



Exhibit 1: Scope of Services
Assessment & Stabilization Center (ASC) Contract
with the Division of Milwaukee Youth Protective Services (DMCPS)
Contract Period: January 1, 2024 – December 31, 2024

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Program Requirements

In keeping with the mission of the Division of Milwaukee Child Protective Services (DMCPS) and the Department of Children and Families (DCF), the philosophy of the Assessment & Stabilization Center (ASC) is to serve as a shelter providing enhanced programming to help promote stabilization, hope, and striving for permanency for children in need of protection from abuse and neglect. The ASC must see itself as a key unit of the overall public child welfare system.

The ASC (hereinafter referred to as “Contractor”) is licensed as a DCF 59 shelter care facility for the purposes of this contract. An ASC is a short-term placement resource for children who have just entered protective custody and need a comprehensive assessment, or for children already in protective custody who require a temporary placement while steps for stabilizing placements are explored.

The Contractor shall address the unique needs and best interests of each child by:

- 1) Accepting and housing an eligible child immediately upon acceptance of the referral, following through with all treatments and supportive practices in place for the child, such as, but not limited to; administering medication, supporting therapy and counseling, arranging attendance at medical appointments and court dates, ensuring school attendance, and continuing any other practices in place or pending at the time of placement.
- 2) Providing a safe and nurturing living environment in which the child can be stabilized, monitored, and be assessed for their needs in relation to identifying the most appropriate placement and any other recommended services/interventions that will best aid in achieving stability and permanency goals.
- 3) Participating in and transporting the child to family teaming meetings as needed and providing support and encouragement to the child to meet their diverse and specific developmental needs including appropriate educational, medical, behavioral, and dental care support.
- 4) Creating and maintaining open and supportive communication among all parties to reach the goals established for the child.

The Contractor will support a child protection system that:

- 1) Is comprehensive, child-centered, family-focused, and community-based.
- 2) Incorporates all appropriate measures to prevent the occurrence or recurrence of child abuse and neglect.
- 3) Promotes physical and psychological recovery and social re-integration in an environment that fosters the health, safety, self-respect, and dignity of the child.

Licensing Requirements

The Contractor must be licensed by the Bureau of Permanency and Out-of-Home Care (BPOHC) as a shelter care facility under DCF 59. The Contractor must maintain their facility license, in good standing, throughout the course of the contract. The Contractor must comply with all



requirements as set by BPOHC and DMCPs. All licensing violations by the Contractor will be reported by the Contractor to the DMCPs Ongoing Services Section within 24 hours of recognition that a violation has occurred. At the discretion of DMCPs, licensing violations and/or failure to report them may result in DMCPs holding future placements at the facility until such time as the violation is corrected.

Placement

Timing and Availability

Placements must be accepted seven days per week, 24 hours per day. The Contractor must always ensure a point of contact for placement coordination and shall make available a telephone number or pager number that will be answered 24 hours per day. The Contractor must respond with a placement decision to any request within 30 minutes of receiving the initial contact from the Placement Referral Unit (PRU).

If the Contractor cannot be reached by telephone or pager and respond within 30 minutes, DMCPs, at its discretion, may assess a fee in an amount equal to 1% of the contracted monthly base rate (pre-payment amount) for each violation. For the purposes of this provision, a violation constitutes a situation in which a placement decision is not made and conveyed to PRU within 30 minutes, per child attempted to be placed, per calendar day of occurrence. DMCPs will notify the Contractor in writing if a violation of this nature occurs, and a fee is assessed.

Accepting Placements

The Contractor must accept all placements within 30 minutes of receiving the initial contact from the PRU unless one of the following exceptions applies:

- 1) Proposed placement is not possible due to non-conformance with an age-appropriate vacancy.
- 2) Proposed placement is not possible due to non-conformance with a gender-appropriate vacancy.
- 3) The Contractor is under a health quarantine recognized by DMCPs.
- 4) The Contractor has one or more children receiving one-to-one care and is unable to meet staffing requirements as it relates to the shelter care license. This denial must be approved by DMCPs prior to occurring. The Contractor must request approval for the denial through their Contract Administrator or designee.

If the Contractor refuses to accept placement of a child in violation of this contract, DMCPs, at its discretion, may assess a fee in an amount equal to 10% of the contracted monthly base rate (pre-payment amount), for each violation. DMCPs will notify the business within 1 business day. For the purposes of this provision, a *violation* constitutes a situation in which a request for placement is denied, per child attempted to be placed, per calendar month. DMCPs will notify the Contractor in writing if a violation of this nature occurs and a fee is assessed, or the contract is to be cancelled. After the third such contract violation in a 12-month period, DMCPs may, at its discretion, remove a child from the care of the Contractor and cancel the contract. In



such an instance, DMCPs may limit the final calendar month's payment to the prorated amount of the Contractor's actual expenses to provide care.

Request for Denial of Placement

Prior to denial of placement, the Contractor should staff the request with the placing IA or Case Management supervisor and child welfare case manager or its designee to discuss what other supports may be warranted to support and allow for placement of the child in the ASC. In the event an ASC denies placement of a child, the ASC must state in writing the reason for the denial to the Ongoing Services Section (Contract Administrator and Ongoing Services Section Manager) within 30 minutes of the denial.

Admission

Placement Authorizations

Only the DMCPs-authorized contract partner for placement referral services, also called the Placement Referral Unit (PRU), can authorize placements.

Wraparound Placements for Children in Need of Protective Services (CHIPS)

All placements of children involved in Wraparound services must be coordinated with the DMCPs-authorized contract partner for placement referral services (PRU), regardless of the time of day. Children enrolled in Wraparound cannot be placed with the Contractor without prior approval from the assigned child welfare case manager. The Wraparound program is responsible for payment of Wraparound placements. The Contractor cannot refuse placement because the child is involved in the Wraparound program.

Placement Packets

The Contractor shall obtain DMCPs placement packets (orange folders) upon admitting a child. In the rare circumstance that a placement packet is not immediately available, the Contractor shall not be permitted to refuse placement for reasons relating to the absence of the placement packet. The Contractor will contact the assigned child welfare case manager to obtain the placement packet, or any information missing from the packet. The placement packet must remain with the Contractor for the entire duration that the child is enrolled in the program and shall be relinquished to the child welfare case manager when the child is discharged.

Admissions Paperwork

The Contractor will ensure that the admission form is completed at the time of admission for each child admitted by the Contractor.

Length of Stay Mandated by State Law

The length of stay for **post-dispositional** children is not to exceed 20 days. There are no extensions allowable for post-dispositional child.

Pursuant to Wis. Admin. Code s. DCF 59.05, a center shall not keep any **pre-dispositional** children in residence longer than 30 days per episode except when suitable placement cannot be determined within 30 days.



In coordination with the child welfare case manager, the Contractor may request and/or DMCPs may authorize a primary 15-day extension of placement (to extend the placement to 45 days). Requests must be made by the child's 25th day in care.

In coordination with the child welfare case manager, the Contractor may request and/or DCF licensing may authorize a second 15-day extension of placement (extending the placement to 60 days). This request must be made prior to the expiration of the prior approved time. No further extensions of placement will be allowed.

All extension requests are to be submitted to the designated Contract Administrator within the DMCPs Ongoing Services Section.

Missing from Care Procedures

The Contractor must abide by all Missing from Care policies held by DCF and DMCPs. Policies found here: <https://dcf.wisconsin.gov/mcps/policies> and <https://dcf.wisconsin.gov/cwportal/policy>.

When a child has been reported as missing from care, the Contractor shall hold the bed overnight for that child. If the child does not return by 8:00 a.m. the following morning, the child will be discharged from the Contractor's care unless otherwise authorized by the PRU. The Contractor will discuss the pending discharge with the PRU prior to completion.

If a child who has been discharged by the Contractor due to being missing from care returns to the Contractor, the Contractor must immediately notify the PRU, as well as the child welfare case manager and call 414-220-SAFE.

If the child had been missing from care for less than 48 hours after discharge, and a bed is available, the Contractor shall immediately readmit the child and no additional (or repeat) admission paperwork shall be required.

If the child had been missing from care for more than 48 hours after discharge, and a bed is available, the Contractor shall notify the PRU and child welfare case manager of the return, that a bed is available, and await further direction. Readmission is not automatic. If readmission occurs, new admission paperwork is required.

If a bed is not available, the Contractor will notify the parties listed above of that placement barrier. The Contractor will take practical and reasonable approaches to keep the child present while waiting for the assigned case management agency to collect the child, while also securing and providing for the safety of other residents for whose care the Contractor is officially responsible.

Discharge Planning

The Contractor will assist in planning for permanent placement of each child through frequent contact and cooperation with the child's child welfare case management team. The Contractor



will participate in the family team meeting, if requested, and share the results of any internal and external assessments with the child's child welfare case management team.

The Contractor may request to have a child removed from their care. The Contractor shall submit the request to the PRU who will review the request with the child welfare case manager and respond to the request within one business day. Requesting removal to an alternative placement does not guarantee approval. It is the position of DMCPs that the purpose of emergency shelter care with meaningful assessment and stabilization services is negated when children are unnecessarily removed to another placement at the request of the care provider. Such requests will be granted only in rare and compelling circumstances that cannot be mitigated by using other available supports, and when alternative placement is available.

In the event there is continued disagreement between the Contractor and the assigned case management agency, the DMCPs Contract Administrator or designee will review the matter to make the final determination. Upon discharge, the child's placement packet must be released to the case management agency and travel with the child to the child's next placement.

Staffing

Staff Ratio

The Contractor must ensure that they are able to provide adequate supervision to children under their care at all times. There will be a minimum of one on-duty staff person for every four children in placement during waking hours. There will be a minimum of one on-duty staff person for every eight children during sleeping hours. (*"On duty"* is defined as awake, alert, within hearing distance of all children in care and available to address emergencies or a child's needs).

Additional staff must be added as needed to accommodate any higher level needs of the children placed and for emergency situations. DMCPs must approve 1:1 staffing requests. The Contractor shall have an emergency plan in place to contact internal management staff, 24 hours per day, seven days per week. If there is more than one level to the Contractor's physical plant, there must be a staff member on each floor where there are children spending time to provide proper supervision.

Staff Training

The Contractor's staff shall be knowledgeable about child abuse and neglect prevention, intervention, and treatment, while being culturally sensitive to ethnic and racial minorities and diverse geographic areas within the community. The Contractor will provide training to staff about the prevention of maltreatment to children in care.

The Contractor must provide staff with documented training that includes:

- 1) How to identify when abuse or neglect has occurred.
- 2) The legal duties of Contractor's staff and their responsibility to protect the legal rights of the child.
- 3) Protocols for mandated reporting of child abuse or neglect.



- 4) How to address topics relevant to the population being served including but not limited to: mental health, substance abuse, domestic violence, and human trafficking.
- 5) Confidentiality of records to protect the privacy rights of the child and the child's caregivers.
- 6) Behavior management which excludes the use of physical discipline and corporal punishment

The Contractor will send at least one member of its staff to any mandatory trainings provided by DMCPs and that staff member will deliver the acquired training information to the Contractor and/or the remainder of the Contractor's staff.

Incident Reports

Mandated Reporting & Serious Incidents

The Contractor shall ensure all staff are trained in mandated reporting (Wis. Stat. §48.981), serious incident reporting, and the required procedures for properly managing serious incidents. The Contractor shall ensure all serious incident reporting and notification occurs in accordance with DCF and DMCPs policy.

The Contractor will send all complete SIRs to the child welfare case management team and the PRU ASC Coordinator within 48 hours of the incident. The submission of an SIR does not in any way replace the Contractor's statutory responsibility to report all child abuse and neglect allegations by calling 220-SAFE.

Reporting Maltreatment

The Contractor's staff member who observed or was informed of the maltreatment will call the Division of Milwaukee Child Protective Services Access Unit (414-220-SAFE) within one hour upon learning of an allegation of maltreatment occurring in the ASC. The staff person making the referral will provide the DMCPs Access Staff or CPS worker involved in the investigation all available written information that may provide further detail or clarify the allegation. The Contractor will fully cooperate with DMCPs and any independent investigating agency regarding any report of alleged maltreatment of a foster child while in care. A children's placement is only to be changed by appropriate DMCPs contracted case management or initial assessment staff.

Any substantiated maltreatment in the Contractor's ASC will require the Contractor to submit a Corrective Action Plan (CAP) to DMCPs within 30 days of being notified of the substantiation. This CAP shall include any action initiated in response to the recommendations of the independent investigating agency. Approved Corrective Action Plans will be added to the Contract as an addendum.

DMCPs Access staff may receive an allegation of maltreatment that has been reported by another source that raises concern for the care of the child in the Contractor's care. The Contractor must have procedures in place outlining the immediate steps to be taken to ensure and protect the safety of the child about whom the report was made and any other child under the same care who may also be in danger of abuse or neglect and ensuring their placement in a safe environment.

If the referral is **screened out**, the Contractor will review the referral and follow up on any concerns or licensing issues.

If the referral is **screened in** the agency will ensure the children in the home are safe and will not investigate the allegation itself; instead, an independent investigation will take place. When the independent investigation is completed, the Contractor will review and implement the assessment recommendations as deemed appropriate.

The Contractor will work with the DMCPs Contract Administrator in the follow-up of screened in and out referrals and independent investigation recommendations on an as-needed basis.

Intoxicated Child SIRs

If a child in the Contractor's care is believed to be intoxicated or under the influence of drugs, the Contractor will take prudent and reasonable measures to have the child medically cleared by contacting the child's medical provider and seeking medical treatment as directed.

If the child does not have a designated medical provider, a walk-in, urgent, or emergency medical care provider will be contacted.

The Contractor will also notify the Ongoing Services Section Contract Administrator and the child welfare case manager within 12 hours of any incidents that are of the nature described above that do not rise to the level needing a Serious Incident Report.

Out-of-Control Child SIRs

If the child is out of control, the Contractor will inform the police and/or emergency medical services immediately, and the child welfare case manager within one hour of the situation being stabilized.

Acts of Violence and Property Damage SIRs

If a child engages in behavior that includes an act of violence or whose conduct results in damage to property, the Contractor must complete an SIR and may involve law enforcement. If law enforcement concludes that the behavior is criminal, law enforcement may choose to remove the child from the Contractor's physical plant. If law enforcement does not conclude that the child's behavior necessitates that the child be detained, the child is to remain in the care of the Contractor.

The Contractor must attempt to control for and mitigate acts of violence or substantial threats through the addition of staff and the intensifying of the subject child's staffing ratio, or through aid provided by law enforcement, the Children's Mobile Crisis (CMC), or the assigned case management agency. If attempts to mitigate behaviors are not successful and the safety of other children cannot be ensured, the Contractor should request a staffing with the assigned case management agency to collaborate on a next course of action. Under no circumstances is the Contractor to make a unilateral decision to have the child removed from the care of the ASC. To do so allows DMCPs the authority to invoke contract cancellation as if the contractor had,



without allowed cause, refused three placements in a 12-month period. The Contractor will keep documentation of any incident reports or incidents pertaining to each child in the child's file.

Liability

If the Contractor accepts any placements or any funding from DMCPs in relation to this contract, the Contractor is presumed to have agreed to all provisions contained within the contract and shall be held liable for such performance.

Corrective Action Planning

If DMCPs determines the Contractor is operating in violation of any provisions contained herein, DMCPs may require the Contractor to participate in creating and/or following a Corrective Action Plan (CAP) to ensure policy and contract compliance.

Contractor Programming

The Contractor must engage children in programming that focuses on the needs of each child in various stages of social, emotional, and physical development. The Contractor will ensure each child's safety and well-being, defined as remaining safe from potential harm while in care.

Assessments

The Contractor must complete Functional Assessment Screening Tool (FAST) and send it to the designated PRU staff, DMCPs Ongoing Services Section Contract Administrator, and the child's child welfare case manager within five business days of admission.

The Functional Assessment Screening Tool (FAST) will be updated weekly and submitted as ongoing assessments. The assessments must be sent along with copies of any pertinent observational reports on the child's behavior and well-being, to the designated parties no later than every Monday or Wednesday by 10 a.m.

Education and experience required to create a qualified assessment report:

- 1) The Contractor must ensure that the staff completing the assessment reports have the clinical experience (preferred) or education necessary to provide useful assessment information.
- 2) Clinical experience is defined as a professional license recognized by the Wisconsin Department of Safety and Professional Services (DSPS) in the behavioral health, mental health, or social services field, such as:
 - a. Behavior Analyst
 - b. Psychologist
 - c. Social Worker
 - d. Professional Counselor
 - e. Prevention Specialist
- 3) The individual completing the assessment is not required to hold a license from the Wisconsin Department of Safety and Professional Services.



- 4) DMCPs may designate changes to the form, format, and due dates for assessment reports and if so enacted, will notify the Contractor by providing at least 30 days of notice in writing prior to the date the changes are to become effective.

The Contractor will be required to address medical/mental health issues, substance use disorder issues, missing from care behaviors, and other high-risk behaviors (e.g., safe/crisis plan for human trafficking). The Contractor must address the changing needs of a child including an increase in high-risk behaviors. If the Contractor identifies a need for additional resources, without which the child's needs will not be met, the Contractor shall immediately notify the child welfare case manager. The Contractor will engage the children in crisis stabilization and planning if needed based on internal and external assessments. The Contractor, the case management agency and Wraparound (when applicable) will collaborate to develop, implement, and monitor any and all crisis plans.

Educational Services

The Contractor must maintain the child's existing school placement. All children are expected to attend school every day scheduled. The Contractor may not provide the school with confidential information about the child or the child's family except as allowed by applicable state and federal law. The Contractor must provide the transportation to and from school unless other arrangements are made by the child's child welfare case manager prior to placement with the Contractor. Any educational issues must be immediately reported to the child welfare case manager.

Medical, Dental and Behavioral Evaluations or Services

The Contractor must evaluate any obvious medical and dental needs of a child who is admitted by the Contractor. The Contractor will inventory, document, and properly secure any medications, including recording the dosage quantity present at admission and the anticipated date the medication will run out for each child admitted by the Contractor. The Contractor must schedule routine, follow-up, and emergency medical, dental, or mental health/behavioral appointments for the child. The Contractor is responsible for following any recommendations from the Child Advocacy Protection and Services (CAPS) appointment, and any follow up care. The Contractor is authorized to schedule and attend appointments with the child through the Authorization to Consent to Medical Treatment located in the placement packet provided to the Contractor upon the child's admission. It is the responsibility of the Contractor to ensure transportation is provided for any scheduled medical, dental, or behavioral health appointments. The Contractor must notify the child's case management team of any scheduled medical appointments.

Medications

The Contractor must administer medications as required by DCF 57, including, but not limited to, documentation of the medication dosage and frequency given. The Contractor must have a policy pertaining to the administration of medications to ensure that each child is taking the correct medications and dosages, administered by staff properly trained in the dispensation of medication, and that all medications shall be securely stored. The policy shall also indicate how medications will be administered to child while preserving each child's right to privacy regarding

health and medical information. The Contractor must arrange for and obtain any prescription medications the child requires.

Promoting Normalcy

Reasonable and Prudent Parenting

The Contractor will adhere to Reasonable and Prudent Parenting standards as outlined in DCF 59.

Family Interaction

During a child's placement, the Contractor will arrange for, encourage, support, and cooperate in assisting the child in maintaining contact with their family of origin and siblings through regular visitation and family interaction, as required in the court order and permanency or case plan, unless otherwise directed by the child welfare case manager.

The Contractor must address transportation issues to ensure that every child attends visits with family members as deemed appropriate by the assigned child welfare case manager. The Contractor will provide a privacy area for visitations at the facility when applicable, while providing adequate oversight of visitations to ensure the safety of all children in care. The Contractor must ensure that no disciplinary measures resulting from violations of house rules result in a child missing family interaction.

Similarly, the Contractor will make practical and reasonable efforts to ensure children avoid contact with maltreaters or other individuals identified as harmful to the child's well-being and as directed to be avoided per the court order, permanency plan, or case plan.

When termination of parental rights (TPR) has occurred, the Contractor will facilitate support of the permanency goal identified in the court order, permanency plan or case plan, such as adoption or independent living.

Recreational/Social Activities

The Contractor must provide and supervise daily structured recreational and/or social activities. The Contractor shall document the recreational and/or social activities and the learning exposures created from the activities. The Contractor must ensure that any child who has a case management-approved recreational/social activity in the plan of care is allowed to continue in that activity. The Contractor must address transportation issues to ensure that every child can attend recreational/social activities. When other transportation options are not available or feasible, the Contractor must provide transportation to and from recreational/social activities.

Off-Ground Activities/Pass

The Contractor must ensure that, unless a child has been approved for an off-grounds activity, the Contractor's staff will directly supervise all activities. The Contractor can only allow a child an off-grounds activity/pass after authorization by the assigned child welfare case manager and



inclusion in the care plan or in adherence to 2015 WI Act 128: Reasonable and Prudent Parent Standards. The off-grounds activity must also have a specific destination and length of time.

The Contractor must document in the case file any time the child is on an approved off-grounds activity or away from the facility for any length of time. The Contractor must include the following items:

- 1) Time of departure
- 2) Time of return
- 3) Location of activity
- 4) Physical condition at time of departure/return
- 5) Emotional/behavioral condition at time of departure/return
- 6) Transportation utilized

All decisions made using the Reasonable and Prudent Parenting Standard are to be documented separately and kept in the child's file for potential review by the DMCPs Contract Administrator or the child's child welfare case manager.

Employment/Community Service-Related Activity

The Contractor must ensure that any child with a current employment or community service obligation is allowed to maintain the employment or continue to complete the community service requirement where there is prior approval by the assigned case manager and inclusion in the care plan. The Contractor will support the child in these endeavors by providing transportation or other services as determined necessary.

Standard of Care

The Contractor will inventory and secure the child's belongings and will locate and secure contraband including, but not limited to; lighters, knives, tobacco, etc., upon admission in accordance with the Contractor's own guidelines and within any applicable confines of patient's rights standards under DHS 94. A copy of the Contractor's guidelines will be submitted to DMCPs before any placements may occur. The Contractor will meet the physical needs of each child in care.

The use of corporal punishment by the Contractor is prohibited. Physical restraint may be used in the event of an emergency as defined by DCF 57 licensing guidelines if the staff person administering the restraint has been properly trained in the technique chosen by the Contractor.

Food Availability

The Contractor will ensure that a two-day quantity of various nutritional food is available to meet the needs of the total number of children for which the center is licensed, to include daily meals and snacks.



The Contractor will make reasonable efforts to consider and accommodate:

- 1) Religious/cultural beliefs and values
- 2) Dietary restrictions
- 3) Past trauma history of the children in care

Food Policy

The Contractor will publish and post within the facility, a menu of planned meals at least one week in advance. The Contractor should allow children access to food and beverages in a manner that is most home-like and least restrictive. The Contractor must not have any food locked away unless it is for food supply storage and/or future meal preparations.

Clothing

The Contractor will ensure that children are adequately clothed during their stay. Children housed with the Contractor may maintain their own clothes, but the Contractor must ensure that an emergency supply of clean and weather appropriate clothing (coats, hats, gloves, etc.) is available to children who do not have an adequate supply of their own clothing. Children will maintain possession of these items of clothing when discharging from the Contractor's care.

Mobile Phone and Internet Use Policy

The Contractor must establish a written policy regarding children possession and use of mobile phones. This policy must be provided to DMCPSC Contract Administrator within 30 days of the signing of this contract. The policy must identify:

- 1) The procedure when a child possessing a mobile phone is brought to the Contractor for admission.
- 2) When the child may or may not have or utilize the device.
- 3) When and where the device will be stored or charged, and how it will be secured from theft or misuse by others when not in possession of the child.
- 4) How the Contractor will ensure privacy of other children in the facility given the recording and photographic capabilities of most mobile phones.
- 5) How the Contractor will ensure the child does not use the mobile device to contact unsafe individuals or others who the child welfare case manager has advised should not be contacted.
- 6) Whether the Contractor offers Wi-Fi / Internet access to children and how such access is overseen or managed.
- 7) In which circumstances a child is not allowed to have a cell phone or an electronic device. The policy will state how the child will communicate with family and friends and how the child will have access to the internet or Wi-Fi. The child must also be allowed to have private conversations with case management, family, and friends (this is only to be used when safety issues arise as a result of the child possessing the cell phone).
- 8) If a child displays inappropriate behavior by use of a cellphones or other electronic devices or that threatens the safety of staff and other residents.

Common Acronyms and Definitions

The terms “**child**” and “**youth**” as used within this document are intended to convey the same meaning and the words are used interchangeably

414-220-SAFE: Phone number where one must report maltreatment, abuse, or neglect for Milwaukee County residents

ASC: Assessment and Stabilization Center

BPOHC: Bureau of Permanency and Out-of-Home care, a segment of the Wisconsin Department of Children and Families

CHIPS: Children in Need of Protection or Services

CAPS: Child Advocacy Protection and Services

CAP: Corrective Action Plan

CPS: Child Protective Services

Child Welfare Case Manager: a case manager who works for or is contracted by the State of Wisconsin to perform case management services for children in need of protective services. May be an employee of DMCPs, Wellpoint Care Network, Children’s Wisconsin, or any other contractor providing CPS case management services to the state and may provide either Initial Assessment or Ongoing services.

DCF: Department of Children and Families, a Department of the State of Wisconsin

DCF 57: The chapter of the Wisconsin Administrative Code that pertains to group home facilities.

DCF 59: The chapter of the Wisconsin Administrative Code that pertains to shelter care facilities

DMCPs: Division of Milwaukee Child Protective Services, a segment of the Wisconsin Department of Children and Families

PRU: Placement Referral Unit

TPC: Temporary Physical Custody

TPR: Termination of Parental Rights



Appendix A

Summary of Documents Contractor Must Provide to DMCPS Prior to Placement of Children

- 1) Contact Information to utilize for placements and emergency contact information for all management staff.
- 2) Physical Restraint: Physical restraint may be used in the event of an emergency as defined by DCF 57 licensing guidelines if the staff at the ASC have been properly trained in the technique chosen by the Contractor. The Contractor will provide DMCPS with its physical restraint policies and training plan before any placements may occur.
- 3) Policies: The Contractor will provide a copy of their program policies and procedures pertaining to ASC and provide yearly updated versions.