# DEPARTMENT OF CHILDREN AND FAMILIES

Division of Safety and Permanence

**Policy / Procedure Checklist – Shelter Care**

**Use of form:** DCF 59.03(1)(a)5. requires the licensee to provide with the first application and renewal, any information specified by the Department, therefore use of this form is mandatory. Written procedures for operation of the facility and this form must be submitted to the department as part of a complete application. This form must be completed and submitted when applying for an initial license, at renewal, and anytime a policy or procedure is updated per s. 48.66(2) and (3). Failure to submit this completed checklist to the Department may result in issuance of a non-compliance statement, license denial or other enforcement action. Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m), Wisconsin Statutes].

**Instructions:** When policies are created or updated, a complete copy of all policies/procedures and an updated checklist should be electronically uploaded to PIE (Provider Information Exchange). Policies should be dated and the pages numbered. **The entire document must be completed including Sections I and II**. **The Target Groups selected in Section II should correspond with the Target Groups indicated on the application.**

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| **Name – Facility** | **Facility ID** | **Date** |

**Section I. All Shelter Care facilities must have policies on the following:**

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| **Policy Name/No.** | **Page No.** | **Program Statement** |
|  |  | A description of the shelter care’s purpose and philosophy including criteria for placement. 59.05(1m) |
|  |  | A description of the daily activities available to residents. 59.05(11) |
|  |  | A non-discrimination statement that indicates that the shelter care facility does not discriminate against a resident because of race or cultural identification, sex, sexual orientation, age, color, creed, ancestry, national origin, disability, political affiliations, or religious beliefs. 59.01(1) |
| **Policy Name/No.** | **Page No.** | **Policies and Procedures** |
|  |  | Criteria for levels of supervision of residents. 59.05(4)(b) and (f) |
|  |  | Confidentiality of resident records. 59.07(2) |
|  |  | Behavior intervention. 59.05 |
|  |  | Suicide prevention. |
|  |  | Serious incident reporting requirements. 59.07(4), 59.01(1), and CWLS Memo 2017-04L. DCF Memos: <https://dcf.wisconsin.gov/cwportal/policy> |
|  |  | Notifying law enforcement if a resident leaves the shelter care without permission or does not return to the shelter care after a leave. 59.06(21)(d) |
|  |  | Prohibiting smoking on the shelter care premises and in vehicles used to transport residents. 59.01(1) |
|  |  | Prohibiting the use of resident labor as a substitute for employment of a sufficient number of competent persons to operate and maintain the shelter care. 59.05(8)(b) |
|  |  | Plan for contacting additional staff members when necessary. 59.04(5)(a)3. |
|  |  | Visiting plan to encourage the maintenance of a relationship between children and their parents, relatives, or other significant persons. 59.05(12) |
|  |  | Plan for assuring effort is made to access religious services. 59.05(9) |
| **Policy Name/No.** | **Page No.** | **Financial Arrangements** 59.03(2)(d)4. a. |
|  |  | Policies in accord with sound budgeting, disbursement, audit control, sound plan of financing indicating sources of income and projects costs. |
| **Policy Name/No.** | **Page No.** | **Medical Care** |
|  |  | Provision on regular and emergency medical care to children. 59.05(13)(a) |
|  |  | Medication administration, storage, disposal, documentation and resident refusal of medication. |
| **Policy Name/No.** | **Page No.** | **House Rules** 59.05(5)(d) |
|  |  | Written facility rules which include acceptable and unacceptable resident conduct and the consequences for violations of house rules. |
| **Policy Name/No.** | **Page No.** | **Emergency Planning and Preparation** |
|  |  | Plan which specifies action and procedures for meeting emergency situations including serious illness, severe weather and missing children. 59.06(21)(d) |
|  |  | Plan for emergency evacuation and instruction of residents in the use of the plan. Procedures shall include handling of residents with limited mobility. Plan shall be reviewed every 2 months. 59.06(20)(e) |
| **Policy Name/No.** | **Page No.** | **Resident Rights** |
|  |  | Description of resident rights and grievances procedure (informal and formal). |
| **Policy Name/No.** | **Page No.** | **Communication Log** 59.057 |
|  |  | Procedures on how to document for each shift of shelter care workers and RPPS decision makers to use a communication log to document and communicate with other shelter care worker and RPPS decision makers about children whom they supervise in common, how all of the following will be document:   * Each child’s location, behavior. * Significant incidents involving a child. * Reasonable and prudent parenting request and decisions made for children under s. DCF 59.055 for activities that do not take place in the shelter care facility and are not supervised by a staff member, volunteer, or unit supervisor. * Staff arrival and departure times. |
|  |  | Policies and procedures that ensure clear communication between shelter care workers and RPPS decision makers who supervise the same children on the next shift. The policies and procedures shall specify the types of significant incidents that are required to be documented in the communication log. |
| **Policy Name/No.** | **Page No.** | **Personnel** 59.04(5m) |
|  |  | Policies and procedures to cover salary, vacation time, sick leave, overtime, leaves of absence, retirement plan, insurance coverage, probationary period, grievance procedures and termination procedures. |
|  |  | Job descriptions that define the staff member’s duties and evaluation standards. |
|  |  | Staffing schedules. |
|  |  | Designation of the chain of command. |
|  |  | Plan for ongoing in-service training. 59.04(1)(c)2. |
|  |  | Plan for the screening, orientation, use, supervision, and evaluation of volunteers. 59.04(2)(a) |
|  |  | Non-discrimination statement. 59.04(7) |
|  |  | Maintenance of a personnel file on each shelter care worker, relief help and volunteer. 59.04(6) |
| **Policy Name/No.** | **Page No.** | **Electronic Records** [CWLS Memo 2012-11L](https://dcf.wisconsin.gov/cwportal/policy) |
|  |  | Personnel Records |
|  |  | Resident Records |
|  |  | Other Records |

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| **Section II. Specific Policies and Requirements Regarding Target Groups indicated on the application:**  Children in Need of Protective Services (CHIPS) and Juveniles in Need of Protective Services (JIPS) do not require additional specialized policies. Target Groups with an asterisk (\*) are highly specialized programs; the shelter may not accept a placement in one or more of these programs unless it is indicated on the license. | | |
| **Policy Name/No.** | **Page No.** | **\*Crisis Stabilization** **(Child may only stay 5 days or less)**  [CWLS Memo 2017-12L](https://dcf.wisconsin.gov/cwportal/policy) |
|  |  | Documentation from a county agency indicating the facility has been included in the county crisis plan under DHS 34. |
|  |  | A policy which details how the facility will ensure the safety and well-being of residents receiving crisis stabilization services. |
|  |  | A policy which details how the facility will ensure that providing crisis stabilization services will not adversely affect other residents in the facility. |
| **Policy Name/No.** | **Page No.** | **Delinquency/Corrections** |
|  |  | A policy which identifies how the levels of supervision needs will be assessed prior to intake – if admitting serious juvenile offenders, must include an environmental safety plan and a provision that addresses the vulnerability of other residents. |
|  |  | Comprehensive policies/practices to address repeat offending behaviors. |
|  |  | Identify training that staff will receive that is specific to this program including experience and/or training to include knowledge of the Juvenile Justice System and a time frame for this training **(must be completed within three months of hire for new staff or at continuation for current staff and updated annually)**. |
| **Policy Name/No.** | **Page No.** | **Respite Care** **(Child may only stay 20 days or less)** |
|  |  | A program statement for the shelter to include the purpose of respite care services, the compatibility of children with diverse needs, and how the programming for respite care placements relates to other components of the shelter care. |
|  |  | Policies and procedures on assessing and supporting the medical, dietary, behavioral and emotional needs of a child admitted for a respite care services. |
|  |  | Policies and procedures for the discharge of the child once the 20-day deadline has expired. |
|  |  | Plans for school attendance. |
|  |  | Policies and procedures for reporting child abuse/neglect. |
|  |  | Policy and procedures on how each staff member who provides care for a respite care child shall have training or work experience related to any specific condition or need of the child for whom care is provided. Staff members with no previous training or experience working with the specific condition or need of a respite care child shall receive at least 8 hours of supervised experience or more if necessary to provide competent care. |
|  |  | Policy and procedures on how the shelter care facility shall designate by name or position a staff member who will have primary responsibility for oversight of the respite care children. |
| **Policy Name/No.** | **Page No.** | **Voluntary Placements** **(Child may only stay 20 days or less)** |
|  |  | A program statement for the shelter to include the purpose of voluntary placements, the compatibility of children with diverse needs, and how the programming for voluntary placements relates to other components of the shelter care. |
|  |  | Policies and procedures on assessing and supporting the medical, dietary, behavioral and emotional needs of a child admitted for a voluntary placement. |
|  |  | Policy and procedures for the discharge of the child once the 20-day deadline has expired. |
|  |  | Plans for school attendance. |
|  |  | Policies and procedures for reporting child abuse/neglect. |
| **Policy Name/No.** | **Page No.** | **Other Specialty Program *(specify)*:** |
|  |  | A program statement which includes the type of program/services to be provided. |
|  |  | Identify training that staff will receive that is specific to this program and the time frame for this training **(must be completed within three months of hire for new staff or at continuation for current staff and updated annually)**. |
| **COMMENTS:** | | | |

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|  | **NAME** – Licensee / Authorized Representative |  | **SIGNATURE** – Licensee / Authorized Representative |  | **DATE** – Signed |  |