#### **ACF-204**

**Program Name:** Temporary Assistance for Needy Families

**Grantee Name: CONNECTICUT** 

Report Name: ACF-204

**Funding/Grant Period:** 2301CTTANF

**Report Period:** 10/01/2022 to 09/30/2023 **Report Status:** Submitted with Warnings

## Report Sections

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#### Attachment A

#### General Instructions:

Each State must provide the information indicated below on its TANF program regardless of the funding source -- i.e., no matter whether the State used segregated Federal TANF funds, segregated State TANF funds, or commingled funds to pay for the benefit or service.

If the State elects to report on other benefits or activities provided through other program funding streams, please mention it after the TANF-funded benefits or activities for each item.

#### 1. The State's definition of each work activity.

Work Activity Definitions for FFY 2023 are in the revised TANF Plan FFY 2021-2023 submitted to ACF on 12/29/20. Section A - Part III Work Activities. 1. Unsubsidized Employment: Full- or part-time employment in the public or private sector that is not subsidized by TANF or any other public program. 2. Subsidized Private Sector Employment: Employment in the private sector for which the employer receives a subsidy from TANF or other public funds to offset some or all of the wages and costs of employing an individual. 3. Subsidized Public Sector Employment: Employment in the public sector for which the employer receives a subsidy from TANF or other public funds to offset some or all of the wages and costs of employing a recipient. This includes work-study and stipend programs. 4. On-the-Job Training: Training in the public or private sector provided to a paid employee while he or she is engaged in productive work and that provides knowledge and skills essential to the full and adequate performance of the job. 5. Job Search and Job Readiness Assistance: The act of seeking or obtaining employment, preparation to seek or obtain employment, including life skills training, and shortterm substance abuse treatment, mental health treatment, or rehabilitation activities. Such treatment or therapy must be determined to be necessary and documented by a qualified medical, substance abuse or mental health professional. Job search and job readiness assistance activities must be supervised by the TANF agency or other responsible party on an ongoing basis no less frequently than once each day in which the individual is scheduled to participate. This is limited to count toward the WPR for no more than six weeks per year. 6. Work Experience: A work activity performed in return for welfare that provides an individual with an opportunity to acquire the general skills, training, knowledge, and work habits necessary to obtain employment. The purpose of work experience is to improve the employability of those who cannot find unsubsidized employment. 7. Community Service Programs: Structured programs in which TANF recipients perform work for the direct benefit of the community under the auspices of public or nonprofit organizations. Community service programs must be limited to projects that serve a useful community purpose in fields such as health, social service, environmental protection, education, urban and rural redevelopment, welfare, recreation, public facilities, public safety, and childcare. Community service programs are designed to improve the employability of recipients not otherwise able to obtain employment. 8. Vocational Educational Training Not to Exceed 12 Months: Organized educational programs directly related to the preparation of individuals for employment in current or emerging occupations requiring training, including a baccalaureate or advanced degree, if in the employment plan. Vocational educational training may include work-focused general education and language instruction. 9. Child Care for an Individual Participating in a Community Service Program: to enable another TANF recipient to participate in community service. 10. Job Skills Training Directly Related to Employment: required by employer to provide ability to obtain employment or to advance or adapt to the changing demands of workplace. 11. Education Directly Related to Employment: related to specific occupation, job or job offer. 12. Satisfactory Attendance at Secondary School or in a GED Program: regular attendance at secondary school or course of study leading to a certificate of general equivalence, for a work-eligible individual who has not completed or received secondary school certificate. Some activities must be supervised on an ongoing basis no less frequently than once each day in which the individual is scheduled to participate

#### 2. A description of the transitional services provided to families no longer receiving assistance due to employment.

Services are available to families engaged in such activities at the time they become ineligible for Temporary Family Assistance (TFA), the State's TANF cash assistance program. Employment services may be provided until completion of the employment services activity. Such services include but are not limited to the following: case management, barrier resolution, employment-related education and training, job search skill training, job placement services, support services, retention services, and re-employment services. Families are also eligible for childcare assistance partially funded from CT's CCDF block grant. Such families remain eligible as long as their income remains below a certain income limit.

3. A description of how a State will reduce the amount of assistance payable to a family when an individual refuses to engage in work without good cause pursuant to 45 CFR 261.14 of this chapter.

Connecticut cash assistance recipients are required to engage in work activities as prescribed by their employability plans. Failure to participate without good cause results in a penalty being imposed on the non-compliant TFA recipient until such person becomes compliant with Jobs First Employment Services and their employability plan. The penalty shall continue until the noncompliant family member (1) begins to comply with employment services requirements, (2) becomes exempt from such requirements, or (3) demonstrates good cause for his or her failure to comply with such requirements. Assistance is reduced by excluding the noncompliant family member from the household benefit calculation. If only one member of a family is eligible for TFA and such member fails to comply with an employment services requirement and has no good cause reason, the penalty is a 25% benefit reduction for each month of non-compliance.

- 4. The average monthly number of payments for child care services made by the State through the use of disregards, by the following types of child care providers:
- i. Licensed/regulated in-home child care: 0
- ii. Licensed/regulated family child care: 0
- iii. Licensed/regulated group home child care: 0
- iv. Licensed/regulated center-based child care:  $\,0\,$
- v. Legally operating (i.e., no license category available in State or locality) in-home child care provided by a non-relative: 0
- vi. Legally operating (i.e., no license category available in State or locality) in-home child care provided by a relative: 0
- vii. Legally operating (i.e., no license category available in State or locality) family child care provided by a non-relative: 0
- $\textbf{viii. Legally operating (i.e., no license category available in State or locality) family child care provided by a relative: } \\ 0$
- $\textbf{ix. Legally operating (i.e., no license category available in State or locality) group child care provided by a non-relative: } \\ 0$
- ${f x}$ . Legally operating (i.e., no license category available in State or locality) group child care provided by a relative: 0
- xi. Legally operated (i.e., no license category available in State or locality) center-based child care.  $\,0\,$
- 5. If the State has adopted the Family Violence Option and wants Federal recognition of its good cause domestic violence waivers under 45 CFR 260.50-58, then provide (a) a description of the strategies and procedures in place to ensure that victims of domestic violence receive appropriate alternative services and (b) an aggregate figure for the total number of good cause domestic waivers granted.

  CT has not adopted the Family Violence option.
- 6. A description of any nonrecurrent, short-term benefits (as defined in 45 CFR 260.31(b)(1)) provided, including:
  - i. The eligibility criteria associated with such benefits, including any restrictions on the amount, duration, or frequency of payments;
- ii. Any policies that limit such payments to families that are eligible for TANF assistance or that have the effect of delaying or suspending a family's eligibility for assistance;

iii. Any procedures or activities developed under the TANF program to ensure that individuals diverted from assistance receive information about, referrals to, or access to other program benefits (such as Medicaid and food stamps) that might help them make the transition from welfare to work

CT offers a Diversion Program to provide short-term temporary assistance to qualifying families. The goal of the program is to provide families with the assistance they need in short-term lump sum payments intended to remove barriers to employment. Payments are limited to families who are likely to succeed with short-term help, are employed or have a job offer, have a solid work history, marketable skills, and barriers that can be removed within a three-month period if given Diversion assistance. The financial eligibility criteria for diversion are identical to those for Temporary Family Assistance (TFA), as described in Section A, Part I (A) of CT's TANF State Plan. Families are eligible to receive payments to cover current and anticipated needs, up to three times the amount that they would have received under TFA. Families may be eligible for Diversion for up to three months. If a family would be subject to the TFA time limit, up to three months of time limit are recorded under Diversion. Receipt of Diversion payments makes a family ineligible for TFA for three months, unless the family experiences undue hardship: if a family's circumstances constitute a serious threat to the health, safety or welfare of the family, and are a result of forces outside the family's control, and the circumstances prevent the family from maintaining or getting a job. Diversion families are served by DSS staff who explore eligibility for Medicaid, the Supplemental Nutrition Assistance Program (SNAP), and other programs at program intake. Due to the very low number of families who receive Diversion benefits, the program is no longer claimed under TANF.

- 7. A description of the grievance procedures the State has established and is maintaining to resolve displacement complaints, pursuant to section 407(f)(3) of the Social Security Act. This description must include the name of the State agency with the lead responsibility for administering this provision and explanations of how the State has notified the public about these procedures and how an individual can register a complaint. The CT Department of Labor (DOL) administers the delivery of TANF employment services. In this capacity, DOL contracts with the state's five regional Workforce Development Boards (WDBs), which contract with local organizations to provide employment and case management services to TFA/TANF recipients. DOL requires WDBs to administer services in accordance with all applicable federal and state laws. DOL contract language prohibits the WDBs and their subcontractors from placing TANF recipients into jobs from which their employees have been laid off and maintain recall rights, and also prohibits termination of employment in order to hire TANF recipients. DOL has instructed the WDBs to use complaint resolution procedures to resolve complaints brought by TFA participants. Each WDB must maintain these complaint resolution procedures, which stipulate how individuals can register complaints in each WDB region. TFA recipients also have access to the DSS administered appeals process through Fair Hearing Officers, and if unsatisfactory to the TFA recipient, they may then request reconsideration or appeal to the courts.
- 8. A summary of State programs and activities directed at the third and fourth statutory purposes of TANF (as specified at 45 CFR 260.20(c) and (d) of this chapter).
- a. Summarize below, the State programs and activities directed at preventing and reducing the incidence of out-of-wedlock pregnancies and establishing annual numerical goals for preventing and reducing the incidence of these pregnancies (TANF purpose 3):

  Please refer to the program descriptions and activities in the TANF Plan FFY 2021-2023 Section A, Part I, subsections C & D. The CT TANF Purpose #3 programs include the following: School Readiness; Teen Pregnancy Prevention Initiative; Priority School Districts Grants; Priority School Districts extended Hours; Youth Services Bureau; Leadership, Education, Athletics in Partnership; Neighborhood Youth Centers; Young Parents Program; Extended Day Treatment Program; Family Resource Centers; Early Childhood Services; Therapeutic Child Care; Child Welfare/Prevention Intervention Services; Young Adult Services; Outreach: Help for People in Need program.
- b. Summarize below, the State programs and activities directed at encouraging the formation and maintenance of two-parent families (TANF purpose 4):

Please refer to the program descriptions and activities in the TANF Plan FFY 2021-2023 Section A, Part I, subsections C & D. The CT TANF Purpose #4 programs include the following: Fatherhood Initiative; Education and Training Services Department of Corrections (DOC); Addiction Treatment Services DOC; Family Resource Centers State Department of Education (SDE); Priority School Districts Grants SDE; Priority School Districts Extended Hours SDE; Outreach: Help for People in Need program DSS.

- 9. An estimate of the total number of individuals who have participated in subsidized employment under §261.30(b) or (c) of this chapter. 104
- 10. A description of EBT policies and practices in the following four areas: (1) procedures for preventing the use of TANF assistance via electronic benefit transfer transactions in any liquor store; any casino, gambling casino, or gaming establishment, and any retail establishment which provides adult oriented entertainment in which performers disrobe or perform in an unclothed state for entertainment;(2) how the state identifies the locations specified in the statute;(3) procedures for ongoing monitoring to ensure policies are being carried out as intended; and (4)how the state plans to respond to findings of non-compliance or program ineffectiveness.
- CT has adopted policies and procedures to review EBT transactions on a monthly basis to determine if a violation has occurred. CT DSS identifies the establishments in coordination with the CT Department of Consumer Protection (the agency that issues licenses for such establishments) and through online research (to identify adult oriented entertainment establishments). DSS extracts a monthly EBT transactions file and identifies the prohibited establishments through a data match. The DSS Economic Security unit analyzes the final information and records the violations and actions taken. CT has adopted penalties for failure to comply. If TFA electronic benefit transfer (EBT) card benefits are used in any of the restricted places, the TFA recipient will be subject to the following penalties: for the first violation, a warning that a prohibited transaction occurred; for the second violation, a penalty in the amount of the EBT transaction that occurred at the prohibited location; for the third violation, a penalty of one month's suspension of TFA benefits in addition to the amount of the EBT transaction that occurred in the prohibited location; for the fourth violation, DSS may suspend the TFA benefits for a certain amount of time or may stop the TFA benefits forever. If DSS plans to impose a penalty for failure to follow the new law, DSS sends a notice to the TFA recipient explaining the violation of the rules and client rights to a Fair Hearing.

# Attachment B--Fatherhood--Page 4

## Grantee Information

| StateCONNECTICUT | Fiscal Year2023 |
|------------------|-----------------|

## **Program Information**

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| Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.  |
| 1. Name of Benefit or Service Program: Fatherhood Program   |
| 2. Description of the Major Program Benefits, Services, and Activities:  Connecticut's Fatherhood Program is a statewide CT Department of Social Services program that focuses on changing the systems that can improve fathers' ability to be fully and positively involved in the lives of their children. The program's objectives promote public education concerning the financial and emotional responsibilities of fatherhood; assist men in preparing for the legal, financial and emotional responsibilities of fatherhood; promote the establishment of paternity at childbirth; encourage fathers, regardless of marital status, to foster their emotional connection to and financial support of their children; establish support mechanisms for fathers in their relationship with their children, regardless of their marital and financial status; integrate state and local services available for families. |
| 3. Purpose(s) of Benefit or Service Program: This program encourages the formation and maintenance of two parent families.  |
| 4. Program Type. (Check one)  TANF State  |
| 5. Description of Work Activities (Complete only if this program is a separate State program): Not applicable   |
| 6. Total State Expenditures for the Program for the Fiscal Year: \$380,498  |
| 7. Total State MOE Expenditures under the Program for the Fiscal Year: \$380,498  |
| 8. Total Number of Families Served under the Program with MOE Funds: 297  |
| This last figure represents (Check one):  The average monthly total for the fiscal year.  The total served over the fiscal year.  |
| 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:  Not applicable  |
| 10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)  O Yes No   |
|   |

## **Attachment B--Safety Net Services--Page 5**

## **Grantee Information**

StateCONNECTICUT Fiscal Year2023

## **Program Information**

Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.

#### 1. Name of Benefit or Service Program:

#### 2. Description of the Major Program Benefits, Services, and Activities:

Safety Net Services are available to TFA families who have exhausted TFA eligibility and are not eligible for an extension due to non-compliance with employment services requirements and have income below the payment standard for the appropriate family size. Safety Net clients receive assessment and case management services that focus on the removal of barriers that prevent self-sufficiency. Participants in Safety Net Services may also be referred to local agencies in order to address basic needs.

#### 3. Purpose(s) of Benefit or Service Program:

Help end dependence of needy parents on government benefits by promoting job preparation work and marriage.

## 4. Program Type. (Check one)

TANF State

#### 5. Description of Work Activities (Complete only if this program is a separate State program):

There is no work requirement for the Safety Net Services program. However, Safety Net participants may participate in various employment and training activities to help prepare for self-sufficiency. These activities include but are not limited to work activities described in Section 1 of the TANF annual report. Participants may also engage in activities aimed at removing barriers to employment, such as substance abuse counseling and treatment for mental health problems.

#### 6. Total State Expenditures for the Program for the Fiscal Year: \$1,591,467

7. Total State MOE Expenditures under the Program for the Fiscal Year: \$1,591,467

8. Total Number of Families Served under the Program with MOE Funds: 870

#### This last figure represents (Check one):

The average monthly total for the fiscal year. • The total served over the fiscal year.

#### 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:

Safety Net Services must have income less than the TFA payment standard and assets less than TFA asset limit to qualify.

## 10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)

O Yes O No

## Attachment B--Temporary Family Assistance--Page 6

## **Grantee Information**

StateCONNECTICUT Fiscal Year 2023

## **Program Information**

Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.

#### 1. Name of Benefit or Service Program:

Temporary Family Assistance

#### 2. Description of the Major Program Benefits, Services, and Activities:

Temporary Family Assistance (TFA) is a time limited assistance program that provides families with monthly cash assistance for ongoing needs such as food, shelter, and clothing. The program design is based on the assumption that cash assistance should be a temporary program of assistance, and it is better to work than to receive cash assistance. TFA recipients are encouraged to assume personal responsibility for their economic self-sufficiency. The TFA program is applicable to all four TANF statutory purposes. In FFY 2014, the Two Parent TFA and Certain Exempt TFA program components were funded as Solely State Funded (SSF) programs as they are no longer part of the TANF program or claimed as separate state program(s). The expenditures for FFY for these SSF programs are included in Total State Expenditures (#6 below). Two-Parent TFA cases are those with two parents as defined at 45 CFR 261.24. The Certain Exempt TFA program is provided to certain exempt categories in which all adults are exempt from time limits and work requirements because they are medically incapacitated, pregnant or postpartum and unable to work, age 60 or older, or unemployable. In FFY 22, state legislation tied TFA program income eligibility and benefits to the federal poverty guidelines, which had the effect of: increasing the maximum income eligibility threshold, increasing benefit amounts, setting a single statewide eligibility and benefit standard (there were regional differences prior to the change), and ensuring that income eligibility and benefits will adjust annually to reflect changes in cost of living.

#### 3. Purpose(s) of Benefit or Service Program:

Provides cash assistance to needy families so that children may be cared for in their homes or in the homes of relatives.

4. Program Type. (Check one)

TANF State

5. Description of Work Activities (Complete only if this program is a separate State program):

Not Applicable

6. Total State Expenditures for the Program for the Fiscal Year: \$37,357,378

7. Total State MOE Expenditures under the Program for the Fiscal Year: \$37,357,378

8. Total Number of Families Served under the Program with MOE Funds: 5,002

This last figure represents (Check one):

• The average monthly total for the fiscal year. The total served over the fiscal year.

#### 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:

At the time of application, the countable income of the family must be less than the applicable TFA payment standard based on family size. The TFA payment standard is currently tied to 55% of the Federal Poverty Level (FPL). Unless they meet exemption criteria, adult TFA recipients are required to seek and retain employment if it is available. TFA recipients unable to secure employment without assistance receive services, including education and training, designed to assist them in attaining employment within twenty-one months. The program asset limit is \$3,000. Families are allowed to own a reliable car to seek employment, to travel to and from work, or to transport a disabled family member. Earned income is excluded up to 100% of the FPL. Once earnings reach the FPL, the family becomes ineligible for TFA assistance. The first \$50 in monthly child support payments is disregarded. Child care and transportation benefits are provided as needed. If a family member refuses to participate in Employment Services activities, the family is penalized through grant reduction. If the family has income below the payment standard at the end of twenty-one months of assistance, a six-month extension of benefits may be granted. Extensions may also be given to families who have encountered circumstances beyond their control such as domestic violence. Up to two extensions may be granted. For third or subsequent extensions, each adult must also either have two or more substantiated barriers to employment, or be working thirty-five or more hours per week at or above minimum wage, or be working fewer than thirty-five hours per week due to a medical problem or the need to care for a disabled household member, or precluded from working because of domestic violence. A 60month time limit also applies. The 60-month limit can only be exceeded if a domestic violence hardship exists, or if the family is exempt, as described below. If each adult in the family meets at least one of the following exemption criteria, the family is not subject to the time limit: medical incapacitation; age 60 or older; responsible for the care of an incapacitated family member; non-parent caretaker relative who does not receive assistance; caring for a child under the age of one; pregnant if a physician has certified that she is unable to work; in a 6-week post pregnancy period, or determined to be unemployable. Minor parents attending and satisfactorily completing high school or high school equivalency programs and their children are exempt from the time limit. Other features of the TFA program are in the TANF Plan 2021-2023.

10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)

Yes No

# Attachment B--Non-Citizens/Aliens- TFA--Page 7

## Grantee Information

| StateCONNECTICUT | Fiscal Year2023 |
|------------------|-----------------|

| Program Information  |
|--|
| Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions. |
| 1. Name of Benefit or Service Program: Non-Citizens/Aliens Temporary Family Assistance (TFA)   |
| 2. Description of the Major Program Benefits, Services, and Activities: Cash assistance identical to Attachment B - Temporary Family Assistance.   |
| 3. Purpose(s) of Benefit or Service Program: Identical to Attachment B - Temporary Family Assistance.  |
| 4. Program Type. (Check one)  TANF C State   |
| 5. Description of Work Activities (Complete only if this program is a separate State program): Not Applicable.   |
| 6. Total State Expenditures for the Program for the Fiscal Year: \$982,620   |
| 7. Total State MOE Expenditures under the Program for the Fiscal Year: \$982,620   |
| 8. Total Number of Families Served under the Program with MOE Funds: 25  |
| This last figure represents (Check one):  The average monthly total for the fiscal year.  The total served over the fiscal year.   |
| 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services: Identical to Attachment B - Temporary Family Assistance.  |
| 10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)  Yes No  |
| 11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No): \$1   |

## Attachment B--Jobs First Employment Services (JFES)--Page 8

## **Grantee Information**

StateCONNECTICUT Fiscal Year2023

## **Program Information**

Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.

#### 1. Name of Benefit or Service Program:

Jobs First Employment Program (JFES)

#### 2. Description of the Major Program Benefits, Services, and Activities:

Employment services are provided to recipients and applicants of Temporary Family Assistance (TFA) who are participating in an employment service activity authorized by their employment plan until they complete that activity(ies). The program name is Jobs First Employment Services (JFES). The Connecticut Department of Labor (DOL) administers JFES through a partnership among DOL, the regional Workforce Development Boards (WDBs) and other state and local agencies. The goals of the JFES program are as follows: 1) enable TFA participants, through employment, to become independent from cash assistance by the end of the 21-month time limit established by CT law; 2) enable TFA participants who become independent from cash assistance to remain employed and independent of TFA; and 3) ensure that federally established participation rates are met through employment of TFA participants and engagement in other countable TANF work activities deemed appropriate based on assessments of clients' needs. To attain all three program goals, JFES includes a variety of services such as job search, employment, education, training and support services. The combination of services varies with each individual participant. This balance of employment activity with other services utilizes individual strengths and resources while addressing employment-related needs. This balanced work first approach ensures that participants will not only become independent, but will remain independent from assistance while the federal participation rates are met. Each participant, including volunteers, may receive employment services that include, but are not limited to the following: orientation, assessment, case management, employment plan development, barrier resolution, employment related education and training programs, job search skill training, job placement services, case management, support services (such as Special Benefits), retention services, and re- employment services. Participants who are having difficulty may be provided with contracted retention and intensive support services, including in-depth assessment, identification of participation barriers, and referrals to resources to overcome barriers in order to retain employment and/or successfully complete program activities. To facilitate maximum participation, JFES participants are supported by special benefit payments. Transportation benefits are provided to participants of regular, on-going employment services activities other than unsubsidized employment. Payment is made for bus fares or mileage for driving private automobiles. A participation allowance which is intended to assist participants with transportation and baby-sitting expenses is provided for short-term, intermittent employment services activities that last no longer than five consecutive days.

#### 3. Purpose(s) of Benefit or Service Program:

Helps to end the dependence of needy parents on government benefits by promoting job preparation, work and marriage.

| 4. | Program | Type. | (Check one) | ) |
|----|---------|-------|-------------|---|
|    |         |       |             |   |

TANF State

5. Description of Work Activities (Complete only if this program is a separate State program):

Not Applicable.

6. Total State Expenditures for the Program for the Fiscal Year: \$11,126,322

7. Total State MOE Expenditures under the Program for the Fiscal Year: \$11,126,322

8. Total Number of Families Served under the Program with MOE Funds: 2,994

This last figure represents (Check one):

The average monthly total for the fiscal year. • The total served over the fiscal year.

## ${\bf 9. \ Financial \ Eligibility \ Criteria \ for \ Receiving \ MOE-funded \ Program \ Benefits \ or \ Services:}$

Jobs First Employment Services are provided to adults/teen parents applying for/receiving Temporary Family Assistance (TFA) and TFA two-parent families. All TFA applicants/recipients are eligible for employment services even if they are not required to participate by the regulations governing the TFA program. Employment services may continue for up to one year after exiting TFA, provided the recipient is in an employment service activity authorized by the employment plan and the individual remains part of a needy family with income below 75% of the state's median income level.

10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)

Tes O No

## Attachment B--Jobs Funnel Employment Services--Page 9

## **Grantee Information**

StateCONNECTICUT Fiscal Year2023

## **Program Information**

Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.

#### 1. Name of Benefit or Service Program:

Jobs Funnel Employment Services

#### 2. Description of the Major Program Benefits, Services, and Activities:

The Department of Labor (DOL), Office of Workforce Competitiveness (OWC) funds the Jobs Funnel program. The Jobs Funnel represents joint, public-private efforts to create career opportunities in the construction trades. Services include outreach, recruitment, assessment, case management, preemployment preparation (consisting of math, remediation, life skills workshops, customized training, and/or pre-apprenticeship training), job placement, and retention support services. The program offers an initial training followed by assistance in finding employment in apprenticeships and other jobs. Program participants include members of families with dependent children, U.S. citizens, and income at or below 75 percent of the state median income.

#### 3. Purpose(s) of Benefit or Service Program:

This program helps end the dependence of needy parents by promoting work, job preparation, and marriage. Integral to the program are the outreach, assessment, and support services provided by community-based organizations. By providing these services, the goal of the program is to help participants become more job- ready to prevent or end their dependence on public assistance.

## 4. Program Type. (Check one)

C TANF State

#### 5. Description of Work Activities (Complete only if this program is a separate State program):

Services provided include outreach, recruitment, assessment, case management, pre-employment preparation (consisting of math, remediation, life skills workshops, customized training, and/or pre-apprenticeship training), job placement, and retention support services for people who want to pursue construction related careers. The program offers an initial training followed by assistance in finding employment in apprenticeships and other jobs.

#### 6. Total State Expenditures for the Program for the Fiscal Year: \$431,655

7. Total State MOE Expenditures under the Program for the Fiscal Year: \$431,655

8. Total Number of Families Served under the Program with MOE Funds: 104

#### This last figure represents (Check one):

The average monthly total for the fiscal year. • The total served over the fiscal year.

#### 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:

Services for program participants who are members of families with dependent children, U.S. citizens, and have income below 75 percent of the State

#### 10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)

O Yes O No

## Attachment B--School Readiness--Page 10

#### **Grantee Information**

| StateCONNECTICUT | Fiscal Year2023  |
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| StateCONNECTICUT | riscai Tear 2023 |

## **Program Information**

Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.

#### 1. Name of Benefit or Service Program:

#### 2. Description of the Major Program Benefits, Services, and Activities:

The School Readiness Program provides comprehensive child care services to pre-school children ages 3-5 at state licensed child care centers and at schools governed by local health and safety laws throughout the state to families with incomes below the 75% state median income level.

#### 3. Purpose(s) of Benefit or Service Program:

School Readiness helps end the dependence of needy parents on government benefits by promoting job preparation, work and marriage as it allows TANF and former TANF eligible parents to work, participate in job training/counseling or activities to address substance abuse/mental health problems. It also provides educational opportunity to children to help them become ready for school. This opportunity in turn prevents and reduces the incidence of out-of-wedlock births.

| 4. | <b>Program</b> | Type. | (Check | one) |
|----|----------------|-------|--------|------|
|    | -              | -     |        |      |

TANF State

## 5. Description of Work Activities (Complete only if this program is a separate State program):

Not applicable

6. Total State Expenditures for the Program for the Fiscal Year: \$69,892,783

7. Total State MOE Expenditures under the Program for the Fiscal Year: \$69,892,783

8. Total Number of Families Served under the Program with MOE Funds: 11,262

#### This last figure represents (Check one):

The average monthly total for the fiscal year. The total served over the fiscal year.

## 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:

Families with income below 75% of the state median income level and living in selected economically disadvantaged communities with pre-school aged

#### 10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)

# **Attachment B--Childcare Assistance Employed--Page 11**

## Grantee Information

| StateCONNECTICUT | Fiscal Year2023 |
|------------------|-----------------|

| Program Information  |
|--|
| Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.   |
| 1. Name of Benefit or Service Program: Child Care Assistance - Employed  |
| 2. Description of the Major Program Benefits, Services, and Activities: The Child Care Assistance Program provides vouchers to parents to choose child care settings throughout the state.   |
| 3. Purpose(s) of Benefit or Service Program:  The Child Care Assistance Program helps end the dependence of needy parents on government benefits by promoting job preparation, work and marriage, as it allows TANF and former TANF-eligible parents to work, participate in job training/counseling or activities to address substance abuse/mental health problems as long as parent has a child care need and is resident of state. |
| 4. Program Type. (Check one)  TANF State   |
| 5. Description of Work Activities (Complete only if this program is a separate State program): Not applicable.   |
| 6. Total State Expenditures for the Program for the Fiscal Year: \$11,072,348  |
| 7. Total State MOE Expenditures under the Program for the Fiscal Year: \$11,072,348  |
| 8. Total Number of Families Served under the Program with MOE Funds: 1,142   |
| This last figure represents (Check one):  The average monthly total for the fiscal year.  The total served over the fiscal year.   |
| 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services: Family income eligibility must be less than 50% of the state median income unless receiving TANF.   |
| 10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)  |

## Attachment B--Childcare Assistance Unemployed--Page 12

#### **Grantee Information**

| StateCONNECTICUT | Fiscal Year2023 |
|------------------|-----------------|

## **Program Information**

Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.

## 1. Name of Benefit or Service Program:

Child Care Assistance Unemployed

#### 2. Description of the Major Program Benefits, Services, and Activities:

The Child Care Assistance Program for Unemployed Individuals provides vouchers to parents to choose child care settings throughout the state. Unemployed individuals include individuals in TFA employment services and teens not on TFA.

#### 3. Purpose(s) of Benefit or Service Program:

Helps end the dependence of needy parents on government benefits by promoting job preparation, work and marriage and so that children may be cared for in their own homes or in the homes of relative. It allows TANF-eligible parents to participate in job training/counseling or activities to address substance abuse/mental health problems, as long as parent has a child care need and is a resident of the state.

#### 4. Program Type. (Check one)

TANF State

## 5. Description of Work Activities (Complete only if this program is a separate State program):

Not applicable.

6. Total State Expenditures for the Program for the Fiscal Year: \$299,068

7. Total State MOE Expenditures under the Program for the Fiscal Year: \$299,068

8. Total Number of Families Served under the Program with MOE Funds: 27

This last figure represents (Check one):

• The average monthly total for the fiscal year. The total served over the fiscal year.

## 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:

TFA families, meeting the income standards identified in Temporary Family Assistance Attachment, who need child care to participate in Jobs First Employment Services activities.

10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)

Yes No

# Attachment B--Administration--Page 13

## Grantee Information

| StateCONNECTICUT | Fiscal Year2023 |
|------------------|-----------------|

| Program Information  |
|--|
| Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions. |
| 1. Name of Benefit or Service Program: Administration  |
| 2. Description of the Major Program Benefits, Services, and Activities: Administrative expenditures for such items as investigative services, case management and client benefit issuance.   |
| 3. Purpose(s) of Benefit or Service Program: Administrative expenditures for operational support for investigative services, case management and client benefit issuance.  |
| 4. Program Type. (Check one)  TANF State   |
| 5. Description of Work Activities (Complete only if this program is a separate State program): Not applicable  |
| 6. Total State Expenditures for the Program for the Fiscal Year: \$19,990,510  |
| 7. Total State MOE Expenditures under the Program for the Fiscal Year: \$19,990,510  |
| 8. Total Number of Families Served under the Program with MOE Funds: 8,453   |
| This last figure represents (Check one):  The average monthly total for the fiscal year.  The total served over the fiscal year.   |
| 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:  Must be receiving TFA and participating in JFES.   |
| 10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)  • Yes • No  |
| 11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No): \$0   |

# Attachment B--TFA MIS--Page 14

## Grantee Information

| StateCONNECTICUT | Fiscal Year2023 |
|------------------|-----------------|

| Program Information  |  |  |
|--|--|--|
| Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions. |  |  |
| 1. Name of Benefit or Service Program: Temporary Family Assistance - Management Information Systems (MIS)  |  |  |
| 2. Description of the Major Program Benefits, Services, and Activities: Information system and technology costs associated with supporting the TFA program.  |  |  |
| 3. Purpose(s) of Benefit or Service Program: Allows for eligibility determination, payment issuance and ongoing case management needs.   |  |  |
| 4. Program Type. (Check one)  TANF State   |  |  |
| 5. Description of Work Activities (Complete only if this program is a separate State program): Not Applicable  |  |  |
| 6. Total State Expenditures for the Program for the Fiscal Year: \$7,735,847   |  |  |
| 7. Total State MOE Expenditures under the Program for the Fiscal Year: \$7,735,847   |  |  |
| 8. Total Number of Families Served under the Program with MOE Funds: 6,171   |  |  |
| This last figure represents (Check one):  The average monthly total for the fiscal year.  The total served over the fiscal year.   |  |  |
| 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:  Must be receiving TFA.   |  |  |
| 10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)  Yes No  |  |  |
| 11. Total Program Expenditures in FY 1995 (NOTE: Provide only if response on question 10 is No): \$0   |  |  |

## Attachment B--Earned Income Tax Credit (CT EITC)--Page 15

#### **Grantee Information**

| StateCONNECTICUT | Fiscal Year2023  |
|------------------|------------------|
| StateCONNECTICUT | riscai Tear 2023 |

## **Program Information**

Provide the following information for EACH PROGRAM (according to the nature of the benefit or service provided) for which the State claims MOE expenditures. Complete and submit this report in accordance with the attached instructions.

#### 1. Name of Benefit or Service Program:

#### 2. Description of the Major Program Benefits, Services, and Activities:

The Connecticut Earned Income Tax Credit (EITC) is a refundable state income tax credit for low-income working individuals and families. The state credit mirrors the federal Earned Income Tax Credit. Congress originally approved the federal tax credit legislation in 1975 in part to offset the burden of Social Security taxes and to provide an incentive to work. The CT EITC was signed into law during the 2011 legislative session. When both the federal and CT EITC amounts exceed the amount of taxes owed, it results in a tax refund to those who claim and qualify for the credit. To qualify for the CT EITC, you must be eligible for the federal EITC. You must have earned income from employment, self-employment or another source

#### 3. Purpose(s) of Benefit or Service Program:

To enhance incentives to work and allow recipients to retain more of their earned income to meet basic needs.

#### 4. Program Type. (Check one)

TANF State

#### 5. Description of Work Activities (Complete only if this program is a separate State program):

Not Applicable.

6. Total State Expenditures for the Program for the Fiscal Year: \$85,881,370

7. Total State MOE Expenditures under the Program for the Fiscal Year: \$85,881,370

8. Total Number of Families Served under the Program with MOE Funds: 86,060

#### This last figure represents (Check one):

The average monthly total for the fiscal year. • The total served over the fiscal year.

## 9. Financial Eligibility Criteria for Receiving MOE-funded Program Benefits or Services:

Qualifying recipient families must have less than 75% of the state median income

10. Prior Program Authorization: Was this program authorized and allowable under prior law? (Check one)

## Certification

## Certify:

This certifies that all families for which the State claims MOE expenditures for the fiscal year meet the State's criteria for "eligible families."

Signature Signature

NameTricia Morelli

TitleSocial Services Program Administration Manager

Date Submitted01/10/2024

Approved OMB No. 0970-0248 Form ACF-204, expires 03/31/2026.