



ADMINISTRATION FOR  
**CHILDREN & FAMILIES**

MEMORANDUM

DATE: September 22, 2017

TO: Mr. William Coyle  
 West Virginia Department of Health and Human Resources  
 Bureau for Children and Families

FROM: Theresa Taylor, Social Services Program Specialist  
 Social Services Block Grant  
 Division of Social Services  
 Office of Community Services

SUBJECT: FY2018 Intended Use Plan and Pre-Expenditure Report

After careful review of the FY2018 Intended Use Plan and Pre-Expenditure Report for the State of West Virginia, the following observations and related requests are submitted to the state for consideration and response:

Item	Observation	Request	Citation
Proof of Audit	The Intended Use Plan does not provide proof of audit.	Please confirm the date the most recent audit of SSBG was conducted.	<a href="#">SEC. 2006. [42 U.S.C. 1397e](b)</a>
Definitions of Recipients	The Intended Use Plan does not include the definitions of child, adult, and family as they relate to the state's SSBG.	Please provide the definitions of the terms child, adult, and family as they relate to the state's operation of the SSBG.	IM Transmittal No. 03-2017, Attachment A, IV. (C) (2) Characteristics of Individuals to be Served <sup>1</sup>  45 CFR §96.74 (a) (5) & (6)
Public Comment	The Intended Use Plan notes that the plan is made available to the public for comment via a website which was linked. The link however only includes the Intended Use Plan for FFY2017, and does not show the updated Intended Use Plan made available to the public for FFY2018 as indicated in the plan.	Please provide evidence that the FY2018 plan has been made available to the public for comment.	<a href="#">Sec. 2004. [42 U.S.C. 1397c]</a>
Description without Expenditure	A description of services was included in plan section XII – Social Support Services however no expenditures were noted.	Please update the plan either to remove sections that will not be funded in the fiscal year, or to include anticipated expenditures.	None Applicable

<sup>1</sup> IM Transmittal No. 03-2017, "Application Model for Fiscal Year (FY) 2018 Social Services Block Grant Program (SSBG) Based on the Availability of Funds (May 11, 2017). Retrieved at: [https://www.acf.hhs.gov/sites/default/files/ocs/im\\_03\\_2017\\_application\\_for\\_fiscal\\_year\\_fy\\_2018\\_social\\_services\\_block.pdf](https://www.acf.hhs.gov/sites/default/files/ocs/im_03_2017_application_for_fiscal_year_fy_2018_social_services_block.pdf)

Funds Transferred into SSBG	The Pre-Expenditure Report in the Portal has been completed to include a comment that indicates that funds will be transferred in to SSBG from TANF and state revenue. The comment box for funds transferred should only include TANF based on the description in the Intended Use Plan.	Please update this comment to include TANF only.	None Applicable
Funds from All Other Sources	In the second comment box, the state indicates that they will supplement SSBG funds for services with other state revenue to cover total expenditures for a service category. However, the column that relates to this column which is called "All Other Federal, State, and Local Funds" has been left blank in the Pre-Expenditure Report.	Please complete the expenditures column labeled "All Other Federal, State, and Local Funds."	None Applicable
Statutory Goals	None of the statutory goals for the grant were included in the Intended Use Plan.	Please include in the Intended Use Plan, the statutory goals of the grant as they relate to the services the state intends to provide.	<a href="#">Sec. 2001. [42 U.S.C. 1397]</a>
Certifications	No signed certifications were included with the Intended Use Plan.	The state must include certifications regarding the following with the Intended Use Plan each year. <ul style="list-style-type: none"> <li>• Lobbying</li> <li>• Environmental Tobacco Smoke</li> <li>• Drug Free Workplace</li> <li>• Debarment and Suspension.</li> </ul>	IM Transmittal No. 03-2017 <sup>1</sup>
Recipients	The Pre-Expenditure Report includes child recipients in adult related service categories: <ul style="list-style-type: none"> <li>• Foster Care – Adults</li> <li>• Protective Services – Adults</li> </ul>	Please update the recipients to indicate adult recipient numbers for those categories serving adults, and remove child recipients.	None Applicable

Please submit correspondence related to this request to your Social Services Program Specialist, Theresa Taylor at [Theresa.Taylor@acf.hhs.gov](mailto:Theresa.Taylor@acf.hhs.gov).