



**Division of Safety and Permanence**

**DCF 57 Advisory Council Meeting**

**November 18, 2025**

**2:00 p.m. – 4:00 p.m.**

VIRTUAL Meeting

Meeting Link:

<https://dcfwi.zoom.us/j/84146920523?pwd=5aZHZrMozvdx05Rt8vXEaO5QILZH0i.1>

Dial by Location: +1 312 626 6799

Meeting ID: 841 4692 0523

Passcode: 808350

DCF Staff			
Name	Present	Name	Present
Dustin Hinze	x	Elaine Pridgen	
Katie Davis	x	Jamie Gennrich	x
Dana Johnson	x	Emily Erickson	x
Kristie Buwalda	x	Jeanette Paules	x
Mary Morse	x	Frances Bass	
Rob Collins	x	Rachel Nili	

Member	Present	Nominating Organization
Kathy Markeland	x	WAFCA
Marye Beth Dugan		Nehemiah Group Home
Dave Fretz	x	Forward Home for Boys
India Hansen		Office of Lived Experience @ DCF
Brian Peil		DOC – Juvenile corrections
Dr. Murece Johnson	x	Moe's Transitional Living Center (COA)
Lisa Netterville	x	New Hope & Destiny Home II (COA)
Caylee Nichols	x	Positive Alternatives
Audra O'Connell		Walker's Point GH (homeless program)
Jennifer Pester		Office of Lived Experience
Jill Collins	x	DMCPS
Lisa Pendleton	x	WAFCA (Winnebago County)
Stephen Bedwell	x	WAFCA (Racine County)
Amy Rodriguez	x	DOC

Others in Attendance:		
Sarah Plascencia Karri -- WAFCA		
Kali Daugherty WPYFC	x	

## AGENDA

- I. **Call to Order, Welcome, and Introductions:** 19 participants
  
- II. **Summary of Proposed Notable Changes to DCF 57.** DCF shared a PowerPoint which highlights some of the identified major changes. A link was provided in advance to participants. Below is feedback on the various sections which were discussed.
  - **Needs determination process:** WAFCA asked about the actual language in this section. DCF shared that DCF's Office of Legal Counsel (OLC) is still reviewing the rule language. DCF will share update language as soon as possible. DCF shared information at the WAFCA PAC meeting which went into more detail. DCF plans to add content to the upcoming Provider Forum.
  - **57.09 Licensee Reporting Requirements:** Defined how the critical incident reporting was originally 72 hours and has shifted to within 24 hours. Weekends are included and notification must be made in the same time period. Recommended that a **specification occur in memo**. Discussed the medication error reporting requirements and a question was raised regarding adverse reactions and reporting to the CPA or parent/guardian? **DCF will issue memo** and that defines adverse reaction. Concern if there is a pattern in medication errors and there is no reporting to the placing agency. DMCPs has a contract requirement to be notified of an adverse reaction. **Advisory Council members would like clarification as to what constitutes a med error. One group home uses 5 R's (used by other state agencies).** Some group homes have switched to medication bubble packs to make sure youth get the correct meds at the right time. Medication bottles are easier to mix up. Question about self-harm was raised, what constitutes a serious incident and reporting. Critical incident reporting includes self-harm, but it needs to be actual harm to self that occurs. DCF also shared agencies can use discretion and notify the placing agency to work together to ensure safety and care of the resident if it is more around a youth's thoughts versus actions. There will be training on DCF 57 changes so that will hopefully alleviate any questions on what is needed for reporting.
  - **57.10 Personnel Requirements: No comments from AC.**

- **57.11 Hiring and Employment:** Question about the TB test required and when that will no longer be required. DCF shared when the rule goes into effect.
- **57.16 Admissions: No comments from AC.**
- **57.17 Discharge & 57.18 treatment plan:** Concern about the change in number of days to prep for discharge plan. **(2) UNPLANNED.** If a resident's discharge from the group home is not planned, the licensee shall update the treatment plan under s. DCF 57.18 (4) within 15 days after the discharge date and shall provide a copy of the resident's treatment plan to the placing agency, resident, and the resident's parent, guardian, legal custodian, or Indian custodian. **(3) COLLABORATION.** (a) The licensee and the placing agency shall collaborate to transition a resident out of a group home when the placing agency or the licensee determines that the current placement is not in the resident's best interest or that the treatment goals in s. DCF 57.18 have been achieved.  
(b) The licensee shall provide the placing agency with at least 30 days to make plans for a resident's discharge, unless both parties agree to earlier removal.
- **57.19 Staffing Requirements:** Question about how the prohibition would work if multiple group homes got together for an event. Facilities are able to have staff and youth meet so long as there is understanding of the impact of confidentiality, but that an event is not an ongoing overnight direct care issue. Question about new ratio and how that will impact rates. Rate regulation is separate from this area of rule and can be discussed each year based on rate regulation process.
- **57.25 Resident Rights:** Question from the AC, can a licensee include in their handbook how a search will be conducted? This is required in COA. "Comparable patient rights" require they still use the DHS 94-grievance procedure when there is a complaint.
- **57.28 Promoting Normalcy:** Concerns that a lot of parents could have issues with rights of youth to consent to their own haircare, and the LGBTQ youth expressing themselves in opposition to the parent's desire especially if the youth is 12+. This may cause a challenge for the group home to be in conflict with parents. It is recommended that the group home staff, placing/supervising agency, and youth discuss with families of origin when this conflict arises.
- **57.29 Health. Medication administration:** The current draft rule and the information on the slide shared, is not the same. DCF will update for future presentations.
- **57.30 Food & Nutrition:** Concerns with youth who are stealing food and safeguards of their facility. They have extra food and want to have that locked up as the residents have plenty of food available to the residents. How do they monitor overeating for some youth? Concerns with food in the resident's rooms. How do they address youth with eating disorders? DCF indicated that the

'stealing' of food is generally related to trauma and that a policy related to food storage is not the right solution, but rather working with that youth and addressing their trauma/emotional/cognitive/behavioral needs is best suited for assisting in reducing food hoarding, eating disorders, and medical necessity. If it is a medical issue, then that may need to be addressed. A licensee may not lock or restrict access **unless it is used for excess food storage.**

- **57.39 Physical Plant & Environment:** Sleeping arrangement language has been changed and the "consent" was removed. WAFCA indicated they were in favor of that and flagged that would not need to be shared with other groups.

### **III. Next Steps and Additional Feedback and Questions:**

1. Top of the presentation mention QRTP but there was no slide presented today. Will be discussed at the Provider Forum in November.
2. Respite. How many days can a youth stay in a group home for respite? (4) RESPITE CARE LIMIT. A youth may not be in respite care for more than 28 consecutive days.
3. Question about moving from a probationary license to regular license. Will DCF be streamlining the renewal process? Do they need to resubmit all the materials? Additional guidance will be forthcoming upon rule publication.
4. 4-year age difference between staff members and residents was noted as a change that may have additional concerns from group home owners. DCF indicated that group homes may have different requirements of their staff, but that this age requirement is the baseline minimum for all group homes.
5. What will group homes do if new rule changes and their current exceptions then change? During the continuation period and license review, group homes will have an opportunity to apply for exceptions in DCF 57.
6. If a group home wishes to target a different population (i.e. age of youth), how would they do this, given the new Needs Determination process. DCF will issue further guidance upon publication of the rule, but it is currently expected that a new Needs Determination process will need to be followed.