STATE OF MARYLAND

SOCIAL SERVICES BLOCK GRANT

PRE-EXPENDITURE REPORT

FEDERAL FISCAL YEAR 2017

(October 1, 2016 – September 30, 2017)

September 2016
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I. State/Federal Fiscal Year Covered by the Pre-expenditure Report

The Pre-expenditure Report covers federal fiscal year 2017 which begins on October 1, 2016 and ends on September 30, 2017.

II. Letter of Transmittal

A copy of the Letter of Transmittal from the Maryland Department of Human Resources’ Secretary Sam Malhotra to the U.S. Department of Health and Human Services is found in Section VII of this report - Additional Data or Information (as needed).

III. Public Inspection of Pre-Expenditure Report

The State of Maryland made this FY 2017 Pre-expenditure Report available for public inspection and comment by issuing a press release announcing the publication of the draft report and inviting public comment on any aspect of the report prior to finalizing the report. A copy of the Pre-expenditure Report is placed on the Department’s web site so that the public may comment on the report during its development and subsequent to its being transmitted to the U.S. Department of Health and Human Services. A copy of the press release is included in Section IV-A of this report – Documentation of Public Hearing (e.g. copies of public hearing notices, letters, newspaper articles etc.)

IV. Narrative Pre-Expenditure Report.

A. Administrative Operations

1. State Administrative Agency

(a) Mission and Responsibilities of the Agency Designated to Administer the Social Services Block Grant Program:

The Maryland Department of Human Resources (Department) is the State agency designated to administer the Social Services Block Grant in Maryland. Within the Department are two administrations that are responsible for the management and administration of the Social Services Block Grant program: the Social Services Administration and the Budget and Finance Administration.

The Social Services Administration supervises all social service programs provided through Maryland’s local departments of social services that are intended to: prevent or remedy neglect, abuse, or exploitation of children and adults; preserve, rehabilitate, or reunite families; help children to begin or continue to improve their well-being; prevent children from having to enter out-of-home care when services can enable them to remain safely in their own homes; and, for children who need out-of-home care, provide appropriate placement and permanency services. The Social Services Administration is responsible for policy development, training and staff development, monitoring and evaluation of local department programs, oversight of development and maintenance of the child welfare information system (MD CHESSIE), and all other aspects of program management.
The Social Services Administration also supervises social services programs for vulnerable adults and individuals with disabilities. This service delivery system protects vulnerable adults, promotes self sufficiency, and avoids unnecessary institutional care. These services are delivered in a manner that maximizes a person’s ability to function independently.

The mission of the Department of Human Resources is to aggressively pursue opportunities to assist people in economic need, provide prevention services, and protect vulnerable children and adults. This mission is based on the following principles:

1. Work is indispensable for achieving independence;
2. Partnerships and alliances with business and the community are critical to our customers’ ability to achieve and maintain independence;
3. Families should be the first resource for the emotional and financial support of their children and other family members;
4. Assistance is provided to people while honoring individual and group differences; and,
5. Empowerment is essential to the provision of human services.

The mission of the Department of Human Resources’ Social Services Administration is to support and enable local departments of social services in each of Maryland’s jurisdictions, in cooperation with community partners, to employ strategies to prevent child abuse and neglect, protect vulnerable children and adults, support family stability, and promote customer independence. Local departments of social services and the DHR Central Office, through partnerships with families, communities, businesses, and public and private agencies, promote customer independence and protect vulnerable children and adults.

The Department of Human Resources’ Office of Budget and Finance also plays an important role in the management of the Social Services Block Grant in Maryland. The mission of the Department’s Office of Budget and Finance is to provide quality support services by aggressively seeking to maximize financial and technical resources, to provide leadership in financial and personnel matters, and to prudently manage funds and empower DHR central office, local departments of social services, and community partners to ensure effective and efficient delivery of services. Some services provided through the Office of Budget and Finance are accounting operations, cost allocation, revenue management and overall budget management.

(b) Goals and Objectives of the Agency Administering the Social Services Block Grant Program in Maryland.

Goal #1: Children served by DHR reside in permanent homes.
   Objective 1. By fiscal year 2017, the rate of entry into foster care will be 1.4 per 1,000 children under 18.

   Objective 2. By fiscal year 2017, 40.5 percent of the children will exit to permanency within 12 months of entry into foster care.

   Objective 3. By fiscal year 2017, no more than 12 percent of children who exit out-of-
home care to reunification with their family of origin will re-enter out-of-home care within 12 months.

Objective 4. By fiscal year 2017, of all children who enter foster care in a 12 month period, the rate of placement moves per 1,000 days of foster care will be no more than 4.12.

Goal #2: Children served by the Department are safe from abuse and neglect.

Objective 1. By fiscal year 2017, 90.9 percent of victims of maltreatment will have no repeat occurrences within 12 months of the first occurrence.

Objective 2. By fiscal year 2017, of all children in foster care during a 12 month period, the rate of victimization per 100,000 days of foster care will be no more than 8.5.

Goal #3. Individuals served by Adult Services are safe from abuse (including neglect, self-neglect and exploitation).

Objective 1. For fiscal year 2017, 97.90 percent of adult abuse cases will have no recurrence in six months.

Goal #4: Individuals served by Adult Services achieve their maximum level of independence.

Objective 1. For fiscal year 2017, 98.40 percent of elderly and disabled served by adult services are living at their maximum level of independence in the community.

2. State Offices/Departments

(a) State entities receiving support from block grant funding;

Social Services Block Grant funds pay for local department of social services staff to deliver a broad range of social services. These local departments are located in all twenty-four of Maryland’s jurisdictions as follows:

Allegany County Department of Social Services
1 Frederick Street
Cumberland, Maryland 21502

Anne Arundel County Department of Social Services
80 West Street
Annapolis, Maryland 21401

Baltimore City Department of Social Services
1910 North Broadway
Baltimore, Maryland 21213

Baltimore County Department of Social Services
Drumcastle Government Center
6401 York Road
Baltimore, Maryland 21212

Calvert County Department of Social Services
200 Duke Street
Prince Frederick, Maryland 20678

Caroline County Department of Social Services
207 South Third Street
Denton, Maryland 21629

Carroll County Department of Social Services
1232 Tech Court
Westminster, Maryland 21157

Cecil County Department of Social Services
Elkton District Court/Multi-Service Building
170 East Main Street
Elkton, Maryland 21921

Charles County Department of Social Services
200 Kent Avenue
La Plata, Maryland 20646

Dorchester County Department of Social Services
627 Race Street
Cambridge, Maryland 21613

Frederick County Department of Social Services
100 East All Saints Street
Frederick, Maryland 21701

Garrett County Department of Social Services
12578 Garrett Highway
Oakland, Maryland 21550

Harford County Department of Social Services
2 South Bond Street, Suite 300
Bel Air, Maryland 21014

Howard County Department of Social Services
7121 Columbia Gateway Drive  
Columbia, Maryland 21046

Kent County Department of Social Services  
350 High Street  
P.O. Box 670  
Chestertown, Maryland 21620

Montgomery County Health and Human Services  
401 Hungerford Drive, 5th Floor  
Rockville, Maryland 20850

Prince George’s County Department of Social Services  
805 Brightseat Road  
Landover, Maryland 20785

Queen Anne’s County Department of Social Services  
125 Comet Drive  
Centreville, Maryland 21617

Somerset County Department of Social Services  
30397 Mt. Vernon Road  
Princess Anne, Maryland 21853

St. Mary’s County Department of Social Services  
12110 Leonard Hall Drive  
Leonardtown, Maryland 20650

Talbot County Department of Social Services  
301 Bay Street  
Easton, Maryland 21601

Washington County Department of Social Services  
122 North Potomac Street  
Hagerstown, Maryland 21740

Wicomico County Department of Social Services  
201 Baptist Street, Suite 27  
Salisbury, Maryland 21801

Worcester County Department of Social Services  
299 Commerce Street  
Snow Hill, Maryland 21863
2. A brief description of the services provided by the entities receiving block grant funds:

1. Adoption: This includes services that develop family resources for children who cannot safely be reunified with their birth parent(s) or extended birth families. Services include the study and evaluation of the children and their needs, adoptive family recruitment, development and selection, pre and post placement services and post finalization services.

2. Adult Protective Services: These services are designed to prevent or remedy neglect, abuse or exploitation of persons 18 and over who lack the physical or mental capacity to provide for their daily needs.

3. Certified Adult Residential Environments (CARE); these services are designed to provide protective housing for adults with mental illnesses and functional disabilities.

4. Child Protective Services: These are specialized services provided to children alleged to have been abandoned or neglected or abused (physically, sexually and/or mentally) by their parents or caregivers.

5. In-Home Services: These are family preservation programs specifically to identify families in crisis whose children are at risk of Out-of-Home Placement. Family preservation actively seeks to obtain or directly provide the critical services needed to enable the family to remain together in a safe and stable environment. Maryland provides three programs: Services to Families with Children Intake (SFC-I), Consolidated In-Home Services (CIHS), and Interagency Family Preservation Services (IFPS).

6. Foster Care: These services provide temporary out-of-home placements for children who have been abused, neglected, abandoned or are at high risk of serious harm or dependency and require out-of-home care as a result.

7. Kinship Care: These are services to children, parents and relatives when the child is in the custody of the local department and placed in the home of a relative who is not a licensed foster parent. Relative placement is seen as the first alternative permanency plan when reunification with the biological parent is not possible.

8. In-Home Aide Services: These are ancillary services that provide home based assistance to adults with disabilities or families with children served by another social services program such as Social Services to Adults or Child Protective Services.

9. Social Services to Adults: This are case management services designed to assist elderly and disabled adults, aged 18 or older, to obtain needed home and community based long term care services, equipment and programs.
B. Fiscal Operations

1. Describe the State’s criteria for allocation of SSBG funds to State entities.

SSBG funds are not allocated to State entities but are allocated within the Department of Human Resources (Maryland’s welfare agency). Maryland allocates SSBG funds based on expenditure trends of eligible projected expenditures within its social services programs.

2. Describe the planning process for determining the State’s use and distribution of SSBG funds.

Maryland’s use and distribution of SSBG funds is linked to the optimum use of various funding streams to which the state has access. As the State’s welfare agency, SSBG funds are part of the funding matrix tied to the Social Services Time Study. In addition, Maryland makes use of the 10% Temporary Assistance to Needy Families (TANF) transfer to expand the funding available to children and families served by the SSBG.

3. Description of Financial Operations System

(a) Description of the State’s process of assigning costs:

All Social Services Block Grant expenditures are within the Department of Human Resources (DHR). As the single state agency responsible for the administration of one or more of the State Plans for public assistance (Title IV-A – TANF since 1996, IV-B, IV-E, and IV-D of the Social Security Act), DHR has a public assistance cost allocation plan in lieu of an indirect cost rate added to direct costs. Our public assistance cost allocation plan is submitted to and approved quarterly by the Division of Cost Allocation (DCA) of the U.S. Department of Health and Human Services (DHHS). The plan is a narrative description of the methods and procedures used in identifying, measuring and allocating costs. All costs incurred by DHR, with the exception of expenditures for financial assistance – food stamps, cash assistance, foster care and maintenance payments are included in our cost allocation plan by cost center.

(b) Describe the State’s method of calculating costs:

All Social Services Block Grant expenditures are calculated based on a random moment time study.

C. Program Operations

1. SSBG Statutory Goals the State plans to achieve

See Section IV. A. 2. (b). This section includes a description of each of the services provided through SSBG funding and the relationship of each service to one or more of the five statutory goals of the Social Services Block Grant.

2. Characteristics of Individuals to be served

(a) Definitions of child, adult and family:
“Child’ means an individual under 18 years of age.

“Adult” means an individual 18 years of age and older.

"Family" means:

- One or more parents and children related by blood, marriage, or adoption, and residing in the same household; or

- A parent substitute, such as a related or unrelated caregiver or legal guardian, who has responsibility for the 24-hour care and supervision of a child.

(b) Eligibility Criteria:

1. Adoption Services: These services are provided without regard to income.

2. Adult Protective Services are provided without regard to income.

3. The Certified Adult Residential Environments (CARE) program has no income eligibility limits.

4. Child Protective Services are provided without regard to income.

5. In-Home Services include Services to Families with Children-Intake, Consolidated In-Home Services, Interagency Family Preservation Services which are provided without regard to income.

6. Foster Care Services are provided to any family in need of them.

5. Kinship Care is provided without regard to income.

6. In-Home Aide Services are provided to applicants without regard to income; however, fees are charged to those with income above 80% of the State Median Income. (see the chart under IV.2.C. below)

9. Social Services to Adults are provided without regard to income for aged individuals (over 65). Non-Aged adults with income below 80% of the State Median Income adjusted for family size are eligible for this service.

(c) Income Guidelines: The following income guidelines and fee schedules are used for certain SSBG funded programs and services:
## State Median Income Table

**FFY 201 (9/1/16 - 9/30/17) State Median Income**

**State of Maryland**

Based on Low Income Home Energy Assistance Program (LIHEAP) Regulation*

published by HHS' Children & Family Administration on 7-15-2016

Income by Family Size for the period July 1, 2016 through June 30, 2017.

<table>
<thead>
<tr>
<th>Family Size/Percent</th>
<th>Median Income</th>
<th>40%</th>
<th>50%</th>
<th>60%</th>
<th>80%</th>
<th>115%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 person (52%)</td>
<td>$56,816</td>
<td>$22,726</td>
<td>$28,408</td>
<td>$34,090</td>
<td>$45,453</td>
<td>$65,339</td>
</tr>
<tr>
<td>2 persons (68%)</td>
<td>$74,298</td>
<td>$29,719</td>
<td>$37,149</td>
<td>$44,579</td>
<td>$59,439</td>
<td>$85,443</td>
</tr>
<tr>
<td>3 persons (84%)</td>
<td>$91,780</td>
<td>$36,712</td>
<td>$45,890</td>
<td>$55,068</td>
<td>$73,424</td>
<td>$105,547</td>
</tr>
<tr>
<td>4 persons (100%)</td>
<td>$109,262</td>
<td>$43,705</td>
<td>$54,631</td>
<td>$65,557</td>
<td>$87,410</td>
<td>$125,651</td>
</tr>
<tr>
<td>5 persons (116%)</td>
<td>$126,744</td>
<td>$50,698</td>
<td>$63,372</td>
<td>$76,046</td>
<td>$101,395</td>
<td>$145,756</td>
</tr>
<tr>
<td>6 persons (132%)</td>
<td>$144,226</td>
<td>$57,690</td>
<td>$72,113</td>
<td>$86,536</td>
<td>$115,381</td>
<td>$165,860</td>
</tr>
<tr>
<td>7 persons (135%)</td>
<td>$147,504</td>
<td>$59,001</td>
<td>$73,752</td>
<td>$88,502</td>
<td>$118,003</td>
<td>$169,629</td>
</tr>
<tr>
<td>8 persons (138%)</td>
<td>$150,782</td>
<td>$60,313</td>
<td>$75,391</td>
<td>$90,469</td>
<td>$120,625</td>
<td>$173,399</td>
</tr>
<tr>
<td>9 persons (141%)</td>
<td>$154,059</td>
<td>$61,624</td>
<td>$77,030</td>
<td>$92,436</td>
<td>$123,248</td>
<td>$177,168</td>
</tr>
<tr>
<td>10 persons (144%)</td>
<td>$157,337</td>
<td>$62,935</td>
<td>$78,669</td>
<td>$94,402</td>
<td>$125,870</td>
<td>$180,938</td>
</tr>
</tbody>
</table>

For each additional family member above 10 persons, add $3,288 to the median income for a family of 10.

*Title XXVI Section 2603 (11) of the Omnibus Budget Reconciliation Act of 1981 (amended) requires the US Department of Health and Human Services (HHS) produce income criteria for use in determining eligibility for the Low Income Home Energy Assistance Program (LIHEAP).*
### IN-HOME AIDE SERVICES FEE SCHEDULE

[ Fees start at 80% of the 2015 State Median Income. ]

<table>
<thead>
<tr>
<th>Household Size</th>
<th>FROM</th>
<th>TO</th>
<th>ANNUAL INCOME</th>
<th>PER HOUR</th>
<th>PER HOUR</th>
<th>PER HOUR</th>
<th>PER HOUR</th>
<th>PER HOUR</th>
<th>PER HOUR</th>
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<td>1</td>
<td>$45,453</td>
<td>50,113</td>
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<td>2</td>
<td>$50,114</td>
<td>54,775</td>
<td>$2.65</td>
<td></td>
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<td>3</td>
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<td>5</td>
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3. **Types of Activities to be supported**
   
a. **Services and Activities to be provided using SSBG Funds:**

   Maryland provides a broad range of social service programs that support the broad statutory goals of the Social Services Block Grant. The five SSBG goals are:

   1. Achieving or maintaining economic self-support to prevent, reduce, or eliminate dependency;
   2. Achieving or maintain self-sufficiency, including reduction or prevention of dependency;
   3. Preventing or Remedying neglect, abuse or exploitation of children and adults unable to
protect their own interests, or preserving, rehabilitating or reuniting families;
4. Preventing or reducing inappropriate institutional care by providing community-based care, or other forms of less intensive care; and
5. Securing referral or admission for institutional care when other forms of care are not appropriate, or providing services to individuals in institutions.

The services provided in Maryland and the statutory goals each service supports are as follows:

**Adoption** provides the services required when attempts at maintaining or reunifying the child with birth parent(s) or other relatives have been unsuccessful, and the need for a safe, stable, and permanent family through adoption is indicated. Most of the children needing adoption services are (1) school aged, (2) members of a minority group, (3) members of sibling groups that must remain together, and/or (4) have physical, emotional, or mentally-handicapping conditions.

Services include: the study and evaluation of children and their needs; adoptive family recruitment, development and selection; pre- and post-placement services; and post-finalization services. Referral to legal services, court-related services necessary to finalize an adoption, and processing of an adoption subsidy and/or reimbursement for one-time-only expenses associated with the adoption of a special needs child are additional services provided. These services are provided regardless of income. Priority for service to prospective adoptive parents is given to families who are potential resources for Maryland children awaiting adoption. No fee is charged for regular adoption services.

Adoption Search, Contact and Reunion Services allow interested birth relatives to request a confidential search to obtain information from other birth relatives separated through adoption. In order to utilize Adoption Search, Contact & Reunion Services, the adoption must have been conducted through a Maryland Court. Individuals that can request Adoption Search, Contact and Reunion Services include adult adoptees, 21 years or older and not living with a minor adopted birth sibling; a sibling, defined as a brother or sister, who also is at least 21 years old and was adopted; and birth parents. Individuals interested in these services can contact the Department to request an application. No fee is charged for Adoption Search, Contact and Reunion.

Statutory Goals Supported by Adoption Services:
Goal # 2 - Self Sufficiency
Goal # 3 – Preventing or Remedying Neglect, Abuse or Exploitation

**Adult Protective Services** are designed to prevent or remedy neglect, abuse, or exploitation of persons aged 18 and over who lack the physical or mental capacity to provide for their daily needs. Services include: evaluation of the clients' needs; referral for emergency services and shelter; counseling clients, relatives, surrogates, payees and/or guardians; arranging alternate living arrangements; petitioning the court for guardianship; and, as a last resort, serving as court-appointed guardian(s) of the person. Services may be provided regardless of income. Service is provided to vulnerable adults who are unable to protect their own interest, health, safety or welfare. No fee is charged for Adult Protective Services.

Statutory Goals Supported by Adult Protective Services:
Goal # 3 – Preventing or Remedying Neglect, Abuse or Exploitation
The **Certified Adult Residential Environments (C.A.R.E.)** program is designed to provide protective housing for adults with mental illnesses and functional disabilities, including persons with AIDS, in order to prevent institutionalization and homelessness. Services include: development and supervision of protective homes; placement review; client counseling; and case management services. Client resources beyond a personal needs allowance are used to offset the cost of care.

There are no income eligibility limits for C.A.R.E. Local jurisdictions can set eligibility limits for locally-funded adult foster care programs. Any resources beyond the standard personal needs allowance are used toward the cost of care.

Statutory Goals Supported by Certified Adult Residential Environments:
Goal # 2 - Self Sufficiency
Goal # 4 – Preventing or Reducing Inappropriate Institutional Care

**Child Protective Services**
Child Protective Services: These are specialized services provided to children and their families when children are alleged to have been abandoned or neglected or abused (physically, sexually, including sex trafficking and/or mentally) by their parents, caregivers or anyone responsible for their supervision. The services are designed to ensure the immediate safety of the child and to assist the parents or caretakers to provide at least the minimal essentials of care for the child in a safe and protective environment.

Since July 1, 2013, Maryland has implemented a second way of responding to allegations of child maltreatment where safety and risk concerns are low, know as Alternative Response, Maryland’s system continues to employ a traditional investigation where the primary focus is on determining if abuse or neglect occurred and identifying someone as responsible, but adds a new path that uses a family-centered focus with the goal of assessing and quickly providing needed services to the family. Both paths have the same statutorily required timeframes for seeing the child and completing the intervention as well as using the same assessment tools for risk and safety. In either, when those responsible for a child's care cannot provide minimal care and a safe environment, out-of-home placement is pursued. Services are provided regardless of income. No fee is charged.

Statutory Goals Supported by Child Protective Services:
Goal # 3 – Preventing or Remedy Neglect, Abuse or Exploitation

**In-Home Services** are family preservation programs available within the Local Departments of Social Services. These programs are specifically identified for families in crisis whose children are at risk of Out-Of-Home Placement. Family preservation actively seeks to obtain or directly provide the critical services needed to enable the family to remain together in a safe and stable environment. Maryland provides three programs:

1. Services to Families with Children/ Intake (SFC-I) – provides assessment for situations that do not meet the criteria for a CPS response. Many of these cases stem from a family’s self request for service. Intake (SFC-I) includes short-term (less than 30 days) interventions to assess families needs and provide services. Consolidated In-Home
Services (CIHS), cases referred from CPS where additional work is needed to bolster a family’s protective capacities to improve safety and reduce risk, have three priority levels: high, moderate and low intensity. In-Home supervisors determine the level of intensity required at the time of referral based on risk and safety assessment; As the level of risk and safety changes so does the intensity level. The worker, in conjunction with supervisor, adjusts the level of intervention as the case proceeds to meet the family’s level of risk and safety. Intensity is measured by actual weekly face-to-face contact.

2. Interagency Family Preservation Services (IFPS) provides intense services to families with a child(ren) at imminent risk of Out-of-Home Placement. Referrals can come from multiple sources and are served by workers with small caseloads who are able to provide more frequent and sustained contact. Each jurisdiction has the option to operate the program within the local department, i.e., with the department as the vendor, or to utilize outside vendors. Currently the department is the vendor in 18 jurisdictions, with the remaining 6 jurisdictions contracting with private vendors.

All of Maryland’s In-Home Services are offered regardless of income. No fee is charged.

Statutory Goals Supported by In-Home Services:
Goal # 2 – Self Sufficiency
Goal # 3 – Preventing or Remedyling Neglect, Abuse or Exploitation

The Foster Care program is designed to provide short-term substitute care for children removed from their homes while providing services to their families. These services are directed toward achieving permanency plans through family reunification or alternative permanent placement when reunification is not possible. Services include: recruitment, licensing, and training of foster families; oversight of the care provider; counseling and therapy for children and their families; health care for the children; transportation; and other necessary supportive and reunification services. Foster care placements are made only for children who are abused, neglected, abandoned, or dependent on the State. Services may be continued, under special circumstances, up to the age of 21. Child support is pursued to cover the cost of maintaining a child in foster care. Foster care services are provided to any child or family in need of them.

Statutory Goals Supported by Foster Care:
Goal # 3 – Preventing or Remedying Neglect, Abuse or Exploitation
Goal # 4 – Preventing or Reducing Inappropriate Institutional Care

Kinship Care provides services to families whose children are court-committed to a local department of social services and placed with relatives who have not been licensed as foster parents. State law requires that efforts be made to place with relatives rather than unrelated foster parents those children who require out-of-home placement because of abuse, neglect, or abandonment. Kinship Care is designed to provide short-term substitute care for children who must be removed from their parents’ care. Services are provided to the triad, i.e., parent, child and relative, in order to achieve family reunification, permanent placement with legal status to the relative(s), adoption, independent living or subsidized guardianship. Services provided include: training for the relative caregivers; counseling and therapy for the children and their families; health care and educational services for the children; transportation; and other necessary supportive and reunification services. Kinship Care is provided to the family without
regard to income.

Statutory Goals Supported by Kinship Care:
Goal # 3 – Preventing or Remediing Neglect, Abuse or Exploitation
Goal # 4 – Preventing or Reducing Inappropriate Institutional Care

**In-Home Aide Services** is an ancillary program which provides home-based assistance to adults with disabilities or families with children served by another social services program such as Social Services to Adults or Child Protective Services. Services include chore and personal care services; training in self-care, survival, and caretaking skills; and the provision of emotional support and guidance to formerly abusive and neglectful caretakers. Although applicants are eligible regardless of income, fees based on family size are charged to those with income above approximately 80% of the State’s Median Income. The fee schedule is shown in Section IV.C.2(c) of this report.

Statutory Goals Supported by Certified Adult Residential Environments:
Goal # 2 - Self Sufficiency
Goal # 3 - Preventing or Remedying Neglect, Abuse or Exploitation

**Social Services to Adults (SSTA)** is a case-management program designed to assist elderly and disabled adults, ages 18 years old and older, to obtain needed home and community-based, long-term care services, equipment and programs. SSTA’s purpose is to enable and assist clients in their maintenance of self-sufficiency, economic self-support, and personal independence. It assists with the prevention of abuse, neglect, or exploitation of elderly/disabled adults and prevents or delays the institutionalization of elderly/vulnerable adults or secures appropriate institutional care when necessary. Services include: client assessments; the development of individualized service plans; service coordination and linkage; and monitoring and advocacy on behalf of clients. Aged individuals (those over 65) are served without regard to income; non-aged adults are eligible if they are recipients of Supplemental Security Income (SSI) or have gross annual incomes (adjusted for family size) below 80% of Maryland’s Median Income (see the chart in Section IV.C.2(c) of this report). No fee is charged.

Statutory Goals Supported by Social Services to Adults:
Goal # 2 - Self Sufficiency
Goal # 3 - Preventing or Remedying Neglect, Abuse or Exploitation

(b) Uniform Definition of Services and the Corresponding State Services Title:

Below is a list of the Federal Uniform Services Definitions followed by the corresponding State Services titles:

**Federal Uniform Definition of Services**

1. **Adoption Services**
Adoption Services are those services or activities provided to assist in bringing about the adoption of a child. Component services and activities may include, but are not limited to, counseling the biological parent(s), recruitment of adoptive homes, and pre- and post-placement training and/or counseling.
2. Case Management
Case management services are services or activities for the arrangement, coordination, and monitoring of services to meet the needs of individuals and families. Component services and activities may include individual service plan development; counseling, monitoring, developing, securing, and coordinating services; monitoring and evaluating client progress; and assuring that clients’ rights are protected.

3. Congregate Meals
Congregate meals are those services or activities designed to prepare and serve one or more meals a day to individuals in a central dining area in order to prevent institutionalization, malnutrition, and feelings of isolation. Component services or activities may include the cost of personnel, equipment, and food; assessment of nutritional and dietary needs; nutritional education and counseling; socialization; and other services such as transportation and information and referral.

4. Counseling Services
Counseling services are those services or activities that apply therapeutic processes to personal, family, situational, or occupational problems in order to bring about a positive resolution of the problem or improved individual or family functioning or circumstances. Problem areas may include family and marital relationships, parent-child problems, or drug abuse.

5. Day Care Services – Adults
Day Care Services for adults are those services or activities provided to adults who require care and supervision in a protective setting for a portion of a 24 hour day. Component services or activities may include opportunity for social interaction, companionship and self-education; health support or assistance in obtaining health services; counseling; recreation and general leisure time activities; meals; personal care services; plan development; and transportation.

6. Day Care Services – Children
Day care services for children (including infants, pre-schoolers, and school age children) are services or activities provided in a setting that meets applicable standards of state and local law, in a center or in a home, for a portion of a 24-hour day. Component services or activities may include a comprehensive and coordinated set of appropriate developmental activities for children, recreation, meals, and snacks, transportation, health support services, social service counseling for parents; plan development; and licensing and monitoring of child care homes and facilities.

7. Education and Training Services
Education and training services are those services provided to improve knowledge or daily living skills to enhance cultural opportunities. Services may include instruction or training in, but are not limited to, consumer education, health education, community protection and safety education, literacy education, English as a second language, and General Educational Development (G.E.D.). Component services or activities may include screening, assessment and testing; individual or group instruction; tutoring; provision of books, supplies or instructional material; counseling; transportation; and referral to community resources.
8. Employment Services
Employment services are those services or activities provided to assist individuals in securing employment or acquiring learning skills that promote opportunity for employment. Component services or activities may include employment screening, assessment, or testing; structured job skills and job seeking skills; specialized therapy (occupational, speech, physical); special training and tutoring, including literacy training and pre-vocational training; provision of books, supplies and instructional material; counseling; transportation; and referral to community resources.

9. Family Planning Services
Family planning services are those educational, comprehensive medical or social services or activities which enable individuals, including minors, to determine freely the number and spacing of their children and to select the means by which this may be achieved. These services and activities include a broad range of acceptable and effective methods and services to limit or enhance fertility, including contraceptive methods (including natural family planning and abstinence), and the management of infertility (including referral to adoption). Specific component services and activities may include pre-conception counseling, education, and general reproductive health care, including diagnosis and treatment of infections which threaten reproductive capability. Family planning services do not include pregnancy care (including obstetric or prenatal care).

10. Foster Care Services for Adults
Foster care services for adults are those services or activities that assess the need and arrange for the substitute care and alternate living situation of adults in a setting suitable to the individual’s needs. Individuals may need such services because of social, physical or mental disabilities, or as a consequence of abuse or neglect. Care may be provided in a community-based setting, or such services may arrange for institutionalization when necessary.

Component services or activities include assessment of the individuals needs; case planning and case management to assure that the individual receives proper care in the placement; counseling to help with personal problems and adjusting to new situations; assistance in obtaining other necessary supportive services; determining, through periodic reviews, the continued appropriateness of and need for placement; and recruitment and licensing of foster care homes and facilities.

11. Foster Care Services for Children
Foster care services for children are those services or activities associated with the provision of an alternative family life experience for abused, neglected or dependent children, between birth and the age of majority, on the basis of a court commitment or voluntary placement agreement signed by the parent or guardian. Services may be provided to children in foster family homes, foster homes of relatives, group homes, emergency shelters, residential facilities, child care institutions, pre-adoptive homes, or supervised independent living situations. Component services or activities may include assessment of the child’s needs; case planning and case management to assure that the child receives proper care in the placement; medical care as an integral but subordinate part of the service; counseling of the child, the child’s parents, and the foster parents; referral and assistance in obtaining other necessary supportive services; periodical reviews to determine the continued appropriateness and need for placement; and recruitment and licensing of foster homes and child care institutions.
12. Health Related and Home Health Services
Health related and home health services are those in-home or out-of-home services or activities designed to assist individuals and families to attain and maintain a favorable condition of health. Component services and activities may include providing an analysis or assessment of an individual’s health problems and the development of a treatment plan; assisting individuals to identify and understand their health needs; assisting individuals to locate, provide or secure, and utilize appropriate medical treatment, preventive medical care, and health maintenance services, including in-home health services and emergency medical services; and providing follow-up services as needed.

13. Home Based Services
Home-based services are those in-home services or activities provided to individuals or families to assist with household or personal care activities that improve or maintain adequate family well-being. These services may be provided for reasons of illness, incapacity, frailty, absence of a caretaker relative, or to prevent abuse or neglect of a child or adult. Major components include homemaker services, chore services, home maintenance services, and household management services. Component services or activities may include protective supervision of adults and/or children to help prevent abuse, temporary non-medical personal care, house-cleaning, essential shopping, simple household repairs, yard maintenance, teaching of homemaking skills, training in self-help and self-care skills, assistance with meal planning and preparation, sanitation, budgeting, and general household management.

14. Home Delivered Meals
Home-delivered meals are those services or activities designed to prepare and deliver one or more meals a day to an individual’s residence in order to prevent institutionalization, malnutrition, and feelings of isolation. Component services or activities may include the cost of personnel, equipment, and food; assessment of nutritional and dietary needs; nutritional education and counseling; socialization services; and information and referral.

15. Housing Services
Housing services are those services or activities designed to assist individuals or families in locating, obtaining, or retaining suitable housing. Component services or activities may include tenant counseling; helping individuals and families to identify and correct substandard housing conditions on behalf of individuals and families who are unable to protect their own interests; and assisting individuals and families to understand leases, secure utilities, make moving arrangements and minor renovations.

16. Independent and Transitional Living Services
Independent and transitional living services are those services and activities designed to help older youth in foster care or homeless youth make the transition to independent living, or to help adults make the transition from an institution, or from homelessness, to independent living. Component services or activities may include educational and employment assistance, training in daily living skills, and housing assistance. Specific component services and activities may include supervised practice living and post-foster care services.
17. Information and Referral
Information and Referral services are services and activities designed to provide information about services provided by public and private service providers and a brief assessment of client needs (but not diagnosis and evaluation) to facilitate appropriate referral to these community resources.

18. Legal Services
Legal services are those services or activities provided by a lawyer or other person(s) under the supervision of a lawyer to assist individuals in seeking or obtaining legal help in civil matters such as housing, divorce, child support, guardianship, paternity, and legal separation. Component services or activities may include receiving and preparing cases for trial, provision of legal advice, representation at hearings, and counseling.

19. Pregnancy and Parenting Services for Young Parents
Pregnancy and parenting services are those services or activities for married or unmarried adolescent parents and their families designed to assist young parents in coping with the social, emotional, and economic problems related to pregnancy and in planning for the future. Component services or activities may include securing necessary health care and living arrangements; obtaining legal services; and providing counseling, child care education, and training in and development of parenting skills.

20. Prevention and Intervention Services
Prevention and Intervention services are those services or activities designed to provide early identification and/or timely intervention to support families and prevent or ameliorate the consequences of, abuse, neglect, or family violence, or to assist in making arrangement for alternate placements or living arrangements where necessary. Such services may also be provided to prevent the removal of a child or adult from the home. Component services and activities may include investigation; assessment and/or evaluation of the extent of the problem; counseling, including mental health counseling or therapy as needed; developmental and parenting skills training; respite care; and other services including supervision, case management, and transportation.

21. Protective Services for Adults
Protective services for adults are those services or activities designed to prevent or remedy abuse, neglect or exploitation of adults who are unable to protect their own interests. Examples of situations that may require protective services are injury due to maltreatment or family violence; lack of adequate food, clothing or shelter; lack of essential medical treatment or rehabilitation services; and lack of necessary financial or other resources. Component services or activities may include investigation; immediate intervention; emergency medical services; emergency shelter; developing case plans; initiation of legal action (if needed); counseling for the individual and the family; assessment/evaluation of family circumstances; arranging alternative or improved living arrangements; preparing for foster placement, if needed; and case management and referral to service providers.
22. Protective Services for Children
Protective services for children are those services or activities designed to prevent or remedy abuse, neglect, or exploitation of children who may be harmed through physical or mental injury, sexual abuse or exploitation, and negligent treatment or maltreatment, including failure to be provided with adequate food, clothing, shelter, or medical care. Component services or activities may include immediate investigation and intervention; emergency medical services; emergency shelter; developing case plans; initiation of legal action (if needed); counseling for the child and the family; assessment/evaluation of family circumstances; arranging alternative living arrangement; preparing for foster placement, if needed; and case management and referral to service providers.

23. Recreational Services
Recreational services are those services or activities designed to provide, or assist individuals to take advantage of individual or group activities directed towards promoting physical, cultural, and/or social development.

24. Residential Treatment Services
Residential treatment services provide short-term residential care and comprehensive treatment and services for children or adults whose problems are so severe or are such that they cannot be cared for at home or in foster care and need the specialized services provided by specialized facilities. Component services and activities may include diagnosis and psychological evaluation; alcohol and drug detoxification services; individual, family, and group therapy and counseling; remedial education and GED preparation; vocational or pre-vocational training; training in activities of daily living; supervised recreational and social activities; case management; transportation; and referral to and utilization of other services.

25. Special Services for Persons with Developmental or Physical Disabilities, or Persons with Visual or Auditory Impairments
These services are services or activities to maximize the potential of persons with disabilities, help alleviate the effects of physical, mental or emotional disabilities, and to enable these persons to live in the least restrictive environment possible. Component services or activities may include personal or family counseling, respite care; family support; recreation; transportation; aid to assist with independent functioning in the community; and training in mobility, communication skills, the use of special aids and appliances, and self sufficiency skills. Residential and medical services may be included only as an integral, but subordinate, part of the services.

26. Special Services for Youth Involved in or at Risk of Involvement with Criminal Activity
Special services for youth involved in or at risk of involvement with criminal activity are those services or activities for youth who are, or who may become involved with the juvenile justice system and their families. Component services or activities are designed to enhance family functioning and/or modify the youth’s behavior with the goal of developing socially appropriate behavior and may include counseling, intervention therapy, and residential and medical services if included as an integral but subordinate part of the service.
27. Substance Abuse Services
Substance abuse services are those services or activities that are primarily designed to deter, reduce, or eliminate substance abuse or chemical dependence. Except for initial detoxification services, medical and residential services may be included but only as an integral but subordinate part of the service. Component substance abuse services or activities may include a comprehensive range of personal and family counseling methods, methadone treatment for opiate users, or detoxification treatment for alcohol abusers. Services may be provided in alternative living arrangements like institutional settings and community-based halfway houses.

28. Transportation Services
Transportation services are those services or activities that provide or arrange for the travel of individuals in order to access services or obtain medical care or employment. Component services or activities may include special travel arrangements such as special modes of transportation and personnel to accompany or assist individuals or families to utilize transportation.

29. Other Services
Other services are services that do not fall within the definition of the preceding 28 services. The definition used by the State for each of these services appears elsewhere in this report.
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(c) Method of service delivery and geographic area/location where services are provided:

These services are available statewide and are provided by direct services staff in local departments of social services.
IV. Pre-expenditure Reporting Form
Part A. Estimated Expenditures and Proposed Provision Method

STATE: MARYLAND
REPORT PERIOD: FFY 2017

Contact Person: Rebecca Jones Gaston  Phone Number: 410-767-8939
Title: Executive Director  E-Mail Address: Rebecca.jonesgaston@maryland.gov
Agency: DEPARTMENT OF HUMAN RESOURCES  Submission Date: 8-17-16

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<tr>
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<td>Housing Services</td>
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</tr>
<tr>
<td>Independent/Transitional Living Services</td>
<td>$0</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Information &amp; Referral</td>
<td>$0</td>
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<tr>
<td>Legal Services</td>
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<td>Pregnancy &amp; Parenting</td>
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<td>Prevention &amp; Intervention</td>
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<td>Residential Treatment</td>
<td>$0</td>
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<td>Special Services—Disabled</td>
<td>$0</td>
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<tr>
<td>Special Services—Youth at Risk</td>
<td>$0</td>
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<td>Substance Abuse Services</td>
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<td>Transportation</td>
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<tr>
<td>Other Services***</td>
<td>$0</td>
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<tr>
<td>SUM OF EXPENDITURES FOR SERVICES</td>
<td>$29,530,830</td>
<td>$22,909,803</td>
<td>$254,121,291</td>
<td>$306,561,924</td>
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<tr>
<td>Administrative Costs</td>
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<td>SUM OF EXPENDITURES FOR SERVICES AND ADMINISTRATIVE COSTS</td>
<td>$29,530,830</td>
<td>$22,909,803</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* From which block grant(s) were these funds transferred?  TANF

** Please list the sources of these funds:
State General Funds, Title IV-B, Title IV-E, Children's Justice Grants to States, Child Abuse & Neglect Grants, Foster Care Independent Living Grants, Title XIX Medical Assistance Program.

*** Please list other services:
NA
## PART B. RECIPIENTS: Fiscal Year 2015

**STATE: Maryland**  
**FISCAL YEAR: Pre-Expenditure 2017**

<table>
<thead>
<tr>
<th>Service Supported with SSBG Funds</th>
<th>Children</th>
<th>Younger</th>
<th>Older</th>
<th>Total Adults</th>
<th>Total</th>
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<tbody>
<tr>
<td>1, Adoption Services</td>
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<td>3,018</td>
<td>130</td>
<td>3,148</td>
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<td>7,000</td>
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<td>3, Congregate Meals</td>
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<td>4, Counseling Services</td>
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<tr>
<td>5, Day Care-Adult</td>
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<tr>
<td>6, Day Care Children</td>
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<tr>
<td>7, Education and Training Services</td>
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<tr>
<td>8, Employment Services</td>
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<tr>
<td>9, Family Planning Services</td>
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<td>10, Foster Care Services-Adults</td>
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<td>11, Foster Care Services-Children</td>
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<td>12, Health Related Services</td>
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<td>13, Home Based Services</td>
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<td>1,100</td>
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<td>14, Home Delivered Meals</td>
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<tr>
<td>15, Housing Services</td>
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<tr>
<td>16, Independent/Transitional Living Services</td>
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<tr>
<td>17, Information &amp; Referral</td>
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<tr>
<td>18, Legal Services</td>
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<tr>
<td>19, Pregnancy &amp; Parenting Services</td>
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<tr>
<td>20, Prevention &amp; Intervention</td>
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<td>172</td>
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<td>46,340</td>
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<tr>
<td>23, Recreation Services</td>
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</tr>
<tr>
<td>24, Residential Services</td>
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<tr>
<td>25, Special Services-Disabled</td>
<td></td>
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<tr>
<td>26, Special Services-Youth at Risk</td>
<td></td>
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<tr>
<td>27, Substance Abuse Services</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>28, Transportation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29, Other Services</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30, SUM OF RECIPIENTS OF SERVICES</td>
<td>74,219</td>
<td>19,433</td>
<td>16,352</td>
<td>228</td>
<td>110,223</td>
</tr>
</tbody>
</table>
VI. Appendices

A. Documentation of Public Hearing (e.g. copies of public hearing notices, letters, newspaper articles, etc.)

Press Release

DEPARTMENT OF HUMAN RESOURCES RELEASES DRAFT SOCIAL SERVICES BLOCK GRANT REPORT FOR 2015

Baltimore, MD (August 30, 2016)…The Department of Human Resources Draft Social Services Block Grant Report for the period October 1, 2016 through September 30, 2017 is now available for review and comments at the DHR website located at http://dhr.state.md.us.

Beginning in October 2016, Maryland anticipates receiving from the federal government approximately $29.5 million in Social Services Block Grant (SSBG) funds. These funds, combined with other federal, state, and local funding, will provide a wide range of social services for Maryland residents. Some of the services provided by this funding include Adoption, Adult Protective Services, Foster Care, In-Home Aide Services, Intensive Family Services, and Services to Families with Children.

Federal law requires the Department to produce the SSBG report to explain program eligibility, the number of people served, the amount of funds spent, and the way service is provided. Comments and questions regarding the plan or its availability are due by September 30, 2016 and should be addressed to:

Rebecca Jones Gaston
Executive Director
311 West Saratoga Street
Baltimore, MD 21201

###
B. Certifications

U.S. Department of Health and Human Services
Certification Regarding
Drug-Free Workplace Requirements
Grantees Other Than Individuals

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

This certification is required by regulations implementing the Drug-Free Workplace Act of 1988, 45CFR Part 76, Subpart F. The regulations, published in the January 31, 1998 Federal Register, require certification by grantees that they will maintain a drug-free workplace. The certification set out below is a material representation of fact upon which reliance will be placed when HHS determines to award the grant. False certification or violation of the certification shall be grounds for suspension of payments, suspension or termination of grants, or government-wide suspension or debarment.

The grantee certifies that it will provide a drug free environment by:

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

(b) Establishing a 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 of any criminal drug statute conviction for a violation occurring in the workplace no later than 5 days after such conviction;

(e) Notifying the agency within 10 days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction;

(f) Taking one of the following actions, within 30 days of receiving notice under subparagraph (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; 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 maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).
CERTIFICATION REGARDING ENVIRONMENTAL TOBACCO SMOKE

Public Law 103-227, Part C Environmental Tobacco Smoke, also known as the pro Children Act of 1994, requires that smoking not permitted in any portion of any indoor routinely 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 Medicare 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 that language of this certification be included in any subawards which contain provisions for the children’s services and that all subgrantees shall certify accordingly.

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS—PRIMARY COVERED TRANSACTION

(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 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 participant shall attach an explanation to this proposal.
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 any 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, and 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 require that the language of this certification to 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.

__________________________
State of Maryland – Department of Human Resources
Organization

__________________________
Secretary
Authorized Signature       Title       Date
C. Proof of Audit

Federal law requires that “Each State shall, not less often than every two years, audit its expenditures from amounts received (or transferred for use) under this title…Within 30 days following the completion of each audit, the State shall submit a copy of the audit to the legislature of the State and to the Secretary. (Sec. 2006 [42 U.S.C. 1397e]

An Independent Auditor completed its report for Maryland for the year ending June 30, 2015 and determined that there were no audit findings related to the Social Services Block Grant, and that the SSBG was in compliance with requirements applicable to each major program on internal control in accordance with OMB Circular A-133 and OMB Uniform Guidance. The 2015 Single Audit did not rule the SSBG to be a major program in 2015 and therefore did not conduct a full compliance review of the SSBG in 2015. Copies of the 2015 Audit are available from the Department on request.

VII. Additional Data or Information (as needed)
Ms. Marsha Werner  
Social Services Block Grant Branch  
Office of Community Services  
Administration for Children and Families  
Fifth Floor, West Wing  
370 L'Enfant Promenade, S.W.  
Washington DC  20447

RE: SSBG 2017 Pre-Expenditure Report

Dear Ms. Werner:

Enclosed is the copy of Maryland's 2017 Social Services Block Grant Pre-Expenditure Report. The report is submitted according to the federal requirements in section 2004 (42U.S.C. 1397c).

If you have any questions regarding this report, please contact Rebecca Jones Gaston, at 410-767-8939.

Sincerely,

Sam Malhotra  
Secretary