP	P	Y	Y	S/Y	Y	S/Y	Y	Y	Y	Y	M/Y	Y	Y
DONALD J. TILLEY, EX OFFICIO		E	X	C	U	S	E	D					

		MOTION NO.											
COMMISSIONERS PRESENT:		13	14	15	16	17	18	19	20	21	22	23	24
ERNIE KRYGIER, CHRMN		Y	Y	Y									
KIM COONAN, V.CHRMN.		S/Y	Y	S/Y									
MICHAEL J. DURANCZYK		Y	S/Y	M/Y									
BRANDON KRAUSE		E	E	E									
VAUGHN J. BEGICK		Y	Y	Y									
JOE DAVIS		Y	M/Y	Y									
TOM RYDER		M/Y	Y	Y									
CHRISTOPHER RUPP		Y	Y	Y									
DONALD J. TILLEY, EX OFFICIO		E	E	E									

		MOTION NO.											
COMMISSIONERS PRESENT:		25	26	27	28	29	30	31	32	33	34	35	36
ERNIE KRYGIER, CHRMN													
KIM COONAN, V.CHRMN.													
MICHAEL J. DURANCZYK													
BRANDON KRAUSE													
VAUGHN J. BEGICK													
JOE DAVIS													
TOM RYDER													
CHRISTOPHER RUPP													
DONALD J. TILLEY, EX OFFICIO													

OTHERS PRESENT: T.HICKNER, M.FITZHUGH, T.QUINN, V.ROUPE, R.BRZEZINSKI, J.STRASZ, D.ENGELHARDT, F.HORGAN, R.SUPER, R.REDMOND, S.MURPHY, DAY 3 TV, D.BERGER

M-MOVED; S-SUPPORTED; Y-YEA; N-NAY; ABS.-ABSTAIN; E-EXCUSED; A-ABSENT; W-WITHDRAWN

-/-

**WAYS AND MEANS COMMITTEE
TUESDAY, JULY 5, 2011
PAGE 2**

MOTION NO.

NOTE: In addition to these typed minutes, this Committee meeting was also taped by Bay 3 TV and those tapes are available for review in the Administrative Services Department.

- 1 MOVED, SUPPORTED AND CARRIED TO APPROVE THE MINUTES OF THE JUNE 7, 2011 WAYS AND MEANS COMMITTEE MEETING AS PRINTED.**

The first item on the agenda was a request from the Register of Deeds, Vicki Roupe, for approval of the DEKETO Software License and Maintenance Agreement. It was noted this is the result of a CherryLan split within the company to add a second company, DEKETO, but basically only pertains to the new company name. There is no change in the terms of the agreement per Mrs. Roupe. It was

- 2 MOVED, SUPPORTED AND CARRIED TO RECOMMEND BOARD APPROVAL OF THE DEKETO SOFTWARE LICENSE AND MAINTENANCE AGREEMENT (REGISTER OF DEEDS).**
- 3 MOVED, SUPPORTED AND CARRIED TO RECOMMEND BOARD APPROVAL OF THE PROPOSED RESOLUTION RE MAINTENANCE OF CURRENT POPULATION THRESHOLDS FOR METROPOLITAN PLANNING ORGANIZATIONS (MPOs) IN FEDERAL SURFACE TRANSPORTATION AUTHORIZATION LEGISLATION (TRANSPORTATION PLANNING/BCATS).**
- 4 MOVED, SUPPORTED AND CARRIED TO RECEIVE THE COMMUNICATION FROM ASSISTANT COUNTY EXECUTIVE RE 2011 DIGITAL COUNTY AWARD TO BAY COUNTY (ADMINISTRATIVE SERVICES/ISD).**
- 5 MOVED, SUPPORTED AND CARRIED TO RECEIVE THE COMMUNICATION FROM THE ASSISTANT COUNTY EXECUTIVE RE PRINDLE PROPERTY ACQUISITION GRANT (ADMINISTRATIVE SERVICES/RECREATION).**
- 6 MOVED, SUPPORTED AND CARRIED TO RECEIVE THE COMMUNICATION FROM THE ASSISTANT COUNTY EXECUTIVE RE INTERGOVERNMENTAL COLLABORATION "SHARED SERVICES" ACTIVITIES (ADMINISTRATIVE SERVICES).**
- 7 MOVED, SUPPORTED AND CARRIED TO RECEIVE THE COMMUNICATION FROM THE ASSISTANT COUNTY EXECUTIVE RE SAVINGS FROM COLLABORATIVE PURCHASE OF OFFICE SUPPLIES (ADMINISTRATIVE SERVICES/PURCHASING).**

**WAYS AND MEANS COMMITTEE
TUESDAY, JULY 5, 2011
PAGE 3**

MOTION NO.

- 8 MOVED, SUPPORTED AND CARRIED TO RECOMMEND BOARD APPROVAL TO ENTER INTO 3 YEAR CONTRACT WITH OFFICEMAX FOR PURCHASE OF OFFICE SUPPLIES AVAILABLE THROUGH AMERICA SAVES COOPERATIVE AGREEMENT (ADMINISTRATIVE SERVICES/PURCHASING).**
- 9 MOVED, SUPPORTED AND CARRIED TO RECOMMEND BOARD APPROVAL OF THE EARLY ON AGREEMENT RENEWAL (HEALTH DEPT.).**
- 10 MOVED, SUPPORTED AND CARRIED TO RECOMMEND BOARD APPROVAL OF THE USDA GRANT FOR VOLUNTARY RETAIL FOOD REGULATORY PROGRAM STANDARDS FUNDING (HEALTH DEPT.).**
- 11 MOVED, SUPPORTED AND CARRIED TO RECOMMEND BOARD APPROVAL OF SUBMITTED BUDGET ADJUSTMENTS.**
- 12 MOVED, SUPPORTED AND CARRIED TO RECEIVE THE ANALYSIS OF GENERAL FUND FUND EQUITY 2011 (FINANCE DEPT.).**
- 13 MOVED, SUPPORTED AND CARRIED TO RECEIVE EXECUTIVE DIRECTIVE # 2007-11 (FINANCE DEPT.).**
- 14 MOVED, SUPPORTED AND CARRIED TO RECEIVE THE HANDWRITTEN CHECK REPORT (FINANCE DEPT.).**

Committee Chair Krygier offered thanks for a successful Beach Wellness event. A good time was had by all. Commissioner Coonan noted that he was at Sanford Lake last Sunday and he spoke to the number of people on the beach and the economic windfall it is for a community to have a clean water/beach destination that is supported by the public. Clean water and beaches are very important and a strong economic tool. The public should mandate a suitable public beach. He looks forward to the day that Bay County will have that. It is anticipated that the Spray Park at the Bay City Area Recreation Park will be operational by the end of July.

Commissioner Begick reminded of the upcoming Auburn Cornfest - July 7-8-9 & 10. The parade is Sunday with the Veterans Memorial dedication following the parade.

Commissioner Duranczyk extended an invitation to the St. Michael Parish Festival in Pinconning July 15-16 & 17.

Commissioner Begick advised he attended the State Police groundbreaking ceremony earlier in the day for the new State Police Post which is being built in Williams Township thanks to the efforts of Williams Township and Jim Barcla's funding efforts.

**WAYS AND MEANS COMMITTEE
TUESDAY, JULY 5, 2011
PAGE 4**

MOTION NO.

There being no further business, it was

15 MOVED, SUPPORTED AND CARRIED TO ADJOURN (4:20 P.M.).

Submitted by:

Deanne Berger

Deanne Berger
Board Coordinator



515 Center Ave., Suite 102
Bay City, MI 48708
www.baycounty-mi.gov/rod

Victoria L. Roupe
Bay County Register of Deeds

JILL M. EICHORN
Chief Deputy Register of Deeds
Phone (989) 895-4228
Fax (989) 895-4296
TDD (989) 895-4049

July 25, 2011

TO: Ernie Krygler, Chair
Ways and Means Committtee

FROM: Vicki Roupe *Vicki Roupe*
Register of Deeds

RE: GRAPHIC SCIENCES SCANNING PROJECT

Background:

The Bay County Register of Deeds received approval to contract with Graphic Sciences for a scanning project. Unfortunately when Graphic Sciences presented their bid, they did not count all of the drawers that needed scanning and underestimated their bid. There are approximately 56 more drawers that need to be scanned to complete this project. I am requesting approval to have the 56 drawers scanned at a cost not to exceed \$5500.00.

Finance:

Funds are available in the technology/automation fund to complete this project.

Recommendation:

Grant the Register of Deeds authorization to finish the scanning project and authorize any necessary budget adjustments.

BAY COUNTY BOARD OF COMMISSIONERS

08/09/11

RESOLUTION

- BY: WAYS AND MEANS COMMITTEE (8/2/11)
- WHEREAS, On May 10, 2011, the Bay County Board of Commissioners, via resolution no. 2011-75, at the request of the Register of Deeds, requested authorization to enter into a contract with Graphic Sciences to scan the Register of Deeds' card file index into digital images and create PDF searchable files at a cost not to exceed \$9,200, monies to come from the Register of Deeds automation fund; and
- WHEREAS, When Graphic Sciences presented their bid, they did not count all the drawers that needed scanning to complete this project and it is necessary to add approximately 56 additional drawers to be scanned to complete this project; and
- WHEREAS, Funds are available in the automation fund to complete this project; Therefore, Be It
- RESOLVED By the Bay County Board of Commissioners that authorization is granted to complete the scanning project with Graphic Sciences at a total cost of \$14,700, monies to come from the Register of Deeds' automation fund; Be It Further
- RESOLVED That the Chairman of the Board is authorized to execute the appropriate contract with Graphic Sciences, if required, on behalf of Bay County following legal review/approval; Be It Further
- RESOLVED That related budget adjustments, if required, are approved.

ERNIE KRYGIER, CHAIR
AND COMMITTEE

Register of Deeds - Card Scanning Project - Graphic Sciences

MOVED BY COMM. _____

SUPPORTED BY COMM. _____

COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E
Michael J. Duranczyk				Joe Davis				Tom Ryder			
Brandon Krause				Ernie Krygier				Christopher Rupp			
Vaughn J. Beglck				Kim Coonan				Donald J. Tilley			

VOTE TOTALS:

ROLL CALL: YEAS _____ NAYS _____ EXCUSED _____

VOICE: YEAS _____ NAYS _____ EXCUSED _____

DISPOSITION: ADOPTED _____ DEFEATED _____ WITHDRAWN _____
AMENDED _____ CORRECTED _____ REFERRED _____

-6-



**BAY COUNTY PROBATE COURT
EIGHTEENTH JUDICIAL CIRCUIT COURT - FAMILY DIVISION**
1230 Washington Ave., Suite 715
Bay City, Michigan 48708-5737

KAREN A. TIGHE
Judge of Probate / Family Court

MARGE MARCHLEWICZ
Court Administrator

Estates Division (989) 895-4205
Juvenile Division (989) 895-4206

FAX (989) 895-4194
TDD (989) 895-2059

July 27, 2011

Ernie Krygier, Chair, Chair
Ways & Means Committee
Bay County Board of Commissioners
Bay County Building
515 Center Avenue
Bay City, MI 48708

Dear Chairman Krygier:

Attached is an amended 2010-2011 Child Care Fund Budget. This budget must be amended to allow for additional expenditures in the Family Foster Care and Independent Living categories and a shift in expenditures in the In-Home Care programs. Public Act 87 of 1978 prohibits the state from reimbursing county Child Care Fund expenditures which exceed a county's submitted and approved budget. Additionally, reimbursement for In-Home Care will only be made up to the amount approved for individual service components. This amended budget will accommodate those requirements.

The Family Foster Care and Independent Living expenses, which are for neglected and abused children, have exceeded our original expectations. The Family Foster Care expenses are due to several issues: an increased number of children in the system who are not eligible for state and federal funding (Title IVE), the mandated administrative fees paid to private agencies for their supervision of cases and the difficulty of care premiums. The increase in the Independent Living expenses is due to the increased number of children aging out of foster care who are not adopted and can manage their own living arrangements. This amended budget also provides a shift in funds for the In-Home Care components: the Day Treatment Program, Youth and Family Services, Family Drug Court and the TODAY program, and the girls GREAT program.

At the present time, none of these amendments made to the state necessitate any changes to the county budgets.

The Court is requesting that your Committee review the proposed amended budget and refer the matter to the Board Chair for signature. The budget must be signed by the Probate Judge, the local DHS Director, the Chair of the Board of Commissioners and/or the County Executive and submitted to the Michigan DHS. A copy of this budget has also been sent to the Director of Finance for review.

Thank you and if you have any questions, please contact me at your convenience.

Sincerely,

Marge Marchlewicz
Court Administrator

cc: Tom Hickner, County Executive
Tim Quinn
Crystal Hebert
Kim Bejcek, Bay County DHS

BAY COUNTY BOARD OF COMMISSIONERS

08/09/11

RESOLUTION

BY: WAYS AND MEANS COMMITTEE (8/2/11)

WHEREAS, The 2010-2011 Child Care Fund Budget must be amended to allow for additional expenditures in the Family Foster Care and Independent Living categories and a shift in expenditures in the In-Home Care programs; and

WHEREAS, Public Act 87 of 1978 prohibits the state from reimbursing county Child Care Fund expenditures which exceed a county's submitted and approved budget; and

WHEREAS, Reimbursement for In-Home Care will only be made up to the amount approved for individual service components and the amended budget accommodates those requirements; and

WHEREAS, The Family Foster Care and Independent Living expenses, which are for neglected and abused children, have exceeded original expectations and there is a funding shift in funds from the In-Home Care components; and

WHEREAS, Presently none of these amendments made to the State necessitate any changes to the County budgets; Therefore, Be It

RESOLVED That the Bay County Board of Commissioners approves the amended 2010-2011 Child Care Fund Budget and authorizes the Chairman of the Board to execute all documents required for the amended budget on behalf of Bay County following legal review/approval; Be It Further

RESOLVED That related budget adjustments, If required, are approved.

ERNIE KRYGIER, CHAIR
AND COMMITTEE

Probate Court - Amended 2010-2011 Child Care Fund Budget

MOVED BY COMM. _____

SUPPORTED BY COMM. _____

COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E
Michael J. Duranczyk				Joe Davis				Tom Ryder			
Brandon Krause				Ernie Krygler				Christopher Rupp			
Vaughn J. Beglick				Kim Coonan				Donald J. Tilley			

VOTE TOTALS:

ROLL CALL: YEAS _____ NAYS _____ EXCUSED _____

VOICE: YEAS _____ NAYS _____ EXCUSED _____

DISPOSITION: ADOPTED _____ DEFEATED _____ WITHDRAWN _____
AMENDED _____ CORRECTED _____ REFERRED _____

BAY COUNTY
Administrative Services

Michael K. Gray
Assistant County Executive for
Recreation & Administrative Services
graym@baycounty.net

515 Center Avenue
Bay City, Michigan 48708

Phone (989) 895-4130
Fax (989) 895-7658
TDD (989) 895-4049
<http://www.baycounty-mi.gov>



Thomas L. Hickner
County Executive

ANIMAL CONTROL
Michael Halstead, Manager
halsteadm@baycounty.net

BUILDINGS & GROUNDS
Richard Pabalis, Superintendent
pabalizr@baycounty.net

INFORMATION SYSTEMS
Robert Super, Director
superr@baycounty.net

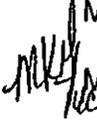
PURCHASING
Frances Horgan, Purchasing Agent
horganf@baycounty.net

RECREATION
Brent Goik, Recreation & Clubhouse Supervisor
goikb@baycounty.net

MEMORANDUM

DATE: July 25, 2011

TO: Mr. Ernie Krygler, Chairman and Commissioners, Ways & Means Committee

FROM:  Michael K. Gray, Assistant County Executive for Recreation & Administrative Services

SUBJECT: Revised Bay 3 TV Contract

Request: Amendment of resolution no. 2011-90, renewal of the Bay 3 TV contract.

Background: The City of Bay City has eliminated TV3 from their budget. This results in the Bay City Public Schools and Bay County as two of three partners wishing to continue TV3. I met with Bay City Public Schools Superintendent Doug Newcombe on July 18, 2011. We have developed a plan to operate with the contribution of \$41,000 each from the schools and the county with little reduction in programming.

While one third of revenue from the City is gone one third less work will need to be done by TV3 so with appropriate budget reductions this can be done.

Economics: The July 1, 2011 to June 30, 2012 county contractual funding for Bay 3 TV remains at \$41,000. The Bay City Public Schools will fund it an equal amount.

Recommendation: Amend the previous resolution adopted which authorized Bay County participation in Bay 3TV for the period July 1, 2011 to June 30, 2012 at an amount of \$41,000 to

reflect the loss of partner the City of Bay City; authorize the contract be amended to be an agreement between Bay City Public Schools and Bay County; authorize the Board Chairman to sign the agreement with approval as to form by Corporation Counsel.

MKG/ec

cc: Tom Hickner
Bob Redmond
Marty Fitzhugh
Tim Quinn
Crystal Hebert
Brent Golk
Doug Newcombe
Dave Quesada

BAY COUNTY BOARD OF COMMISSIONERS

08/09/11

RESOLUTION

- BY: WAYS AND MEANS COMMITTEE (8/2/11)
- WHEREAS, On May 10, 2011, via resolution no. 2011-90, the Bay County Board of Commissioners approved renewal of the Bay 3 TV contract contingent upon approval of the other partners, i.e. City of Bay City and the Bay City Public Schools; and
- WHEREAS, The City of Bay City has eliminated TV3 from their budget resulting in the Bay City Public Schools and Bay County as two of three partners wishing to continue TV3; and
- WHEREAS, As the result of a meeting with the Bay City Public Schools a plan has been developed to operate with the contribution of \$41,000 each from the schools and the county with little reduction in programming. Even though one third of the funding is eliminated, one third less work will be done so, with appropriate budget reductions, this can be accomplished; Therefore, Be It
- RESOLVED That the Bay County Board of Commissioners amends resolution no. 2011-90 to reflect the loss of the City of Bay City as a partner; Be It Further
- RESOLVED That the Bay 3 TV contract is amended to be an agreement between the Bay City Public Schools and Bay County and the Chairman of the Board is authorized to execute said agreement on behalf of Bay County following legal review/approval; Be It Finally
- RESOLVED That related budget adjustments, if required, are approved.

ERNIE KRYGIER, CHAIR
AND COMMITTEE

Bay 3 TV - Amended Agt between Bay City Public Schools and Bay County

MOVED BY COMM. _____

SUPPORTED BY COMM. _____

COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E
Michael J. Duranczyk				Joe Davls				Tom Ryder			
Brandon Krause				Ernie Krygler				Christopher Rupp			
Vaughn J. Beglck				Kim Coonan				Donald J. Tilley			

VOTE TOTALS:

ROLL CALL: YEAS _____ NAYS _____ EXCUSED _____
VOICE: YEAS _____ NAYS _____ EXCUSED _____

DISPOSITION: ADOPTED _____ DEFEATED _____ WITHDRAWN _____
AMENDED _____ CORRECTED _____ REFERRED _____

-11-



Thomas L. Hickner
Bay County Executive



BAY COUNTY
Health Department
Creating A Healthy Environment For The Community

Barbara MacGregor, RN, BSN
Health Director

1200 Washington Avenue
Bay City, Michigan 48708
(989) 895-4006
FAX (989) 895-4014
TDD (989) 895-4049

TO: Ernie Krygier, Chairperson, Ways and Means Committee
FROM: Barbara MacGregor, Health Director
DATE: July 21, 2011
CC: Tom Hickner, Michael Gray, Marty Fitzhugh, Tim Quinn, Crystal Hebert, Kim Priessnitz, Melissa Maillette, Joel Strasz, and Marilyn Laurus
RE: FY 2010-11 Comprehensive Planning, Budgeting and Contracting Agreement (CPBC) Amendment #3

BACKGROUND:

The enclosed agreement amends the 2010/2011 CPBC Agreement between Bay County and the Michigan Department of Community Health. The Amendment incorporates the Annual Budget, Output Measures, Funding/Reimbursement Matrix, updated program language and revised allocations received since the original agreement was issued.

FINANCIAL CONSIDERATIONS:

This Amendment reflects a negative adjustment to funding levels as follows:

<u>PROGRAM ELEMENT</u>	<u>PREVIOUS LEVEL</u>	<u>REVISED LEVEL</u>	<u>CHANGE</u>
Bioterrorism 08/11/11-9/30/11	\$23,293	\$19,574	<\$3,719>
TOTAL CPBC FUNDING	\$1,364,159	\$1,360,440	<\$3,719>

This funding reduction is being addressed by reducing expenditures in this budget.

RECOMMENDATION

Upon favorable review by Corporation Counsel, the Health Department recommends Amendment #3 be approved and signed by the Board Chair, and seeks Board approval for any necessary budget adjustments relating to this Amendment .

BAY COUNTY BOARD OF COMMISSIONERS

08/09/11

RESOLUTION

BY: WAYS AND MEANS COMMITTEE (8/2/11)

WHEREAS, The 2010/2011 CPBC Agreement between Bay County and the Michigan Department of Community Health (MDCH) is being amended to incorporate the Annual Budget, Output Measures, Funding/Reimbursement Matrix, updated program language and revised allocations received since the original agreement was reached. This amendment reflects negative changes to funding levels:

<u>PROGRAM ELEMENT</u>	<u>PREVIOUS LEVEL</u>	<u>REVISED LEVEL</u>	<u>CHANGE</u>
Bioterrorism 08/11/11-9/30/11	\$23,293	\$19,574	<\$3,719>
Total CPBC Funding	\$1,364,159	\$1,360,440	<\$3,719>

RESOLVED That the Bay County Board of Commissioners approves amendment # 3 to the 2010-2011 CPBC Contracting Agreement and authorizes the Chairman of the Board to execute all required documents on behalf of Bay County; Be It Further

RESOLVED That budget adjustments relating to this amendment are approved.

ERNIE KRYGIER, CHAIR
AND COMMITTEE

Health Dept - Amendment # 3 to 2010-2011 CPBC Agt

MOVED BY COMM. _____

SUPPORTED BY COMM. _____

COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E
Michael J. Duranczyk				Joe Davis				Tom Ryder			
Brandon Krause				Ernie Krygler				Christopher Rupp			
Vaughn J. Beglck				Kim Coonan				Donald J. Tilley			

VOTE TOTALS:

ROLL CALL: YEAS _____ NAYS _____ EXCUSED _____

VOICE: YEAS _____ NAYS _____ EXCUSED _____

DISPOSITION: ADOPTED _____ DEFEATED _____ WITHDRAWN _____
AMENDED _____ CORRECTED _____ REFERRED _____



Thomas L. Hickner
Bay County Executive



BAY COUNTY
Health Department
Creating A Healthy Environment For The Community

Barbara MacGregor, RN, BSN
Health Director

Joel R. Strasz
Public Health Services Manager

1200 Washington Avenue
Bay City, Michigan 48708
(989) 895-4006
FAX (989) 895-4014
TDD (989) 895-4049

To: Ernie Krygier, Chairman, Ways and Means Committee

From: Joel R. Strasz, Public Health Services Manager

CC: Barbara MacGregor, Thomas Hickner, Michael Gray, Tim Quinn, Marty Fitzhugh, Crystal Hebert, and Kim Priessnitz

Date: July 27, 2011

RE: Request Permission to Enter into an Agreement with the Michigan Association of Local Public Health (MALPH) to Provide Consulting Services for the Michigan Department of Community Health (MDCH) Community Health Assessment Regional Meeting

BACKGROUND:

Currently, the MDCH wishes to undertake a state-wide comprehensive Community Health Assessment (CHA) in collaboration with local Health Departments. As part of the state-wide Assessment, regional meetings are being held throughout the state of Michigan. Bay County has been chosen to host the meeting for Region 3, which comprises 13 counties and their associated Health Departments. The MDCH, has selected MALPH as the fiduciary for the aforementioned agreements. This Agreement will provide funding to Bay County Health Department to provide professional consulting services, including logistics (space/food/beverage, audio/visual, supplies and program materials), invitations, advertising and other related activities to arrange the regional meetings.

FINANCE AND ECONOMICS:

The Bay County Health Department (BCHD) will be paid a \$5,000 stipend to plan all logistics, invitations, advertising and any required reports. The BCHD will be reimbursed for all appropriate meeting facilitation expenses up to \$10,000. This reimbursement will cover 100% of the cost for the Health Department to provide these services.

RECOMMENDATION:

Upon favorable review by Corporation Counsel, the Health Department recommends this Agreement be approved and signed by the Board Chair, and seeks Board approval for any necessary budget adjustments relating to this Agreement.

-14-

BAY COUNTY BOARD OF COMMISSIONERS

08/09/11

RESOLUTION

BY: WAYS AND MEANS COMMITTEE (8/2/11)

WHEREAS, Currently the Michigan Department of Community Health wishes to undertake a statewide comprehensive Community Health Assessment (CHA) in collaboration with local Health Departments and as part of this statewide assessment, regional meetings are being held throughout the State of Michigan; and

WHEREAS, Bay County has been selected to host the meeting for Region 3, which comprises 13 counties and their associated Health Departments; and

WHEREAS, The MDCH has selected MALPH as the fiduciary for required agreements; and

WHEREAS, The Agreement will provide funding to the Bay County Health Department to provide professional consulting services including logistics (space/food/beverage, audio/visual, supplies and program materials) invitations, advertising and other related activities to arrange the regional meetings; and

WHEREAS, The Bay County Health Department (BCHD) will be paid a \$5,000 stipend to plan all logistics, invitations, advertising and any required reports and will be reimbursed for all appropriate meeting facilitation expenses up to \$10,000. This reimbursement will cover 100% of the cost for the Health Department to provide these services; Therefore, Be It

RESOLVED That the Bay County Board of Commissioners approves the Agreement with the Michigan Association of Local Public Health (MALPH) to provide consulting services for the Michigan Department of Community Health (MDCH) Community Health Assessment Regional meeting; Be It Further

RESOLVED That the Chairman of the Board is authorized to execute said Agreement on behalf of Bay County (Health Department) following legal review/approval; Be It Finally

RESOLVED That related budget adjustments, if required, are approved.

ERNIE KRYGIER, CHAIR

WAYS AND MEANS COMMITTEE

Health Dept - Community Health Assessment

MOVED BY COMM. _____

SUPPORTED BY COMM. _____

COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E
Michael J. Duranczyk				Joe Davis				Tom Ryder			
Brandon Krause				Ernie Krygler				Christopher Rupp			
Vaughn J. Beglick				Kim Coonan				Donald J. Tilley			

VOTE TOTALS:

ROLL CALL: YEAS _____ NAYS _____ EXCUSED _____

VOICE: YEAS _____ NAYS _____ EXCUSED _____

DISPOSITION: ADOPTED _____ DEFEATED _____ WITHDRAWN _____

AMENDED _____ CORRECTED _____ REFERRED _____



Thomas L. Hickner
Bay County Executive



BAY COUNTY
Health Department
Creating A Healthy Environment For The Community

Barbara MacGregor, RN, BSN
Health Director

1200 Washington Avenue
Bay City, Michigan 48708
(989) 895-4006
FAX (989) 895-4014
TDD (989) 895-4049

MEMO

TO: Ernie Krygier, Chairperson, Ways and Means Committee

FROM: Barbara MacGregor, Health Director

DATE: July 21, 2011

CC: Dr. Howard Hurt, Tom Hickner, Michael Gray, Marty Fitzhugh, Tim Quinn, Crystal Hebert, Sheriff John Miller,

RE: Informational Item Re: Medical Examiner Budget

BACKGROUND

When the Medical Examiner budget was developed for 2011, it was based on the performance of 75 autopsies. Dr. Hurt, Bay County Medical Examiner, has informed me that as of June 30, 2011, 55 autopsies have been performed. If the number of ordered autopsies continues at its current rate, it is projected that 110 autopsies will be performed for FY 2011.

FINANCIAL CONSIDERATIONS

Costs associated with the current trend could result in an increase in additional expenditures to the Medical Examiner budget in the amount of \$33,000. This is based on the average cost for 35 additional autopsies projected for FY 2011.

RECOMMENDATION

The Department does not recommend Board action at this time and will continue to keep the Board informed regarding this issue. If the current trend holds, the Department will be returning to the Board to respectfully request funding to cover additional expenses.

-16-

RESOLUTION

NO. _____

By: WAYS AND MEANS COMMITTEE 8/2/2011

RESOLVED: By this Board of Commissioners of Bay County, Michigan, that the following Budget Adjustments are hereby approved on 8/9/11 and, if required, the Chairman of the Board is hereby authorized to execute any documentation necessary for said Budget Adjustments on Behalf of Bay County.

<u>Request Number</u>	<u>Fund Involved Department Involved</u>	<u>Favorable Impact</u>	<u>Unfavorable Impact</u>	<u>No Impact</u>
2011-08-003	<p>Divislon on Aging Fund <i>Home Dellivered Meals Activity</i></p> <p>The first 4 lines are for the Memorial Garden, need to increase the contribution revenue line item and the related expenses for the Memorial Garden. The rest of the budget adjustment is to adjust the expenditure line items for garbage removal, equipment repair, vehicle repair, gas, oil-grease, and phone charges which all need to be increased for the end of the fiscal year.</p>			X
2011-08-005	<p>General Fund <i>Secondary Road Patrol Grant Activity</i></p> <p>To correct Road Patrol Grant amount. Should be \$149,900 for 2011 budget. But in error the 2011 budget reported the full grant amount under the 9 month budget (10131681) and the 3 month budget (10131600) was over stated.</p>		\$61,834	

RESOLUTION

NO. _____

2011-08-006 **Health Department Fund** \$600,000
Health Administration Activity
General Fund \$600,000
Transfer In from Health Administration Activity

Re-align 2011 Health Department transfers in from General Fund based on the first 6 months of actual operations and fund balance.

2011-08-008 **General Fund** X
Transfer to Health Department Activity
Transfer to Chlld Care Activity
Health Department Fund \$17,207
Transfer In from General Fund
Chlld Care Fund \$7,170
Transfer In from General Fund

Per letter dated 5-18-11 from State of Michigan, reduce 2011 budgeted cigarette tax revenue to \$9,534. All of this revenue is transferred to the Health Department (12/17) and Juvenile Home (5/17).

2011-08-009 **General Fund** \$37,990
Personnel & Employee Relations Activity

Budget for temporary contractual help for the Finance Department.

Ernie Krygler, Chairman W.& M.
 and Committee

18-

Budget Amendment Detail Lines

My File Edit Tools Help

Summary

Journal
 Journal 2011/08 3 Ref MEMOR Desc TRNFS FUND Eff Date 08/09/2011

Journal Lines

Org	Object	Description	I/D	Amount
27667200	40001	FUND BALANCE	I	9,600.00
27667238	40200	CURRENT REAL PROPERTY TAXES	I	9,600.00
27667200	40200	CURRENT REAL PROPERTY TAXES	D	9,600.00
27667238	67502	CONTRIBUTIONS-OTHER	I	3,000.00
27667238	75000	GAS, OIL AND GREASE	I	3,000.00
27667238	79900	OTHER SUPPLIES	I	1,000.00
27667238	62300	GARBAGE REMOVAL	I	400.00
27667238	85200	TELEPHONE	I	800.00
27667238	85201	CELLPHONE	I	400.00
27667238	68200	PROMOTION EXPENSE	I	1,000.00
27667238	93100	EQUIPMENT REPAIR & MAINTENANCE	I	1,000.00
27667238	93200	VEHICLE REPAIR & MAINTENANCE	I	4,000.00
27667238	93300	BLDG. REPAIR AND MAINTENANCE	I	1,000.00

Add Description

Journal Totals

Increase	9,600.00
Decrease	9,600.00

Bay County, Michigan

Additional Comments

Journal: 3 Line: 1

THE FIRST 4 LINES ARE FOR THE MEMORIAL GARDEN, NEED TO INCREASE THE CONTRIBUTION REVENUE LINE ITEM AND THE RELATED EXPENSES FOR THE MEMORIAL GARDEN. THE REST OF THE BUDGET ADJUSTMENT TO ADJUST THE EXPENDITURE LINE ITEMS FOR GARBAGE REMOVAL, EQUIPMENT REPAIR, VEHICLE REPAIR, GAS, OIL-GREASE, AND PHONE CHARGES WHICH ALL NEED TO BE INCREASED FOR THE END OF THE FISCAL YEAR.

Budget Amendment Detail Lines

My File Edit Tools Help



Summary

Journal

Journal 2011/08 5 Ref ROAD Desc RD PATROL Eff Date 08/09/2011

Journal Lines

Org	Object	Description	I/D	Amount
10110100	40001	FUND BALANCE	I	61,834.00
10131600	53900	STATE GRANTS	D	4,872.00
10131681	53900	STATE GRANTS	D	46,962.00

Add Description

Journal Totals

Increase	61,834.00
Decrease	61,834.00

Bay County, Michigan

Additional Comments

Journal: 5 Line: 1

TO CORRECT ROAD PATROL GRANT AMOUNT SHOULD BE \$149,900 FOR 2011 BUDGET. BUT IN ERROR THE 2011 BUDGET REPORTED THE FULL GRANT AMOUNT UNDER THE 9 MTH BUDGET (10131681) AND THE 3 MTH BUDGET (10131600) WAS OVER STATED.

Budget Amendment Detail Lines

My File Edit Tools Help

Summary

Journal
 Journal 2011/08 6 Ref HEALTH Desc HLTH TRSF Eff Date 08/09/2011

Journal Lines

Org	Object	Description	I/D	Amount
22160100	40001	FUND BALANCE	I	600,000.00
10110100	40001	FUND BALANCE	D	600,000.00
22160100	62001	TRANSFERS IN FROM GENERAL FUND	D	600,000.00
10160100	99900	TRANSFERS OUT TO OTHER FUNDS	D	600,000.00

Add Description

Journal Totals

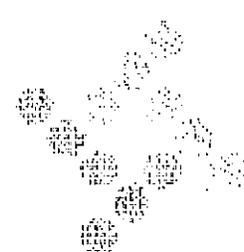
Increase	600,000.00
Decrease	600,000.00

Bay County Michigan

Additional Comments

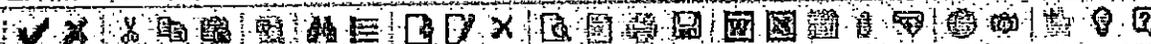
Journal: 6 Line: 1

RE-ALIGN 2011 HEALTH DEPARTMENT TRANSFERS IN FROM GENERAL FUND BASED ON THE FIRST 6 MONTHS OF ACTUAL OPERATIONS AND FUND BALANCE.



Budget Amendment Detail Lines

My File Edit Tools Help



Journal

Journal 2011/08 8 Ref CIG TX Desc CIG. TAX Eff Date 08/09/2011

Summary

Journal Lines

Org	Object	Description	I/O	Amount
22160100	40001	FUND BALANCE	I	17,207.00
29266203	40001	FUND BALANCE	I	7,170.00
10125300	57200	STATE GRANT-CIGARETTE TAX DIST	D	24,377.00
22161400	69910	TRSF IN-GEN FUND-CIGARETTE TAX	D	17,207.00
29266203	69910	TRSF IN-GEN FUND-CIGARETTE TAX	D	7,170.00
10160100	99910	TRF OUT-OTHER FND-CIGARETTE TX	D	17,207.00
10163303	99910	TRF OUT-OTHER FND-CIGARETTE TX	D	7,170.00

Add Description

Journal Totals

Increase	24,377.00
Decrease	24,377.00

Bay County Michigan

Additional Comments

Journal: 8 Line: 8

PER LETTER DATED 5-18-2011 FROM STATE OF MICHIGAN REDUCE 2011 BUDGETED CIGARETTE TAX REVENUE TO \$9,534. ALL OF THIS REVENUE GETS TRANSFERRED TO HEALTH DEPARTMENT (12/17) & JUVENILE HOME (5/17).

Budget Amendment Detail Lines

My File Edit Tools Help

Summary

Journal
 Journal 2011/08 9 Ref CONTR Desc CONTRACTUA Eff Date 08/09/2011

Journal Lines

Org	Object	Description	I/D	Amount
10110100	40001	FUND BALANCE	I	37,990.00
10127000	80200	CONTRACTUAL SERVICES	I	37,990.00

Add Description

Journal Totals

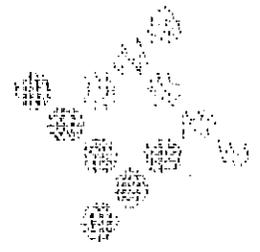
Increase	.00
Decrease	.00

Bay County, Michigan

Additional Comments

Journal: 9 Line: 1

BUDGET FOR TEMPORARY CONTRACTUAL HELP FOR THE FINANCE DEPARTMENT.





**BAY COUNTY
PERSONNEL DEPARTMENT**

**Thomas L. Hickner
County Executive**

Tim Quinn
Personnel Director
quinnt@baycounty.net

TO: Ernie Krygler, Chairperson
Ways & Means Committee

FROM: Tim Quinn, Director, Personnel and Employee Relations and
Finance Officer *TQ*

RE: Third Party Administrator Services – Worker's Compensation

DATE: July 12, 2011

REQUEST: Extend the contract with Citizens' Management Inc. for a five year period

BACKGROUND:

Citizens' Management has been the third party administrator for our self-insured workers' compensation program for the period of July 1, 2006 thru July 1, 2011. Bay County and the two other entities (Bay Medical Care Facility and the Dept. Of Water and Sewer) who are under our umbrella have been satisfied with the services that Citizens provided.

ECONOMICS:

The expense per year for the five-year contract of 2006- 2011 was at a set price for five years. Additionally, the contract with the third party administrator prior to 2006 was a higher cost per year than what we paid for the 2006-2011 contract. The quote for the current contract extension is a 16.7% increase for the first three years of the contract and a 5.7% increase for the final two years. However, considering that Citizens underbid everyone and held the rate constant for five years beginning in 2006, it seems unlikely that if we went out for bids on this, other entities would be less than that.

Although I have purposefully not disclosed the contract bid for Citizen's, in the event that the Board decides to go out for bid, please be assured that the increase of 16.7% represents a relatively small dollar amount.

RECOMMENDATION:

I am recommending that this be forwarded to the Board of Commissioners for approval for the Chair to enter a contract for a five year time period, subject to review by Corporate Counsel, due to minimal increase in cost and, more importantly, for the excellent service we have received from Citizen's Management Inc. in the past.

BAY COUNTY BOARD OF COMMISSIONERS

08/09/11

RESOLUTION

BY: WAYS AND MEANS COMMITTEE (8/2/11)

WHEREAS, Citizens' Management has been the third party administrator for Bay County's self-insured workers' compensation program for the period 7/1/2006 thru July 1, 2011 and Bay County, Bay Medical Care Facility and the Department of Water and Sewer (all under the County's umbrella) have been satisfied with the services that Citizens provides; and

WHEREAS, The quote for the current contract extension is a 16.7% increase for the first three (3) years of the contract and a 5.6% increase for the final two (2) years and, based on the fact that Citizens underbid everyone in 2006 and held the rate constant for the five year contract, it is felt that it would be unlikely that if bids were solicited, other companies would be less than that; and

WHEREAS, County Administration recommends in favor of extension of the contract with Citizens' Management Inc. for a five (5) year period; Therefore, Be It

RESOLVED That the Bay County Board of Commissioners approves extension of the contract with Citizens' Management, Inc. for a five (5) year period expiring July 1, 2016 at a cost of \$_____ per year through July 1, 2014 and a cost of \$_____ for the period expiring 7/1/2016; Be It Further

RESOLVED That the Chairman of the Board is authorized to execute said contract extension on behalf of Bay County following legal review/approval; Be It Finally

RESOLVED That related budget adjustments, if required, are approved.

ERNIE KRYGIER, CHAIR
AND COMMITTEE

Finance Dept - Third Party Administrator Services - Workers' Compensation
MOVED BY COMM. _____

SUPPORTED BY COMM. _____

COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E	COMMISSIONER	Y	N	E
Michael J. Duranczyk				Joe Davis				Tom Ryder			
Brandon Krause				Ernie Krygler				Christopher Rupp			
Vaughn J. Beglck				Kim Coonan				Donald J. Tilley			

VOTE TOTALS:

ROLL CALL: YEAS _____ NAYS _____ EXCUSED _____
VOICE: YEAS _____ NAYS _____ EXCUSED _____

DISPOSITION: ADOPTED _____ DEFEATED _____ WITHDRAWN _____
AMENDED _____ CORRECTED _____ REFERRED _____

36



**OFFICE OF
BAY COUNTY EXECUTIVE**

515 Center Avenue, Suite 401
Bay City, Michigan 48708-5125
(989) 895-4130 ● FAX (989) 895-7658

Thomas L. Hickner
County Executive

TO: Ernie Krygler, Chairperson
Ways & Means Committee

FROM: Tom Hickner, County Executive

RE: Out of state travel – Certified Manager's Annual Meeting – Tim Quinn

DATE: July 27, 2011

REQUEST: Grant request to send Tim Quinn to the Certified Public Manager Conference in Salt Lake City Oct 9-12, 2011

BACKGROUND:

The Certified Public Manager® program is the only nationally accredited program for public administrators. Tim Quinn is a graduate of the program, holds CPM certification, and is on the Board of Directors for the Michigan Chapter. He has been nominated by the board of that organization to be a representative of the Michigan Chapter at the National Conference. The County and Tim would benefit because of the increased knowledge and networking opportunities, particularly as the state of public sector employment and finance is so rapidly changing. He also would be a voice at the table, representing his increased leadership role among his peers in county government.

ECONOMICS:

Air fare is approximately \$350 round trip. The registration is \$250, and the hotel room is \$119/night plus tax. There is money in the Personnel Department budget to cover these expenses.

RECOMMENDATION:

I am recommending that this be forwarded to the Board of Commissioners for approval.

BAY COUNTY BOARD OF COMMISSIONERS

08/09/11

RESOLUTION

BY: WAYS AND MEANS COMMITTEE (8/2/11)
WHEREAS, The Certified Public Manager® Program is the only nationally accredited program for public administrators and Tim Quinn, a graduate of the program, holds CPM certification and is on the Board of Directors for the Michigan Chapter; and
WHEREAS, Tim Quinn has been nominated by the board of that organization to be a representative of the Michigan Chapter at the National Conference to be held in Salt Lake City, Utah in October 2011; and
WHEREAS, County Administration recommends in favor of authorizing Mr. Quinn's travel and expenses at the National Conference based on the increased knowledge and networking opportunities that would be gained and will be of value to Bay County; and
WHEREAS, Funds are available in the Personnel Department budget to cover the expenses; Therefore, Be It
RESOLVED By the Bay County Board of Commissioners that authorization is granted for Tim Quinn, Personnel Director and Interim Finance Officer, to attend the Certified Public Manager Conference in Salt Lake City, Utah, October 9-12, 2011, funding required to come from the Personnel Department budget; Be It Further
RESOLVED That related budget adjustments, if required, are approved.

ERNIE KRYGIER, CHAIR
AND COMMITTEE

Personnel - CPM Conference

MOVED BY COMM. _____

SUPPORTED BY COMM. _____

Table with 12 columns: COMMISSIONER, Y, N, E, COMMISSIONER, Y, N, E, COMMISSIONER, Y, N, E. Rows include Michael J. Duranczyk, Brandon Krause, Vaughn J. Beglick, Joe Davls, Ernie Krygler, Kim Coonan, Tom Ryder, Christopher Rupp, Donald J. Tilley.

VOTE TOTALS:

ROLL CALL: YEAS _____ NAYS _____ EXCUSED _____

VOICE: YEAS _____ NAYS _____ EXCUSED _____

DISPOSITION: ADOPTED _____ DEFEATED _____ WITHDRAWN _____
AMENDED _____ CORRECTED _____ REFERRED _____

- 32 -

THOMAS L. HICKNER
Bay County Executive

FINANCE DEPARTMENT
Bay County Building
515 Center Avenue, Suite 701
Bay City, MI 48708-5128



TIMOTHY E. QUINN
Finance Officer
quinnt@baycounty.net

CRYSTAL A. HEBERT
Assistant Finance Officer
hebertc@baycounty.net

KIMBERLY A. PRIESSNITZ
Budget/Grants
priessnitzk@baycounty.net

TO: Ernie Krygler, Chairperson
Ways & Means Committee

FROM: Crystal Hebert,
Assistant Finance Officer

RE: Executive Directive #2007-11

DATE: July 27, 2011

REQUEST:

Please place this memo on the August 2, 2011 agenda for your committee's information.

BACKGROUND:

On July 12, 2011, an e-mail was sent requesting departments to contact their grantor agencies to confirm their level of grant funding for the current year. As stated previously, the Finance Department would request monthly updates from these departments regarding their grant funding status and then provide a status update to your committee at your monthly meeting.

ECONOMICS:

As of the date of this missive, the following are the updates to the previous correspondence:

1. The state grantor agencies that have responded to department's requests indicate that funding levels for the State Grants with regard to fiscal year 2010 and/or 2011 appear to have no changes.

RECOMMENDATION:

To receive.

c: Tom Hickner
Michael Gray
Marty Fitzhugh
Kim Priessnitz
Tim Quinn

COUNTY CHILD CARE BUDGET SUMMARY
 Michigan Department of Human Services (DHS)
 Child and Family Services

County Bay	Court Contact Person Marchlewicz, Marge (Bay)	Telephone Number 989/895-4208	E-Mail Address marchlewiczr
Fiscal Year October 1, 2010 through September 30, 2011	DHS Contact Person Mosher, Becky (Bay)	Telephone Number 989/895-2475	E-Mail Address

TYPE OF CARE	ANTICIPATED EXPENDITURES		
	DHS	COURT	COMBINED
I. CHILD CARE FUND			
A. Family Foster Care	\$0.00	\$350,000.00	\$350,000.00
B. Institutional Care	\$0.00	\$1,560,000.00	\$1,560,000.00
C. In Home Care	\$7,500.00	\$577,696.91	\$585,096.91
D. Independent Living	\$0.00	\$16,000.00	\$16,000.00
E. SUBTOTALS	\$7,500.00	\$2,502,696.91	\$2,510,096.91
F. Revenue	\$	\$	\$0.00
G. Net Expenditure	\$7,500.00	\$2,502,696.91	\$2,510,096.91

COST SHARING RATIOS	County 50% State 50%
----------------------------	----------------------

II. CHILD CARE FUND

Foster Care During Release Appeal Period

	\$1,200.00	\$1,200.00
--	------------	------------

COST SHARING RATIOS	County 0% State 100%
----------------------------	----------------------

III. JUVENILE JUSTICE SERVICES FUND

Basic Grant

\$	\$	\$0.00
----	----	--------

COST SHARING RATIOS	County 0% State 100% \$15,000.00 Maximum
----------------------------	---

IV. TOTAL EXPENDITURE **\$2,511,296.91**

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 1, 2010 through September 30, 2011

Presiding Judge	Date
County Director of DHS Signature	Date
Chairperson, Board of Commissioner's Signature	Date
And/Or County Executive Signature	Date

<small>The Family Independence Agency will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, 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 DHS office in your county.</small>	<small>AUTHORITY: Act 87, Publication of 1978, as amended. COMPLETION: Required PENALTY: State reimbursement will be withheld from local government.</small>
---	---

DHS-2091 (Rev. 5-00) Previous edition may be used. MS Word-97

IN-HOME CARE/BASIC GRANT BUDGET DETAIL REPORT (2094)
Michigan Department of Human Services (DHS)
 Bureau of Juvenile Justice
 October 1, 2010 through September 30, 2011

Service Component (Full Title/Name) Family and Juvenile Drug Court 2010-2011/Intensive Probation	Check One <input checked="" type="checkbox"/> In Home Care <input type="checkbox"/> Basic Grant
--	--

A. PERSONNEL (Employees of the Court) Administrative Unit DHS Court

1. Salary and Wages NAME(S)	FUNCTION	No. HOURS/WEEK	YEARLY COST
Kristin LaRoche	Family Drug Court/TODAY- Juvenile Drug Ct. Coordinator	40	\$50,240.00
All Probation officers	Intensive Probation as needed		\$
			\$
			\$
			\$
2. Fringe Benefits (Specify)			
Social Security			\$16,395.00
Health Insurance/Retiree Health Care Cont/			\$28,866.00
Life Insurance & Prior Year's Vacation			\$2,643.00
Worker's Compensation			\$2,741.00
Sick & Accident Insurance			\$997.00
Unemployment Compensation			\$626.00
Pay in lieu of health insurance			\$1,800.00
Total Personnel			\$104,208.00

B. PROGRAM SUPPORT (For employees identified in "A" above)

1. Travel	Rate/Mile	Estimate No. of Miles	YEARLY COST
State & Local Travel	.50	2800	\$1,400.00
2. Supplies and Materials (Description/Examples) Attach Extra Sheet if Needed*			YEARLY COST

Telephone		\$140.00
Incentives/Awards		\$1,000.00
Memberships & Dues		\$10.00
Printing & Food supplies		\$100.00
3. Other Costs (Description/Examples) Attach Extra Sheet if Needed*	Rate/Unit	YEARLY COST
Conference Fees & Expenses		\$375.00
Drug Tests		\$17,800.00
Tethers		\$750.00
Indirect Costs		\$18,040.00
Total Program Support		\$39,615.00

* 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 (Describe)	TOTAL UNITS/ CONTRACT	YEARLY COST
Substance Abuse Counseling	60.00	session	476	\$28,560.00
				\$
				\$
				\$
2. Closed End Contracts				\$
				\$
				\$
				\$
Total Contractual				\$28,560.00

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	\$172,383.00
--	---------------------

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:

F. PUBLIC REVENUE:

SOURCE	To be Provided	YEARLY COST
State Court Administrative Grant		\$30,000.00
		\$
		\$
Total Public Revenue		\$30,000.00

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)	\$142,383.00
--	---------------------

AUTHORITY: Act 87, Public Acts of 1978, as amended.
 COMPLETION: Is Required.
 PENALTY: State reimbursement will be withheld from local government.

The Department of Human Services will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, 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 DHS office in your county.

DHS-2094 (Rev. 11-99) Previous edition may be used. MS Word-97

IN HOME CARE/BASIC GRANT PROGRAM COMPONENT (4471)

REPORT/REQUEST

Michigan Department of Human Services

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 Title Family and Juvenile Drug Court 2010-2011/Intensive Probation	CHECK ONE <input checked="" type="checkbox"/> IN HOME CARE <input type="checkbox"/> BASIC GRANT	Time Period Covered FROM: THRU: October 1, 2010 through September 30, 2011
Component Manager Name Marchlewicz, Marge (09)	Administrative Unit <input checked="" type="checkbox"/> COURT <input type="checkbox"/> DHS	Telephone Number (989) 895-4208

I. PROGRAM SPECIFIC INFORMATION: Check all that apply.

1. COMPONENT STATUS <input checked="" type="checkbox"/> CONTINUED <input type="checkbox"/> TERMINATED <input type="checkbox"/> REVISED <input type="checkbox"/> NEW								
2. TARGET POPULATION(S) SERVED <hr/> A. Children Under Jurisdiction of Court <input checked="" type="checkbox"/> DELINQUENT <input checked="" type="checkbox"/> NEGLECT <hr/> B. Children NOT Under Jurisdiction of Court <input type="checkbox"/> WRITTEN COMPLAINT <input type="checkbox"/> CPS category I, II or III <input type="checkbox"/> CHILDREN LIKELY TO COME UNDER JURISDICTION OF THE COURT								
3. AREA(S) OF INTENDED IMPACT – (Check primary area(s) only.) A REDUCTION IN: <table style="width: 100%; margin-top: 10px;"> <tr> <td><input type="checkbox"/> Number of Youth Petitioned</td> <td><input checked="" type="checkbox"/> Number of Days of Out-of-Home Detention</td> </tr> <tr> <td><input type="checkbox"/> Number of Adjudications</td> <td><input type="checkbox"/> Number of Days of Shelter Care</td> </tr> <tr> <td><input type="checkbox"/> Number of Days of Family Foster Care</td> <td><input checked="" type="checkbox"/> Number of Days of Residential Treatment Care</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> Number of State Wards Committed (Act 150 & 220)</td> </tr> </table>	<input type="checkbox"/> Number of Youth Petitioned	<input checked="" type="checkbox"/> Number of Days of Out-of-Home Detention	<input 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 checked="" type="checkbox"/> Number of State Wards Committed (Act 150 & 220)
<input type="checkbox"/> Number of Youth Petitioned	<input checked="" type="checkbox"/> Number of Days of Out-of-Home Detention							
<input 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 checked="" type="checkbox"/> Number of State Wards Committed (Act 150 & 220)							
4. SERVICE FOCUS <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 cost's (year-to-date and projections if fiscal year is not complete).
- In columns 8 & 9 enter the numbers and costs projected for the next fiscal year.

	Time Period Reported Oct. 1 thru Sept. 30		Time Period Requested Oct. 1 thru Sept. 30	
	6. ACTUAL NUMBER	7. ACTUAL COST	8. PROJECTED NUMBER	9. PROJECTED COST
A. Number of Youth/Family Served	213	¢	200	¢
B. Number of Service Units	4848	¢	4500	¢

(Define Service Unit=days of care)			
C Total Component Cost		\$176,000.00	\$172,383.00
D. Average Cost Per Unit		\$36.30	\$38.31
E. Average Cost Per Youth/Family		\$826.29	\$861.92

III. IMPACT EVALUATION – Must be completed for continuing or ending components and should correspond to areas of intended identified in Section 1.3.

AREAS OF IMPACT	10. NUMBER OF YOUTH SERVED	ESTIMATED REDUCTIONS	
		11. NUMBER'S OR DAYS	12. COSTS
A. Youth Petitioned			\$
B. Adjudications	243	\$250 x 243	\$60,750.00
C. Days of Family Foster Care			\$
D. Days of Out-of-Home Detention	1176	\$166/day x 1176	\$195,216.00
E. Days of Shelter Care			\$
F. Days of Residential Treatment Care	4	270 days x 4 youth x \$200 per day	\$216,000.00
G. State Wards Committed	13	364 days x 1 x \$100 per day	\$473,200.00

IV. PROGRAM ASSESSMENT/EVALUATION:

For ALL Components in effect during the most recent fiscal year this section must be completed

13. Assess strengths, weakness' and problem areas of this component. Assess the intended impact areas and results.

Explain the reason(s), or cause(s) for the difference between the projected No.'s and cost and the actual. Account for all youth served by this component.

INTENSIVE PROBATION

There was 1 participant in the IPP program this year, 16 youth participated in our TODAY program and 20 Individuals participated in the Family Drug Court.

The IPP program had only one official participant this fiscal year. The participant in the IPP program was referred to residential placement placement, where he is still currently placed.

Strengths: 1) Intense, individualized services and counseling for the youth. 2) Brief Strategic Family Therapy (BSFT) is provided by a trained counselor for each appropriate family. 4) Highly structured program.

Weakness: 1) It is a challenge to run pro-social group activities and ask that the youth participating do not associate with each other outside of the group and it is difficult to run the group when the numbers are few. 2) Finding family support can be difficult with some families.

Problem areas: 1) Limitations in assisting families with some of their basic needs. 2) Also can be challenging to get the youth's family motivated to make changes, Brief Strategic Family Therapy is helping in this area. 3) It can be difficult with youth who live in northern Bay County to maintain face to face contact 2-3 times per week, especially when they need to come to the court for pro social group, etc.

The court is using BSFT and Motivational Interviewing in an attempt to provide more motivation for the family members to participate fully in the counseling services. Because there are so few youth utilizing IPP, as of February of 2010, the IPP services will no longer be provided by one probation officer. Instead each individual probation officer will provide intensive probation services as needed.

JUVENILE DRUG COURT/TODAY PROGRAM

The budget also funded (for the third year) our TODAY (Triumph over Drugs and Alcohol by Youth) program. The 3 month TODAY program serviced 16 youth during the year. Each youth was assessed and recommended for treatment by our local substance abuse treatment agency. Each youth is then required to provide a maximum of 3 random urine samples per week. The required number of drops lessens as the program progresses. The TODAY supervisor meets with the youth individually biweekly and meets with all participants at the group sessions weekly. All youth completed 5 individual and 5 family therapy sessions as well as 12 group sessions. Any sessions that had been missed were made up.

8 participants had successfully completed the program, 2 were referred to residential substance abuse treatment, 2 were unsuccessful and 4 are still participating. The Family and Juvenile Drug Court Coordinator is overseeing this program as of 8-01-10.

Weaknesses and Problem areas are that often there is not family support for the juvenile thereby eliminating the juvenile from participation.

Strengths is the fact that it is intensive and the family is part of the process.

Area of Intended Impact. We estimate that of the 16 participants, 8 participants would have resulted in 10 more adjudications and 6 of them spending approximately 14 days in juvenile detention. While 2 were referred for substance abuse treatment, we estimate that at least 3 would have ended up in residential treatment for 6 to 9 months.

FAMILY DRUG COURT

As of 08-01-10, the Family Drug Court coordinator has been transitioned into this budget. 8 individual participants participated in the program in August with 1 being unsuccessfully discharged. Six individuals are currently being assessed for admission into the program.

Strengths of the program is the support it gives to parents of neglect abuse children in overcoming their drug addictions. Another strength of the program is the cooperation of the court, DHS, and counseling services in providing a cohesive approach to overcoming substance abuse while serving the needs of the children in the family.

A weakness of the program is that sometimes the legal case remains open longer than a non-drug court case, but the upside of that is that generally the children are returned to the parent rather than becoming wards of the state.

The biggest problem area is getting individuals to the point of being serious about their rehabilitation and having time to demonstrate their new found lifestyle before time runs out on their legal case.

Areas of Impact is the number of children return to the parents. We estimate that the 17 children involved in the program in August, 10 of them will be returned to their parent rather than becoming wards of the state.

V. PROGRAM DESCRIPTION – Must be completed for all components, except those being terminated, each year. (Narrative may be attached)

JUVENILE DRUG COURT/TODAY PROGRAM

The TODAY program aims to address the problem of substance abuse without sending the youth to an out of home placement.

It is our intention to reengineer the TODAY program into a Juvenile Drug Court or at least initiate a planning committee for a Juvenile Drug Court while running the TODAY program.

The TODAY program is a 3 month program requiring 3 random urine samples per week initially and lessening as the program progresses. Each participant is required to attend 5 family, 5 individual and 12

group therapy sessions.

FAMILY DRUG COURT

The Family Drug court aims to rehabilitate parents who have been petitioned into the court and have lost temporary custody of their children due primarily to substance abuse. The participants are closely monitored, drop 3 urine screens a week (at the start), meet with the judge once per week and with the coordinator a minimum of 1 time per week. In the meantime, the children's needs are assessed and addressed. The program lasts approximately 10 to 16 months.

AUTHORITY: P.A. 87 of 1978.

COMPLETION: Is required.

CONSEQUENCE FOR NONCOMPLETION: Child care funds will not be reimbursed.

The Department of Human Services will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, 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 a DHS office in your county.

Notes

Edit Date	Saved By	Comments
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IN-HOME CARE/BASIC GRANT BUDGET DETAIL REPORT (2094)
Michigan Department of Human Services (DHS)
 Bureau of Juvenile Justice
 October 1, 2010 through September 30, 2011

Service Component (Full Title/Name) GREAT Program 2010-2011	Check One <input checked="" type="checkbox"/> In Home Care <input type="checkbox"/> Basic Grant
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A. PERSONNEL (Employees of the Court) Administrative Unit DHS Court

1. Salary and Wages NAME(S)	FUNCTION	No. HOURS/WEEK	YEARLY COST
Lana Kalinowski	Gender Services Coordinator	40	\$48,838.00
Sarah Super	Gender Services Program Assistant	40	\$35,839.00
			\$
			\$
			\$
2. Fringe Benefits (Specify)			
Social Security			\$6,626.00
Health Insurance & Pay In Lieu of Health Insurance			\$19,080.00
Retirement			\$5,180.00
Life Insurance			\$174.00
Sick & Accident Insurance			\$485.00
Unemployment Compensation			\$364.00
Workers Compensation			\$1,689.00
Total Personnel			\$118,275.00

B. PROGRAM SUPPORT (For employees identified in "A" above)

1. Travel	Rate/Mile	Estimate No. of Miles	YEARLY COST
Local & State Travel	.50	1400	\$700.00
2. Supplies and Materials (Description/Examples) Attach Extra Sheet If Needed*			YEARLY COST

Office Supplies, \$250; Printing, \$50; Postage, \$75		\$375.00
Magazines & Periodicals, \$175; Food Supplies, \$800.		\$975.00
Clothing, \$50; Training supplies, \$25; Misc. Supplies, \$600		\$675.00
		\$
3. Other Costs (Description/Examples) Attach Extra Sheet if Needed*	Rate/Unit	YEARLY COST
Telephone, \$175; Cell Phone, \$300		\$475.00
Memberships & Dues, \$20; Food Services, \$400;		\$420.00
Transportation, \$1200; Conference fees, \$175		\$1,375.00
Indirect Costs		\$11,000.00
Total Program Support		\$15,995.00

* 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 (Describe)	TOTAL UNITS/ CONTRACT	YEARLY COST
Counseling & Psychological Testing	400.00	assessment	2	\$800.00
Experiential Activities	62.10	month	12	\$745.20
BASIS Urine Tests	25.00	test	200	\$5,000.00
Tethers	10.00	day	50	\$500.00
2. Closed End Contracts				
Copy Machine 3900 copies @ 10 cents per copy = \$390				\$390.00
				\$
				\$
				\$
Total Contractual				\$7,435.20

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	\$141,705.20
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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:

F. PUBLIC REVENUE:

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)	\$141,705.20
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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.

The Department of Human Services will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, 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 DHS office in your county.

DHS-2094 (Rev. 11-99) Previous edition may be used. MS Word-97

IN HOME CARE/BASIC GRANT PROGRAM COMPONENT (4471)

REPORT/REQUEST

Michigan Department of Human Services

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 Title <p style="text-align: center; font-weight: bold;">GREAT Program 2010-2011</p>	CHECK ONE <input checked="" type="checkbox"/> IN HOME CARE <input type="checkbox"/> BASIC GRANT	Time Period Covered FROM: THRU: <p style="text-align: center; font-weight: bold;">October 1, 2010 through September 30, 2011</p>
Component Manager Name <p style="text-align: center;">Marchlewicz, Marge (09)</p>	Administrative Unit <input checked="" type="checkbox"/> COURT <input type="checkbox"/> DHS	Telephone Number (989) 896-4208

I. PROGRAM SPECIFIC INFORMATION: Check all that apply.

1. COMPONENT STATUS <input checked="" type="checkbox"/> CONTINUED <input type="checkbox"/> TERMINATED <input type="checkbox"/> REVISED <input type="checkbox"/> NEW
2. TARGET POPULATION(S) SERVED <hr/> A. Children Under Jurisdiction of Court <input checked="" type="checkbox"/> DELINQUENT <input type="checkbox"/> NEGLECT <hr/> B. Children NOT Under Jurisdiction of Court <input type="checkbox"/> WRITTEN COMPLAINT <input type="checkbox"/> CPS category I, II or III <input type="checkbox"/> CHILDREN LIKELY TO COME UNDER JURISDICTION OF THE COURT
3. AREA(S) OF INTENDED IMPACT – (Check primary area(s) only.) A REDUCTION IN: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> Number of Youth Petitioned</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Number of Days of Out-of-Home Detention</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Number of Adjudications</div> <div style="width: 50%;"><input type="checkbox"/> Number of Days of Shelter Care</div> <div style="width: 50%;"><input type="checkbox"/> Number of Days of Family Foster Care</div> <div style="width: 50%;"><input checked="" type="checkbox"/> Number of Days of Residential Treatment Care</div> <div style="width: 50%;"><input type="checkbox"/> Number of State Wards Committed (Act 150 & 220)</div> </div>
4. SERVICE FOCUS <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 cost's (year-to-date and projections if fiscal year is not complete).
- In columns 8 & 9 enter the numbers and costs projected for the next fiscal year.

	Time Period Reported Oct. 1 thru Sept. 30		Time Period Requested Oct. 1 thru Sept. 30	
	6.	8. ACTUAL NUMBER	7. ACTUAL COST	8. PROJECTED NUMBER
A. Number of Youth/Family Served	17	\$	25	\$
B. Number of Service Units	222	\$	260	\$

(Define Service Unit=meeting days)			
C Total Component Cost		\$129,613.80	\$141,705.20
D. Average Cost Per Unit		\$583.85	\$566.82
E. Average Cost Per Youth/Family		\$7,624.34	\$5,668.21

III. IMPACT EVALUATION – Must be completed for continuing or ending components and should correspond to areas of intended identified in Section 1.3.

AREAS OF IMPACT	10. NUMBER OF YOUTH SERVED	ESTIMATED REDUCTIONS	
		11. NUMBER'S OR DAYS	12. COSTS
A. Youth Petitioned			\$
B. Adjudications	11	11 x \$250	\$2,750.00
C. Days of Family Foster Care			\$
D. Days of Out-of-Home Detention	16	15 girls x 7 days x \$150	\$15,750.00
E. Days of Shelter Care			\$
F. Days of Residential Treatment Care	3	3 girls x \$200/day x 180 days	\$144,000.00
G. State Wards Committed	0	0	\$0.00

IV. PROGRAM ASSESSMENT/EVALUATION:

For ALL Components in effect during the most recent fiscal year this section must be completed

13. Assess strengths, weakness' and problem areas of this component. Assess the intended impact areas and results.

Explain the reason(s), or cause(s) for the difference between the projected No.'s and cost and the actual. Account for all youth served by this component.

1

Seventeen girls are/were in the program during the last year, 8 of the 17 girls served have not had any further charges brought against them.

2

Strengths: This program 1)addresses issues specific to females in the juvenile justice system, 2) provides parent instruction, 3)works hand in hand with the local schools to deal with academic and behavioral problems and 4) promotes healthy community interaction.

Weaknesses: 1)This program has not found a way to effectively deal with the run away problem displayed in some girls. 2) Because the program takes at least 6 months to complete, girls who are ordered into less probation time are not referred to the program. 3)Because of the distance in the county, girls from the northern portion of the county are usually unable to participate. We continue to attempt to overcome these weaknesses.

Problem areas: 1)Substance abuse, 2)teenage pregnancy and 3)lack of family support seem to be continuing issues with this population. The court staff is reviewing the curriculum and is addressing family support.

3

Areas of Impact

All of the girls referred to this program have failed diversion or consent calendar and have had a serious enough criminal adjudication to put them on probation for 6 months or longer. With that background and risk factors, these young women will undoubtedly commit future crimes without intervention. We estimate that the 8 girls who did not have petitions filed after they completed the program, would have had 11 petitions filed--5 with one petition each and 3 with two petitions each. At an estimated cost of \$250 per petition (clerical time, attorney fees, mailing, court time, and probation time) for a savings of \$2,750.

We estimate that 16 of the girls would have spent 7 days or an additional 7 days in the juvenile home at a cost of \$150 per day.

We further estimate that 3 of the young women would have ended up in 6 months of residential treatment at a cost of \$200 per day.

It has been some time since we committed a girl as an Act 150 so that is not a savings here.

4

There were 17 girls in the program; eight fewer than anticipated. The most probable reason is that we did not have enough girls qualify for the program. Specifically, some of the girls are placed on probation for less time than it would take to complete the program.

Our costs are less than anticipated because of constant cost scrutiny by the court staff.

V. PROGRAM DESCRIPTION – Must be completed for all components, except those being terminated, each year. (Narrative may be attached)

The GREAT (Girls Rebuilding Expectations and Aspirations In Themselves) is a six-month after school program for girls under the age of 16, who are diversion and consent calendar failures or have had other petitions filed and adjudicated, are relatively new to the juvenile justice system, but have been in or are at risk of out of home placement. The program attempts to meet the needs of young woman in anticipation of turning their criminal careers around or at least slowing them down and keeping them from out of home placement. The program meets twice a week and has two sessions-Mondays & Wednesdays, and Tuesdays & Thursdays. A monthly experiential activity also takes place. In addition, the program staff meet with the student at school at least once every two weeks and are in contact with the students, teachers and counselors. Staff also work with the families of participants to support and encourage more positive relationships. This is accomplished through family meetings, home visits and phone contact.

Areas covered in the 3 hour sessions include: communications skills, self-esteem, violence, physical health, teen pregnancy, emotions, conflict resolution, women's history, substance abuse and relationships. The program attempts to meet the emotional, physical, mental and social needs of the girls in order to thwart further criminal behavior.

The parents of the participants are required to attend a series of workshops on parenting skills.

AUTHORITY: P.A. 67 of 1978.

COMPLETION: Is required.

CONSEQUENCE FOR NONCOMPLETION: Child care funds will not be reimbursed.

The Department of Human Services will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, 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 a DHS office in your county.

Notes

Edit Date Saved By Comments

IN-HOME CARE/BASIC GRANT BUDGET DETAIL REPORT (2094)

Michigan Department of Human Services (DHS)

Bureau of Juvenile Justice

October 1, 2010 through September 30, 2011

Service Component (Full Title/Name) Youth and Family Support Services	Check One <input checked="" type="checkbox"/> In Home Care <input type="checkbox"/> Basic Grant
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A. PERSONNEL (Employees of the Court) Administrative Unit DHS Court

1. Salary and Wages NAME(S)	FUNCTION	No. HOURS/WEEK	YEARLY COST
Kara Rohn	Counselor	40	\$48,651.00
Allen Nelson	Community Service	40	\$40,476.80
Marge Marchlewicz	Court Administrator	10	\$18,500.00
			\$
			\$
2. Fringe Benefits (Specify)			
Social Security			\$8,892.21
Retirement (Employee & Employer)			\$6,974.29
Self Ins Administration, \$360.34; Workers Comp \$1952.80;			\$2,313.14
Unemployment Ins \$453.33; Life Ins. \$281.00			\$714.33
Health Insurance and Pay In lieu of health insurance			\$21,000.00
Sick & Accident, \$650.94			\$650.94
Total Personnel			\$148,172.71

B. PROGRAM SUPPORT (For employees identified in "A" above)

1. Travel	Rate/Mile	Estimate No. of Miles	YEARLY COST
State & Local Travel	.50	1000	\$500.00
2. Supplies and Materials (Description/Examples) Attach Extra Sheet if Needed*			YEARLY COST
			\$

		\$
		\$
		\$
3. Other Costs (Description/Examples) Attach Extra Sheet if Needed*	Rate/Unit	YEARLY COST
Indirect Costs	1.00	\$10,000.00
		\$
		\$
		\$
Total Program Support		\$10,500.00

* 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 (Describe)	TOTAL UNITS/ CONTRACT	YEARLY COST
				\$
				\$
				\$
				\$
2. Closed End Contracts				
				\$
				\$
				\$
				\$
Total Contractual				\$0.00

D. NON-SCHEDULED PAYMENTS

TYPE OF SERVICE	Anticipated No. Units	Average Cost of

(Description)	To be Provided	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	\$158,672.71
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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:

F. PUBLIC REVENUE:

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)	\$158,672.71
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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.

The Department of Human Services will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, 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 DHS office in your county.

DHS-2094 (Rev. 11-99) Previous edition may be used. MS Word-97

**IN HOME CARE/BASIC GRANT PROGRAM COMPONENT (4471)
 REPORT/REQUEST
 Michigan Department of Human Services**

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 Title Youth and Family Support Services	CHECK ONE <input checked="" type="checkbox"/> IN HOME CARE <input type="checkbox"/> BASIC GRANT	Time Period Covered FROM: THRU: October 1, 2010 through September 30, 2011
Component Manager Name Marchlewicz, Marge (09)	Administrative Unit <input checked="" type="checkbox"/> COURT <input type="checkbox"/> DHS	Telephone Number (989) 8954208

I. PROGRAM SPECIFIC INFORMATION: Check all that apply.

1. COMPONENT STATUS	
<input type="checkbox"/> CONTINUED	<input type="checkbox"/> TERMINATED <input checked="" type="checkbox"/> REVISED <input type="checkbox"/> NEW
2. TARGET POPULATION(S) SERVED	
A. Children Under Jurisdiction of Court	
<input checked="" type="checkbox"/> DELINQUENT	<input type="checkbox"/> NEGLECT
B. Children NOT Under Jurisdiction of Court	
<input type="checkbox"/> WRITTEN COMPLAINT	<input type="checkbox"/> CPS category I, II or III <input type="checkbox"/> CHILDREN LIKELY TO COME UNDER JURISDICTION OF THE COURT
3. AREA(S) OF INTENDED IMPACT – (Check primary area(s) only.)	
A REDUCTION IN:	
<input 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 Warda Committed (Act 150 & 220)
4. SERVICE FOCUS	
<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 cost's (year-to-date and projections if fiscal year is not complete).
- In columns 8 & 9 enter the numbers and costs projected for the next fiscal year.

	Time Period Reported Oct. 1 thru Sept. 30		Time Period Requested Oct 1 thru Sept. 30	
5.	6. ACTUAL NUMBER	7. ACTUAL COST	8. PROJECTED NUMBER	9. PROJECTED COST
A. Number of Youth/Family Served	160	\$	160	\$
B. Number of Service Units (Define Service Unit=hours of service)	1812	\$	1925	\$
C Total Component Cost		\$146,000.00		\$188,672.71

D. Average Cost Per Unit		\$80.02		\$82.43
E. Average Cost Per Youth/Family		\$906.25		\$991.70

III. IMPACT EVALUATION – Must be completed for continuing or ending components and should correspond to areas of intended Identified in Section 1.3.

AREAS OF IMPACT	10. NUMBER OF YOUTH SERVED	ESTIMATED REDUCTIONS	
		11. NUMBER'S OR DAYS	12. COSTS
A. Youth Petitioned			\$
B. Adjudications	160	\$250 x 160	\$40,000.00
C. Days of Family Foster Care			\$
D. Days of Out-of-Home Detention	123	123 x 7 x 160	\$129,160.00
E. Days of Shelter Care			\$
F. Days of Residential Treatment Care	2	240 x \$200	\$48,000.00
G. State Wards Committed			\$

IV. PROGRAM ASSESSMENT/EVALUATION:

For ALL Components in effect during the most recent fiscal year this section must be completed

13. Assess strengths, weakness' and problem areas of this component. Assess the intended impact areas and results.

Explain the reason(s), or cause(s) for the difference between the projected No.'s and cost and the actual. Account for all youth served by this component.

COUNSELOR

This position is being moved from the Intensive Probation unit to the Youth and Family Support program.

As part of the IPP program, the counselor was not utilized fully. We had only 1 participant in Intensive probation and have now decentralized the program, by having all probation officers perform more Intensive probation as needed.

COMMUNITY SERVICES

Included in this budget is the salary for the Community Services Worker (CSW). The CSW coordinates the placement of youth in community projects as an alternative to detention and out of home placement. The CSW serves all of our In-Home care programs and the court.

Strengths: Provides the youth experience in a work environment and holds the youth accountable for violations of probation and minor criminal and civil offenses. At the same time, it provides the community with additional assistance in projects and programs such as assisting with clean up after festivals; maintaining and beautifying projects in parks, schools and recreational areas.

Weakness: There is some difficulty in keeping and maintaining sites in northern Bay County and a few other areas with lesser population. There is a need for sites in those areas because there are youth residing nearby, but there are only a few appropriate sites with adults willing to work with delinquents. We continue to work with these sites. Another weakness is the inconsistency of the reports from the volunteer supervisors. We are attempting to resolve this by using a standard easy to use form for reporting.

Problems: The biggest problem we have from time to time is a report of criminal activity (thefts) when

the youth are at the sites. We attempt to do our best to identify whether or not our youth was involved and work with the site to continue the confidence and credibility of the program.

142 youth were serviced by the Community Service alternative for this current fiscal year. 123 of those youth were successful in this alternative to detention. Of the 19 who failed, 12 were sent to detention. The balance of the youth were given another opportunity or were given another assignment such as a writing assignment, more frequent contact with their probation officer, etc.

In terms of impact, if the 123 youth who successfully completed their community service had instead spent 7 days in detention, the cost would have amounted to (at \$150 per day) to \$129,150.00.

COURT ADMINISTRATION

Included in this category is 25% of the Court Administrator's salary and fringes because of her supervision of the 7 full time employees and 1 part time employee in In-Home Care programs.

V. PROGRAM DESCRIPTION - Must be completed for all components, except those being terminated, each year. (Narrative may be attached)

COUNSELOR

This position provides counseling services to youths and their families involved in the court system and referred to in-home programs, particularly those involved in Intensive Probation. Provides family support services, counseling services and parent workshops to in-home care programs in the court system. Also provides such counseling services as anger management and prosocial skills to youth demonstrating a need.

COMMUNITY SERVICE

The Community Services Worker coordinates the placement of youth in community projects as an alternative to detention and out of home placement. The community services worker serves all of our in-home care programs and the court. The Community Services Worker meets with the youth and family prior to site placement to make an assessment on the appropriate job and site for the youth and maintains contact with the volunteer, who supervises the youth, and the youth until the community service hours are completed. When youth are struggling to complete their community service hours, it is the Community Services Worker who works with the youth--reassigning, motivating, transporting and even providing wake-up calls, if needed. The Community Service Worker also directs the youth as to what is appropriate language, dress and attitude at the work site.

This position will also be evaluating on a regular basis each of the In-Home programs in an effort to measure success, develop performance measures and make adjustments to the programs.

COURT ADMINISTRATION

Provides guidance and supervision to the GREAT (Girls Rebuilding Expectation and Aspirations in Themselves), Day Treatment, Youth and Family Support Services, and Family and Juvenile Drug Courts.

AUTHORITY: P.A. 87 of 1978.

COMPLETION: is required.

CONSEQUENCE FOR NONCOMPLETION: Child care funds will not be reimbursed.

The Department of Human Services will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, 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 a DHS office in your county.

Notes

Edit Date Saved By Comments

IN-HOME CARE/BASIC GRANT BUDGET DETAIL REPORT (2094)
Michigan Department of Human Services (DHS)
 Bureau of Juvenile Justice
 October 1, 2010 through September 30, 2011

Service Component (Full Title/Name) Day Treatment 2011	Check One <input checked="" type="checkbox"/> In Home Care <input type="checkbox"/> Basic Grant
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A. PERSONNEL (Employees of the Court) Administrative Unit DHS Court

1. Salary and Wages NAME(S)	FUNCTION	No. HOURS/WEEK	YEARLY COST
Jeffrey Strohpaal	Day Treatment Program Manager	40	\$48,838.00
Christopher Foret	Day Treatment Program Assistant	40	\$35,976.00
	On-Call Assistant	varies	\$6,000.00
			\$
			\$
2. Fringe Benefits (Specify)			
Social Security			\$8,386.00
Health Insurance			\$20,000.00
Retiree Health Care			\$5,186.00
Life Insurance & Prior Year's Vacation			\$174.00
Workers Compensation			\$2,139.00
Sick & Accident & Unemployment Compensation			\$1,039.00
Total Personnel			\$127,738.00

B. PROGRAM SUPPORT (For employees identified in "A" above)

1. Travel	Rate/Mile	Estimate No. of Miles	YEARLY COST
State & Local Travel	.60	1600	\$750.00
2. Supplies and Materials (Description/Examples) Attach Extra Sheet if Needed*			YEARLY COST
Office Supplies, \$100; Postage, \$25; Food Supplies, \$600			\$625.00

Training supplies, \$30; Misc. Supplies, \$50		\$80.00
Conference fees & expenses		\$175.00
		\$
3. Other Costs (Description/Examples) Attach Extra Sheet if Needed*	Rate/Unit	YEARLY COST
Professional Services--evaluations, counseling		\$450.00
Experiential Activities, \$500;		\$500.00
Drug Tests, \$1400; Cell Phone, \$400; van washes,\$25		\$1,325.00
Transport of youth by staff in staff's vehicles.	0.50	\$525.00
Indirect Costs		\$11,000.00
Total Program Support		\$15,430.00

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

C. CONTRACTUAL SERVICES

1. Unit Rates	RATE	UNIT (Describe)	TOTAL UNITS/ CONTRACT	YEARLY COST
NAME(S) Food Services--lunches for youth (summer)	4.00	meal	500	\$2,000.00
County van rental-- transport youth	0.55	mile	15000	\$8,250.00
Bay Area Family Y Membership & Speakers, Instructors, etc	50.00	hour	14	\$700.00
Tethers	15.00	day	20	\$300.00
2. Closed End Contracts				\$
				\$
				\$
				\$
Total Contractual				\$11,250.00

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	\$154,418.00
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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:

F. PUBLIC REVENUE:

SOURCE	To be Provided	YEARLY COST
Strong Families/Safe Children		\$19,582.00
		\$
		\$
Total Public Revenue		\$19,582.00

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)	\$134,836.00
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AUTHORITY: Act 87, Public Acts of 1976, as amended.
COMPLETION: Is Required.
PENALTY: State reimbursement will be withheld from local government.

The Department of Human Services will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, 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 DHS office in your county.

DHS-2094 (Rev. 11-99) Previous edition may be used. MS Word-97

IN HOME CARE/BASIC GRANT PROGRAM COMPONENT (4471)

REPORT/REQUEST

Michigan Department of Human Services

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 Title Day Treatment 2011	CHECK ONE <input checked="" type="checkbox"/> IN HOME CARE <input type="checkbox"/> BASIC GRANT	Time Period Covered FROM: THRU: October 1, 2010 through September 30, 2011
Component Manager Name Marchlewicz, Marge (09)	Administrative Unit <input checked="" type="checkbox"/> COURT <input type="checkbox"/> DHS	Telephone Number (989) 895-4208

I. PROGRAM SPECIFIC INFORMATION: Check all that apply.

1. COMPONENT STATUS <input checked="" type="checkbox"/> CONTINUED <input type="checkbox"/> TERMINATED <input type="checkbox"/> REVISED <input type="checkbox"/> NEW	
2. TARGET POPULATION(S) SERVED A. Children Under Jurisdiction of Court <input checked="" type="checkbox"/> DELINQUENT <input type="checkbox"/> NEGLECT B. Children NOT Under Jurisdiction of Court <input type="checkbox"/> WRITTEN COMPLAINT <input type="checkbox"/> CPS category I, II or III <input type="checkbox"/> CHILDREN LIKELY TO COME UNDER JURISDICTION OF THE COURT	
3. AREA(S) OF INTENDED IMPACT -- (Check primary area(s) only) A REDUCTION IN: <input type="checkbox"/> Number of Youth Petitioned <input checked="" type="checkbox"/> Number of Days of Out-of-Home Detention <input 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"/> <input checked="" type="checkbox"/> Number of State Wards Committed (Act 150 & 220)	
4. SERVICE FOCUS <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 cost's (year-to-date and projections if fiscal year is not complete).
- In columns 8 & 9 enter the numbers and costs projected for the next fiscal year.

	Time Period Reported Oct. 1 thru Sept. 30		Time Period Requested Oct. 1 thru Sept. 30	
5.	6. ACTUAL NUMBER	7. ACTUAL COST	8. PROJECTED NUMBER	9. PROJECTED COST
A. Number of Youth/Family Served	19	\$	18	\$
B. Number of Service Units	1550	\$	1520	\$

(Define Service Unit=DAYS)			
C Total Component Cost		\$151,172.00	\$154,418.00
D. Average Cost Per Unit		\$97.53	\$101.59
E. Average Cost Per Youth/Family		\$7,956.42	\$8,578.78

III. IMPACT EVALUATION -- Must be completed for continuing or ending components and should correspond to areas of intended identified in Section 1.3.

AREAS OF IMPACT	10. NUMBER OF YOUTH SERVED	ESTIMATED REDUCTIONS	
		11. NUMBER'S OR DAYS	12. COSTS
A. Youth Petitioned			\$
B. Adjudications	13	13 x \$250	\$3,250.00
C. Days of Family Foster Care			\$
D. Days of Out-of-Home Detention	7	41 days x \$150	\$6,150.00
E. Days of Shelter Care			\$
F. Days of Residential Treatment Care	5	5 youth x \$200/day x 180 days	\$180,000.00
G. State Wards Committed	1	1 x 300 x 364	\$109,200.00

IV. PROGRAM ASSESSMENT/EVALUATION:

For ALL Components in effect during the most recent fiscal year this section must be completed

13. Assess strengths, weakness' and problem areas of this component. Assess the intended impact areas and results.

Explain the reason(s), or cause(s) for the difference between the projected No.'s and cost and the actual. Account for all youth served by this component.

There were 19 young men and women who participated in the Day Treatment program in this fiscal year. Of the 19 youth in the program, 11 successfully completed the program, 3 did not (one was a repeat) and 6 are currently in the program.

11 of the youth who were successful in the program would have had an additional adjudication and 2 of the youth would have had 2 additional adjudication for a impact total of 13 adjudications. We anticipate that at least one of the adjudications would have resulted in 7 days in the juvenile home and the at least 4 youths would have violated probation and spent 9 days each in the juvenile home and 1 youth 2 days. 6 of the youth were headed for placement in residential treatment for 6 months. We estimate one of the youth would have been made a state ward and spent 1 year in treatment.

Strengths: 1)Provides for family involvement. 2)Strong academic component. 3)Structured program which keeps the youth involved in a variety of educational, therapeutic, and recreational activities and programs 4)Provides an environment to which the youth can return to continue their education. Allows participants to develop self confidence, learn social skills and advance their education. Provides family involvement including parenting classes.

Weakness: 1)Because of the length of the academic day, therapeutic activities are limited. 2)Many youth express a need to stay in the program longer. We are working on both issues.

Problem area: 1)More transitional and after-care services are needed to continue to address the needs/problems of each individual participant. 2)Placing a youth in this program often puts him 'under the microscope' and causes the court staff to implement too many services to the youth and the family.

The court has implemented the YASI (Youth Assessment and Screening Instrument) in an attempt to focus more directly and solely on those behaviors and needs that contribute to criminal behavior.

Our costs were fairly close to what we expected as was the number of clients served, with the exception that one youth was kept in the program for an extended period of time (2 semesters).

V. PROGRAM DESCRIPTION – Must be completed for all components, except those being terminated, each year. (Narrative may be attached)

The Day Treatment program offers an intensive, structured program for adjudicated youth and their families. Treatment activities address the needs of the participants in the areas of counseling, substance abuse, anger management, self-esteem, conflict resolution and recreational therapy. Parents are required to attend a series of eight parenting workshops.

The program is a four month program aimed at juveniles who are early in their criminal careers and are also truant and/or having serious problems at school and are clearly at risk for out of home placement. The program attempts to rehabilitate youth while keeping them in the family home and/or reducing the time the juvenile spends in an out of home placement.

In the 2008-09 school year, we piloted a cooperative school year with a charter alternative school. This fulfilled our expectations and provided our youth with teachers better equipped to deal with the court's youths' unique situations and provided an environment they can remain in to finish their high school education. We have continued our program with the charter school, where for the first time this year we spent half of our summer session, the other half had an academic component provided by the Intermediate School District career center.

AUTHORITY: P.A. 87 of 1978.

COMPLETION: Is required.

CONSEQUENCE FOR NONCOMPLETION: Child care funds will not be reimbursed.

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Notes

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