Lynwood McDaniel, Jr. M.P.P.
Social Services Program Specialist
Office of Community Services
Administration for Children and Families
U.S. Department of Health and Human Services
330 C Street, S.W. 5th Floor
Washington, DC 20201

Dear Mr. McDaniel,

Enclosed is the Social Services Block Grant State Plan for the State of Indiana. This report covers Federal fiscal year 2017, which runs from 10/01/2016 through 09/30/2017. The Pre-Expenditure Report is being submitted through the SSBG data portal.

This letter of transmittal is being submitted to satisfy the requirements of 42 U.S.C. § 1397(c); 42 U.S.C. § 1397(d) and 42 U.S.C. § 1397(e).

The SSBG Grant Award Letter should be sent to:

Mary Beth Bonaventura, Director
Indiana Department of Child Services
302 West Washington Street, Room E306, MS 47
Indianapolis, IN 46204
Email: marybe-h.bonaventura@dcs.IN.gov
Phone: (317) 234-3323
Fax: (317) 232-4497

The SSBG Program Contact person is:

Robin Degner
Controller
Email: robin.degner@dcs.IN.gov
Phone: (317) 234-5079
Fax: (317) 234-5444
If you have any questions or require additional information, please contact Robin Degner, the SSBG Program Contact, at the phone number listed above.

Sincerely,

Mary Beth Bonaventura
Director
Indiana Department of Child Services

Enclosures

Cc:  Sam Criss
     Corinne Gilchrest
     Clinton Bohm
     Robin Degner
     Luke Bosso
Social Services Block Grant (SSBG)

Indiana Department of Child Services

FFY 2017 State Plan
SSBG Pre-Expenditure Report 2017

I. State / Federal Fiscal Year Covered by the Pre-Expenditure Report

For purposes of the SSBG program calendar, the State of Indiana observes the Federal fiscal year of October 1, 2016 through September 30, 2017.

II. Letter of Transmittal

The preceding cover letter is written to the Program Specialist, Office of Community Services, and includes the Indiana SSBG program contact person, the Indiana Official who is to receive the SSBG grant award, and complete addresses, phone numbers, and fax numbers for these individuals.

III. Public Inspection of Pre-Expenditure Report

A meeting involving all State agencies was held in preparation of the Pre-Expenditure report and a Public Notice is placed in Indiana newspapers notifying citizens of the document’s availability, including an address where public comments may be mailed in accordance with 42 U.S.C. § 1397 (c). This notice is attached to this report as Appendix A.

IV. The Narrative of Pre-Expenditure Report

A. Administrative Operations

1. State Administrative Agency – Mission, Vision, and Values

The State Administrative Agency for the Social Services Block Grant is the Indiana Department of Child Services, the mission of which is, “The Indiana Department of Child Services protects children from abuse and neglect and works to ensure their financial support.”

The vision of the Indiana Department of Child Services is “Children thrive in safe, caring, supportive families and communities.”

The values of the Indiana Department of Child Services are as follows:

- We believe that every child has the right to be free from abuse and neglect.
- We believe that every child has the right to appropriate care and a permanent home.
- We believe the best place for children to grow up is with their own families.
- We believe children and older youth have the right to permanent and lifelong connections.
- We believe parents have the primary responsibility for the care and safety of their children.
• We believe in personal accountability for outcomes, including one’s own growth and development
• We believe every person has value, worth and dignity

2. State Entities Allocated SSBG Funds & Services Supported by Each State Entity

The State of Indiana allocates SSBG funds to the Indiana Department of Child Services, the Indiana Criminal Justice Institute, the Indiana State Department of Health, the Indiana Department of Correction, and the Family and Social Service Administration (FSSA) Division of Mental Health & Addiction, FSSA Division of Disability and Rehabilitative Services, FSSA Division of Aging, and FSSA Division of Family Resources. These agencies coordinate on development of the SSBG State Plan, the Pre-Expenditure Report, quarterly grant monitoring and reporting, and the Post-Expenditure Report and grant close-out. The Indiana Department of Child Services is the lead agency in these efforts.

**Indiana Department of Child Services (DCS)**

DCS will utilize SSBG funds to provide an array of services to children involved, or at risk of involvement, in the child welfare system and their families.

**Structured Analysis Family Evaluation Home Study:** Indiana will use SSBG funds in order to provide education and training to foster home licensing and adoptive home study staff on the Structured Analysis Family Evaluation home study methodology. This home study methodology is being implemented as Indiana’s state approved home study model to evaluate families for foster care licensure and adoption preparation, and is built upon social work practice values emphasizing respectful engagement to learn more about the families. This level of funding will permit Indiana to provide this training to new staff who require this certification to implement their duties, and would provide consistency across Indiana for licensure of Indiana’s foster family homes.

**Museum Membership Program:** Indiana has established a successful program with the Indiana Children’s Museum to offer membership fees to Foster Children and their Foster Parent family to encourage the well-being and educational opportunities of the children in care. These annual memberships allow unlimited visits to a nationally recognized museum and educational resources for youth and families. Foster families have benefited for the past several years from the opportunity to experience this attraction, many of whom would not have sought the chance to visit based on the standard membership/entrance fees. Approximately 6,635 children will be served.

**Foster Parent Retention/Recruitment/Appreciation/Support Groups:** A primary use of funding toward retention of foster parents will be used to plan and implement regional foster parent appreciation/recognition events to highlight strengths and accomplishments of foster parents and say “thanks for all you do.” These events can also be structured to include community education and recruitment opportunities. Specifically, Indiana plans to
implement a request for proposal seeking vendors to implement best practices for targeted retention and recruitment strategies to meet the increasingly complex array of needs of children in out of home care. The program will include regional appreciation events. These appreciation events are generally 2-4 hours in duration and structured to include a meal, family and child friendly activities, an hour of foster parent training, the distribution of awards and small appreciation gifts, and important networking opportunities for foster parents. The awards generally consist of a certificate or plaque of recognition for various accomplishments, such as years of service, mentoring of newer foster parents, availability for respite or emergency care, etc. Regional foster parent recognition/support events utilizing community partnerships and regional communities in order to recognize foster parents as critical partners of the agency and celebrating their dedication is critical in the retention and recruitment of foster families. Approximately 6,635 children will be served.

**National Electronic Interstate Compact Enterprise:** Indiana will use SSBG funds to participate in the National Electronic Interstate Compact Enterprise ("NEICE") through the American Public Human Services Association. The NEICE project is to establish a database system to streamline child welfare processes when a child or youth is being placed for foster care or privately adopted out of state. The goal of NEICE is to enable each State to process Interstate Compact for the Placement of Children (ICPC) cases in their own child welfare system and use NEICE to assist with the interstate movement of case data. This will allow for more effective provision of child welfare services around the country and will provide a secure mechanism for transmitting important data between states to allow for appropriate decision-making and safe placement on individual child welfare cases. An estimated 1,078 children will be served.

**Child Advocacy Centers:** Advocacy Centers are neutral, safe and child appropriate locations where multidisciplinary teams investigate disclosures of child sexual or severe physical abuse. These multidisciplinary teams are made up of law enforcement officers, child protective service personnel, medical and mental health, victim assistance, prosecutors, and advocates. Children who have disclosed abuse are interviewed by a forensic interviewer at such centers. The multidisciplinary approach to child abuse assessments is designed with the intention of reducing the secondary trauma associated with the disclosure and subsequent investigation of abuse. Approximately 10,203 children will be served.

**Care Coordination and Behavioral Intervention Services for children with Developmental Delays/Intellectual Disabilities/Autism:** This service is a care coordination/home based behavior intervention model for children who are developmentally delayed, autistic, intellectually disabled, or dually diagnosed and has been determined to be at very high risk of residential placement. It will operate in Marion County and surrounding counties. It will include intensive support and training to caregivers in the home and community to ensure consistency across settings. Crisis services must be available 24/7 in order to support the family. Children will be identified through the state’s Multidisciplinary Team to participate in the pilot program. Approximately 30 children will be served.
Cross Systems Care Coordination: Cross Systems Care Coordination include a system of care that is comprehensive, incorporating a broad range of services and supports, individualized, provided in the least restrictive, appropriate setting coordinated at the system and service delivery levels. The services involve youth and families as full partners and emphasize early identification and intervention. Core values of a system of care are, that services are child centered and family driven, community based and culturally competent.

The services provided are comprehensive and include cross-system coordination, case management, safety and crisis planning, comprehensive strength-based discovery and assessment, activities of daily living training, assistance to the FCM in the facilitation of the child and family team process, facilitation of the family team process for probation cases and family and child centered care.

This service is based on the belief that children and their families are remarkably resilient and capable of positive development when provided with community-centered support, truly defined by what is in the best interest of the child. It is meant to provide a single comprehensive system of care that allows children and families in the child welfare and/or juvenile probation system(s) with complex needs to receive culturally competent, coordinated, and uninterrupted care. The services provided to the clients and covered in the per child allotment rate will include all services necessary to meet the child’s safety, permanency and wellbeing needs and address criminogenic risk factors. Approximately 250 children will be served.

Indiana Criminal Justice Institute (ICJI)
SSBG funds will be used by the Indiana Criminal Justice Institute solely for emergency shelter operations at twenty-two (22) domestic violence shelters which provide emergency shelter, congregate meals, and transportation (for residents and children to medical and legal appointments, interviews, etc.) for victims of domestic violence.

ICJI projects using SSBG funds to provide services to approximately 11,150 individuals for the 2017 FFY, which includes 2,500 children, 8,350 adults age 59 and younger, 165 adults age 60 and older, and 160 adults of unknown age.

Indiana State Department of Health (ISDH)

HIV Care Coordination

The Indiana State Department of Health, Division of HIV/STD/Viral Hepatitis uses SSBG and other funds under the expense category of (2) Case Management to support HIV Care Coordination. ISDH anticipates serving 364 adults (349 age 59 and younger and 15 age 60 and older). The mission of this specialized case management program is to assist those living with HIV in coordination of a wide variety of health and social services. The program consists of goal-oriented activities that serve to locate, facilitate access to, and monitor the full range of HIV-related services in cooperation with the client. The program encourages the most cost-effective use of medical and community resources and promotes the overall
well-being of the individual, while respecting cultural diversity, emphasizing confidentiality, and striving to ensure the client’s freedom of choice and self-determination. These comprehensive and compassionate services are rendered in a safe, secure, and non-judgmental environment and are provided without cost to the client.

Indiana’s HIV Care Coordination Program is the result of recommendations made by the HIV/AIDS Health and Human Services Planning Project for Indiana which was conducted in 1989 and 1990. It was determined in the planning process that “care coordination services are the foundation upon which all other HIV/AIDS health and human service programs are built.” The plan identified the need for regional care coordination on a statewide basis, site communication, and the standardization of data collection and intake procedures. Through a community baseline viral load report in 2011 and a second analysis performed in 2012, the Division confirmed that those individuals dually enrolled in the HIV Care Coordination Program and the HIV Medical Services Program are healthier than the larger HIV-positive community in Indiana.

Currently, the Care Coordination Program receives funding through the Social Services Block Grant (SSBG) and the HIV/AIDS Services (HAS) appropriation. The HAS dollars are allocated to ISDH through the State Budget Agency. ISDH then contracts with specific entities in targeted communities throughout the state to offer Care Coordination services. Until July 1, 2011, Medicaid reimbursement had also been available to certified Care Coordinators providing services to clients enrolled in and eligible to receive services under the HIV Targeted 211 Waiver. However, Indiana Medicaid announced the elimination of several targeted case management programs in the IHCP Bulletin dated May 24, 2011.

The SSBG funding received for this program partially supports one large contract in South Bend. HAS funds support the balance of this contract as well as the remaining contracts serving the state’s other 11 regions. Any eligible person may receive services until such time as they are no longer necessary. Though there are no income or asset restrictions on the program participants, the program tends to target those with very limited resources. More than 40% of its enrollees earn less than $10,000 annually.

Case management is a multi-step process which ensures coordination and timely access to a range of appropriate medical and social services. This process includes, at a minimum, the following activities:

- Client Identification and Recruitment;
- Client Orientation, Initial Interview, and Assessment;
- Development of Individualized Care Plan;
- Monitoring and Evaluation of Individualized Care Plan;
- Client Status Maintenance;
- Crisis Intervention Activities; and
- Termination and Discharge Planning.
Family Planning Services

ISDH also uses SSBG funds to provide family planning services to approximately 2,141 low-income adults age 59 years and younger. Through the ISDH Division of Maternal and Child Health, the Indiana Family Health Council, Inc. (IFHC) operates as Indiana’s “Family Planning Administrator” statewide. IFHC has updated its reproductive Health Needs Assessment to identify the groups who are at greatest risk for adverse reproductive health outcomes in Indiana. According to the most recent reproductive Health Needs Assessment, the target counties for those most in need contain 65% of teens and 73.9% of the women under 100% of poverty who need family planning services. The area contains 92.5% of the black population and 76.8% of the Hispanic population in Indiana. IFHC contracts with Indiana non-profit and/or public health service providers to provide culturally-competent, comprehensive family planning medical, educational, and counseling services. IFHC initiated a competitive application process to ensure sites are funded in counties with the highest need for services. Currently funding counties include Allen, Daviess, Delaware, Dubois, Elkhart, Floyd, Grant, Jackson, Knox, Kosciusko, Lake, LaPorte, Lawrence, Madison, Marion, Monroe, Owen, Pike, Putnam, St. Joseph, Vanderburgh, Vigo, Wayne, and Warrick. These sites serve all 92 Indiana counties. Services provided by sub-grantee delegate agencies statewide are medical examinations and physical assessments, laboratory services, STD/HIV testing, all U.S. Department of Health and Human Services FDA-approved methods of contraception, adolescent services, counseling, education, and community outreach.

IFHC and the ISDH State Laboratory have partnered for more than twenty-five years of Chlamydia/Gonorrhea Testing Program which also benefits the Indiana Family Planning Partnership. It is important to note, IFHC does not use any State of Indiana family planning funds to support an agency that performs abortion services.

Indiana Department of Correction (IDOC)
The Indiana Department of Correction (IDOC) will use SSBG funds to provide transitional services to juveniles returning to the community from a state juvenile correctional facility. This is done in accordance with two of the stated SSBG goals: 1) achieving or maintaining self-sufficiency, including reduction or prevention of dependency; and 2) preventing or reducing inappropriate institutional care by providing for community-based care, home-based care or other forms of less intensive care.

In keeping with correctional best practices and the US Department of Justice Office of Juvenile Justice Programs, the Department’s goal is to maintain each juvenile safely in the least restrictive setting possible for that individual. Through SSBG funding, juveniles who no longer require housing in a secured correctional facility are moved to a contracted transitional residential “step-down” placement in or near the individual’s home community, or to the individual’s home, according to treatment needs. Placement in the community allows access to positive family and social supports as well as community-based services that can be continued as needed on an outpatient basis after involvement with the criminal justice system concludes.
As the IDOC's population for SSBG funding is juveniles, the emphasis on employment training falls primarily on education. Within facilities, vocational and post-secondary education is available for those who have received a GED or high school diploma, as is programming focused on portable job skills and employment preparation. For those transitioning to the community who have not yet received a diploma or its equivalent, the preference is reentry into the local public school system. Provision of transition services through SSBG funding allows individuals to continue receiving educational and employment preparation services necessary for successful reentry and independence.

IDOC estimates that 360 individuals will receive services funded in whole or in part through the 2017 SSBG grant. Based on historical data, it is expected that 240 individuals will require long term placement services (averaging 45 and 90 days in transitional placement, respectively), and 120 individuals will require community-based support services.

**FSSA Division of Mental Health and Addiction (DMHA)**
The FSSA Division of Mental Health & Addiction will use SSBG funds, along with funds from the Center for Mental Health Services Block Grant (CMHS) and State General Funds, to provide treatment services for approximately 27,500 children and adolescents at risk due to a serious emotional disturbance (SED). To be eligible for services funded with these SSBG, CMHS and State General funds, SED children must be from families with household incomes at or below 200% of the poverty level.

Services will be available statewide and will be delivered by Community Mental Health Centers and Provider Service Networks that are Certified by the State of Indiana DMHA and accredited by nationally recognized accreditation bodies.

**FSSA Division of Disability and Rehabilitation Services (DDRS)**
The FSSA Division of Disability and Rehabilitation Services (DDRS) uses SSBG funds to provide case management services to approximately 10,300 children, adult day-care for approximately 1,840 adults of unknown ages, and special services – disabled for approximately 1,000 adults of unknown ages. Support services will be provided for deaf and hard-of-hearing individuals, developmentally disabled individuals, and children (ages 0-3) identified with cognitive developmental delay. Expenses for interpreters, intervention and case management services are funded by SSBG, as well as adult day programs for eligible developmentally disabled persons over 16 years of age whose disability occurred prior to 18 years of age. Pre-vocational and sheltered workshop activities, as well as supported employment, are available to persons of all ages including those in nursing homes and assisted living situations. Early intervention services are provided to families with children with developmental disabilities, including family education and training, therapies, social work services, and assisted technology. Case management services are provided to eligible members of the deaf/hard of hearing community.
**FSSA Division of Aging**
The FSSA Division of Aging uses SSBG funds to provide in-home and community-based services targeted to low-income adults and persons with disabilities. Recipients of services must be residents of Indiana and have family incomes below 300% of the poverty level (HHS Poverty Guidelines). Approximately 20,000 adults age 59 and younger and 100,000 adults age 60 and over are expected to receive information and referral services. Transportation will be provided to approximately 5,000 adults age 59 and younger and 500,000 adults age 60 and over. Sixteen Area Agencies on Aging (AAA) throughout Indiana will provide home-based services to approximately 280 adults age 59 and younger and 3,080 age 60 and older. Health-related services will be provided to approximately 30 adults age 59 and younger and 170 age 60 and over. Case management will be provided for approximately 5,000 adults age 59 and younger and 18,000 age 60 and older. The services and case management will be provided in the recipient’s own home or apartment and include services such as homemaker, home-health aide, attendant care, and home-delivered meals.

Community-based services will be provided within the home or community rather than in an institutional setting. Adult day care will be provided to approximately 25 adults age 59 and younger and 75 adults age 60 and over. A portion of the funding will be used for Adult Protective Services to provide services in response to ever increasing calls for services for an estimated 30,000 adults of unknown ages.

**FSSA Division of Family Resources (DFR)**
The Indiana Head Start State Collaboration Office, under FSSA Division of Family Resources (DFR), will use SSBG funds for two Head Start programs benefitting approximately 650 adults of unknown ages.

The first program is the T.E.A.C.H. Scholarship for Early Childhood Teachers. In Indiana, Head Start is one of the largest providers of free, high quality early learning for low income children. Knowing that the education level of their teachers is critical, Head Start has mandated that 50% of all Head Start Teachers have a bachelor’s degree. In order to reach this goal, financial assistance is needed by the programs and the teachers.

T.E.A.C.H. Early Childhood® INDIANA has served as an umbrella for a variety of educational scholarship opportunities for professionals working in licensed, registered, or exempt child care centers and homes in Indiana. T.E.A.C.H. Early Childhood® links training, compensation, and commitment to improve the quality of care and educational experiences for young children and their families.

Head Start children are from vulnerable families and as such are at high risk for poor school readiness and low academic achievement. In addition to preparing at risk children for school success, Head Start programs support low income families through home visiting, parent engagement and training activities and other essential supports for family success. As such, children and their families are the main beneficiaries of the T.E.A.C.H. project because they are able to bond with a highly qualified teacher who is a specialist in the field, understands child development, and is an effect at supporting children’s individualized learning. Early care and education (ECE) professionals also benefit by enhancing their core knowledge and
competency level and increasing their teaching effectiveness. In turn, compensation, professional status, and job satisfaction for the individual are increased. This promotes retention of staff, which also greatly benefits families and children by providing critical continuity of care.

Measureable outcomes for this initiative will be the number of Head Start teachers receiving scholarships and the number of credit hours successfully completed by those teachers.

The second program is Head Start – Child Care Collaboration Coordinator. This initiative was designed to improve family access to high quality early care and education (ECE) programs at the local community level. It will be jointly funded by SSBG and the Head Start Collaboration Office. Objectives include:

Objective 1: Identify Partnerships that will increase the quality of ECE programs at the local level.
- Work with local Child Care Resource and Referral agencies to identify opportunities for public-partnerships that increase the availability of professional development including education, training and coaching;
- Work to align and maximize existing professional development opportunities;
- Identify and eliminate barrier to licensure and Paths to QUALITY enrollment and level advancement

Objective 2: Increase access to high quality ECE programs at the local level.
- Provide technical assistance to Head Start programs on licensure and Paths to QUALITY enrollment and level advancement.
- Promote collaboration among local ECE programs so that available federal and state resources are maximized.
- Support the federal Early Head Start-Child Care grantees in order to increase access to high quality programs for families with infants and toddlers.
- Promote family and community awareness of high quality ECE programs, including highly rated Paths to QUALITY programs available within local communities.

Outcomes for this initiative will be the overall increases in highly rated Paths to QUALITY programs as well as the increase in Paths to QUALITY participation by Head Start programs.

B. Fiscal Operations

1. Description of Criteria for Distribution

The State agencies receiving an SSBG allocation were selected by the Chief Executive and the Indiana State Legislature. Through the biennial budget process, the Legislature also appropriates SS3G funds to these agencies.
2. Distribution and Use of Funds

Approved State agencies are asked to submit to the Department of Child Services proposals as to how they will spend SSBG funds, who they will serve with these funds, and an estimation of how many individuals will benefit from their SSBG allocation. Once the proposal is received and approved, a Memorandum of Understanding (MOU) is signed by the head of each cooperating State agency. The MOU spans the entire SSBG program period and spells out the responsibilities of the State agencies relative to program and financial accountability required for the Pre-Expenditure and Post-Expenditure Reports. The DCS financial management team is responsible for collecting program and financial data required to complete these reports and file timely with the Department of Health and Human Services.

3. Description of Financial Operations System

The State of Indiana utilizes PeopleSoft Financial, an Oracle enterprise resource tool, to manage financial operations. The Project Costing module of this system is utilized to establish and monitor Federal grants including SSBG. When an MOU is created for each agency’s SSBG allocation, project budgets are also created in PeopleSoft to ensure costs are properly identified under SSBG. Through use of a strict naming convention, costs associated with these projects can be tracked across State agencies through queries and reports, allowing DCS to monitor the progression of each project budget as the grant period progresses.

C. Program Operations

1. SSBG Statutory Goals the State Plans to Achieve

Services funded by SSBG will be directed towards all five broad statutory goals.

(1) “Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency.”

- Services include improvements to employment, housing and education to children and adults with serious emotional disturbance or mental illness.

(2) “Achieving or maintaining self-sufficiency, including reduction or prevention of dependency.”

- Services include case management for those living with HIV/AIDS, family planning for low income individuals, elimination of substance abuse and criminal justice involvement for children and adults with serious emotional disturbance or mental illness, interpreter services, community support specialists, and
intervention services for deaf and hard-of-hearing individuals, and Head Start training programs.

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

- Services include adult protective services through the FSSA Division of Aging as well as services provided to children and families through DCS.

(4) “Preventing or reducing appropriate institutional care by providing community-based care, home-based care, or other forms of less intensive care.”

- Services include in-home and community-based services for low income older adults and adults with disabilities through FSSA, as well as to children and families through DCS.

(5) “Securing referral or admission for institutional care when other forms of care are not appropriate or providing services to individuals in institutions.”

- Services include meals, housing and transportation as part of treatment at domestic violence shelters, and transitional services to juveniles returning to the community from a State juvenile facility.

2. Characteristics of Individuals to be Served

a) Definitions of Child, Adult and Family

Children are defined as individuals from birth up to 18 years of age. Adults are defined as persons age 59 and younger (18 years – 59 years). Older persons are defined as those persons being 60 years or older.

b) Eligibility Criteria & Income Guidelines

The ISDH Division of Maternal and Child Health, family planning defines low income as at or below 100% of poverty level and utilizes a sliding scale to determine fees.

The FSSA Division of Aging defines low income as 300% of poverty level (HHS Poverty Guidelines).

The FSSA Division of Mental Health and Addictions defines low income at or below 200% of poverty level.

Services provided by the remainder of State agencies have no quantifiable definition of low income.
For purposes of Adult Day Programs for the developmentally disabled, they are defined as persons over 16 years of age whose disability occurred prior to 18 years of age.

3. Types of Activities to be Supported

- The Indiana Department of Child Services (DCS) will use SSBG funds throughout Indiana in the following categories:
  - (7) Education and Training will be used for the S.A.F.E. home study methodology training and Children’s Museum memberships for Foster Families.
  - (11) Foster Care Services for Foster Parent Retention/Recruitment/Appreciation/Support Groups
  - (22) Protective Services – Children, for the expansion of the child advocacy centers throughout Indiana, participation in NEICE (ICPC) program and the Client Federal Eligibility Data Sharing project.
  - (25) Special Services – Disabled for the Care Coordination and Behavioral Intervention Model for children who are developmentally delayed, autistic, intellectually disabled, or dually diagnosed and have been determined to be at very high risk of residential placement.
  - (26) Special Services – Youth at Risk for the Cross System Care Coordination program for youth involved in both the probation and the child welfare systems.

These activities address the SSBG Statutory Goals of “preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating or reuniting families; and preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care.”

- The Indiana Criminal Justice Institute (ICJI) will use SSBG funds to support domestic violence shelters in the service categories:
  - (3) Congregate Meals,
  - (21) Protective Services – Adults
  - (22) Protective Services - Children, and
  - (28) Transportation.

These activities address the SSBG Statutory Goal of “preventing or remedying neglect, abuse, or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating or reuniting families.”

- The Indiana State Department of Health (ISDH) uses SSBG funds to provide case management services to those living with HIV/AIDS. The service category for this activity is (2) Case Management. These activities address the SSBG Statutory Goal of “achieving self-sufficiency, including reduction or prevention of dependency.”
The ISDH Division of Maternal and Child Health uses SSBG funds to provide family planning services in service category (9) Family Planning Services. These activities address the SSBG Statutory Goal of “achieving self-sufficiency, including reduction or prevention of dependency.”

The Indiana Department of Correction (IDOC) uses SSBG funds to provide transitional services to juveniles returning to the community from a State juvenile facility. This activity falls into service categories (24) Residential treatment and (26) Special Services – Youth at Risk. These activities address the SSBG Statutory Goal of “preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care” and “securing referral or admission for institutional care when other forms of care are not appropriate or providing services to individuals in institutions.”

The Family and Social Services Administration (FSSA) Division of Mental Health and Addiction (DMHA) uses SSBG funds to serve children and adolescents with serious emotional disturbance. These activities fall into service category (26) Special Services – Youth at Risk. The related SSBG Statutory goals are “achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency” and “achieving or maintaining self-sufficiency, including reduction or prevention of dependency.”

The FSSA Division of Disability and Rehabilitation Services (DDRS) uses SSBG funds to support services for deaf and hard-of-hearing individuals, developmentally disabled individuals and children (ages 0-3) identified with cognitive developmental delay through interpreters, community support specialists, and intervention services. The services categories for these activities are (2) Case Management, (5) Day Care – Adult, and (25) Special Services – Disabled. These activities address the SSBG Statutory Goal of “achieving or maintaining self-sufficiency, including reduction or prevention of dependency.”

The FSSA Division of Aging (DA) uses SSBG funds to provide in-home and community-based services for low income older adults and adults with disabilities. The service categories included in these activities are (2) Case Management, (5) Day Care – Adult, (12) Health-Related Services, (13) Home-Based Services, (14) Home-Delivered Meals, (17) Information and Referral, (18) Legal Services, (21) Protective Services – Adults, and (28) Transportation. These activities address the SSBG Statutory Goal of “Preventing or reducing inappropriate institutional care by providing community-based care, home-based care, or other forms of less intensive care” and “preventing or remedying neglect, abuse or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating or reuniting families.”

The FSSA Division of Family Resources (DFR) uses SSBG funds to support Head Start training programs. These activities fall into service category (7) Education and Training Services and address SSBG Statutory Goal of “achieving or maintaining self-sufficiency, including reduction or prevention of dependency.”
The geographic area/location for SSBG services includes the entire State of Indiana. Indiana is divided into 92 counties, covers more than 34,000 square miles, and is home to more than 6.6 million residents. All SSBG services in Indiana are available statewide.

V. **Pre-Expenditure Reporting Form**

Indiana’s Pre-Expenditure report, detailing the estimated expenditures and the number of recipients by service category for Federal fiscal year 2017, accompanies this report as a Microsoft Excel file and is being uploaded into the SSBG Data Portal Dropbox.

VI. **Appendices Summary**

A. **Documentation of Public Hearing**

Information posted on the DCS internet website and published in Indiana newspapers requesting in accordance with 42 U.S.C. § 1397(c) is attached as Appendix A.

B. **Certifications**

Signed copies of the following certifications are attached in Appendix B.

a) Certification Regarding Drug-Free Workplace Requirements
b) Certification Regarding Environmental Tobacco Smoke
c) Certification Regarding Lobbying
d) Certification Regarding Debarment, Suspension and Other Responsibility Matters

C. **Proof of Audit**

The Indiana State Board of Accounts performs an annual audit of all Federal funds in compliance with OMB Circular A-133: Single Audit Act, a thorough and detailed presentation of the State’s financial condition. Proof of this audit, dated December 1, 2015, is attached as Appendix C.
Appendix A
Documentation of Public Notice

The public notice below stating the Report is available for review and comment or may be obtained by written request has been distributed to the following Indiana newspapers for publication.

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<td>Mishawaka Enterprise</td>
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FEDERAL SOCIAL SERVICES BLOCK GRANT
FEDERAL FISCAL YEAR 2017 (10/1/2016 TO 9/30/2017)

The State of Indiana receives federal Social Services Block Grant (SSBG) funds. The SSBG State Plan and Pre-Expenditure Report are prepared annually pursuant to SSBG requirements in 42 U.S.C. 1397(e). The Indiana Department of Child Services (DCS) will submit the SSBG State Plan and Pre-Expenditure Report for FFY 2017 to the U.S. Department of Health & Human Services (HHS), Administration for Children and Families, Office of Community Services, on or before September 1, 2016. The SSBG State Plan and Pre-Expenditure Report include Indiana agencies receiving SSBG funds and their intended use, including information on the types of activities supported and the categories of individuals to be served. SSBG funds are used to support a broad array of social services for children, adults, older adults and other special populations. Discrimination on the grounds of race, color, sex, age, disability, national origin, or ancestry is prohibited in all activities funded by SSBG. The SSBG State Plan and Pre-Expenditure Report will be available for review on the DCS Internet website at www.in.gov/dcs/2329.htm or copies may be obtained by written request at the address below. Comments on the SSBG State Plan and Pre-Expenditure Report can be submitted at:

Federal Compliance Manager
Indiana Department of Child Services
302 W. Washington St., Room E306, MS47
Indianapolis, IN 46204-2739
(317) 234-6626
Appendix B
Certifications
CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103227, Part C Environmental Tobacco Smoke, also known as the Pro Children Act of 1994, requires that smoking not be permitted in any portion of any indoor routinely owned or leased or contracted for by an entity and used routinely or regularly for provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to $1000 per day and/or the imposition of an administrative compliance order on the responsible entity by signing and submitting this application the applicant/grantee certifies that it will comply with the requirements of the Act.

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

Mary Beth Bonaventura 8/31/16
Signature and Date
Mary Beth Bonaventura
Printed Name
Director
Title
Indiana Department of Child Services
Organization
CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

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

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

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

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

Statement for Loan Guarantees and Loan Insurance

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

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

\[Signature\]
Mary Beth Bonaventura

Printed Name
Director
Title
Indiana Department of Child Services
Organization

Signature and Date
8/31/16
CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS

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

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

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

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

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

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

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

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

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

8. Definitions of terms in the Nonprocurement Suspension and Debarment common rule and Drug-Free Workplace common rule apply to this certification. Grantees’ attention is called, in particular, to the following definitions from these rules:
Controlled substance means a controlled substance in Schedules I through V of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation (21 CFR 1308.11 through 1308.15);

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

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

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

Certification Regarding Drug-Free Workplace Requirements

Alternate I. (Grantees Other Than Individuals)

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

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee’s workplace and specifying the actions that will be taken against employees for violation of such prohibition;
(b) Establishing an ongoing drug-free awareness program to inform employees about - -
   (1) The dangers of drug abuse in the workplace;
   (2) The grantee’s policy of maintaining a drug-free workplace;
   (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
   (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
(c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will - -
   (1) Abide by the terms of the statement; and
(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

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

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

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

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

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

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

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

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

Alternate II. (Grantees Who Are Individuals)

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

(b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.
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<tr>
<th>Signature and Date</th>
<th>8/31/96</th>
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<tbody>
<tr>
<td>Printed Name</td>
<td>Mary Beth Bonaventura</td>
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<tr>
<td>Title</td>
<td>Indiana Department of Child Services</td>
</tr>
<tr>
<td>Organization</td>
<td></td>
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</table>
CERTIFICATION REGARDING DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS

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

Instructions for Certification

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

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

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

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

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

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

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

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

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

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

************

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

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

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

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

Instructions for Certification

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

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

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

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

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

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

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

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

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

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

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

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

Mary Beth Bonaventura 8/31/16
Signature and Date
Mary Beth Bonaventura
Printed Name
Director

Title
Indiana Department of Child Services
Organization
Appendix C

Proof of Audit
TO: GOVERNANCE, MANAGEMENT, AND OFFICIALS OF THE STATE OF INDIANA

We performed procedures on the records of 27 executive state agencies for various periods, ending December 31, 2014, as outlined in the Table of Contents. We performed procedures to identify areas of noncompliance with the State's Accounting and Uniform Compliance Guidelines Manual and applicable state laws and policies. We also performed procedures to identify internal control deficiencies and noncompliance that could have a direct and material effect on the determination of financial statement amounts as a part of the annual audit of the State's Comprehensive Annual Financial Report (CAFR) and annual federal audit, conducted in accordance with OMB Circular A-133.

Compliance procedures to ensure compliance with the Manual and applicable state laws and policies, were not designed to opine on compliance or financial activity of the Agency. Therefore, we did not follow Generally Accepted Auditing Standards, Government Auditing Standards, or OMB Circular A-133 when completing these procedures.

Procedures performed on internal control and compliance that could have a direct and material effect on the determination of financial statement amounts were performed in accordance with Generally Accepted Auditing Standards, Government Auditing Standards, and OMB Circular A-133, as described in our Independent Auditor's Reports included in the CAFR and Supplemental Audit of Federal Awards. Any instances of noncompliance or internal control deficiencies that are required to be reported under Government Auditing Standards will be included in the Supplemental Audit of Federal Awards.

Our procedures are conducted on a test basis and do not provide absolute assurance that no additional issues exist in these areas. Our procedures are evaluated each year and conducted based on risks that we identify at the agencies and procedures that are necessary to be conducted to support the CAFR and annual federal audit opinion. During this current review period, procedures were conducted on receipts, vendor disbursements, payroll disbursements, capital asset activity, and SDO (Special Disbursing Officer) activity. The procedures and findings are summarized in the Summary of Procedures and Findings Section and detailed by agency in each of their respective sections, as outlined in the Table of Contents. Some issues are identified during the course of the review that do not rise to the level of a written comment but are discussed with agency officials as possible areas for improvement. Those issues are not communicated in this report.

This communication is intended solely for the information and use of State Governance, Management, and agency officials and is not intended to be, and should not be, used by anyone other than these specified parties.

Paul D. Joyce
Paul D. Joyce, CPA
State Examiner

December 1, 2015