



**Wisconsin Department of  
Children and Families**

## **Wisconsin's Targeted Safety Support Funds**

**Program and Fiscal Guide for Counties: January 2026-December 2026**

**Updated: December 2025**

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## Funding Purpose and Goals

### *Purpose:*

Wisconsin statute provides for Wisconsin's Department of Children and Families (DCF) to allocate funding for the purpose of "services provided to ensure the safety of children who the department of a county determines may remain at home if appropriate services are provided." See s. 49.175(1)(t). Pursuant to this statute, Wisconsin's Targeted Safety Support Funds (TSSF) helps reduce trauma to children by keeping children safe with their families, providing support and resources to build on family strengths, preventing future maltreatment and supporting reunification planning to prevent re-entry.

TSSF operationalizes DCF's strategic transformation and vision for the child welfare system in Wisconsin by providing funding to local child welfare agencies that can be used to tailor in-home services and supports based on unique family and community needs.

### *Primary Goal:*

The primary goal of the TSSF is to keep families together by:

- Helping families develop formal and informal supports
- Keeping children safe at home
- Providing support and resources to build family strengths
- Supporting reunification planning to prevent re-entry

## General Requirements

- Data and information must be entered timely into eWiSACWIS to support eligibility requirements, demonstrate fidelity to practice requirements, and support TSSF payment to the agency.
- Cost reporting must be submitted monthly. See [Cost Reporting](#) section for more information.

## Funding and Allocation Description

Targeted Safety Support Funding is available to local child welfare agencies to serve families when children are assessed unsafe and at risk of removal from the home, services are needed to keep them safely in the home or at the time of reunification. This flexible funding is available to agencies to better ensure access to vital funding, particularly during the critical phases of the child protective services (CPS) casework process. During these key times, such as in the course of conducting an Initial Assessment or shortly before and after a child's reunification with their family, TSSF is available for agencies to be reimbursed the cost of select services to keep children in their homes.

Local child welfare agencies are awarded TSSF funding by DCF annually. To accommodate funding cycle variance within the calendar year period associated with the State/County contract and the fiscal year of the funding source, the TSSF is broken into two funding allocations. Within the contract, each agency will be awarded January – April and May – December allocations. **Funds not spent from the January – April allocation cannot be utilized after April 30<sup>th</sup>; these expenses must be reported in SPARC by the final cost reporting deadline of June 29<sup>th</sup>.** Due to this allocation split, it will be important for agencies to be mindful of their January-April allocation balance to ensure that this portion of funds are utilized.

Allocation	Reporting Closeout
January-April	June 29
May-December	February 28

Allocation balances can be checked on the **Contract Balance Report:**

<https://dcfsparc.wisconsin.gov/reports/contract-balance>. If you have any questions regarding viewing your agency's contract allocation balances, please contact DCF Finance: [DCFFinanceGrants@wisconsin.gov](mailto:DCFFinanceGrants@wisconsin.gov).

More details can be found in the [Cost Reporting Section](#) of this guide.

TSSF is guided and administered in accordance with:

- [Wisconsin Children's Code \(Chapter 48\)](#)
- [Wis. Stat. s. 49.175\(1\)\(t\)](#)
- [Wisconsin's Child Protective Services Safety Intervention Standards](#)
- [Wisconsin's Child Protective Services Access and Initial Assessment Standards](#)
- [Wisconsin's Ongoing Services Standards](#)
- [Federal Temporary Assistance for Needy Families \(TANF\) Laws and Regulations](#)
- [DCF's Allowable Cost Guide Manual](#)

## Eligibility and Enrollment Requirements

### Eligibility

The use of TSSF is appropriate when CPS determines that a child may remain at home if appropriate services to ensure the child's safety are provided through the use of a Case Plan, Protective Plan or Safety Plan. Families may be enrolled in Targeted Safety Support Funds at any time in the case process.

Agencies can determine the appropriate enrollment period in TSSF based on the family's identified needs. These needs, and the corresponding agency response to these needs, must be included and documented as part of the Case Plan, Safety Plan or Protective Plan. Total enrollment length is individualized at the agency's discretion for each child enrolled.

A child is eligible to be enrolled into TSSF if the requirements outlined below are met and correctly documented in eWiSACWIS.

To qualify for TSSF the following is required:

- The child(ren) and family are being served as part of a Child Protective Services intervention (**identified as a CPS case in eWiSACWIS**) OR the child is an infant who is being served under the [Drug Affected Infants policy](#)\*.
  - \*Note: If the child is being served under the Drug Affected Infants policy and an agency chooses to enroll them in TSSF, an email must be sent to [DCFTSSF@wisconsin.gov](mailto:DCFTSSF@wisconsin.gov) with the case ID and date of enrollment. These cases will not show up as eligible on the eWiSACWIS eligibility reports.
- There is an active, approved Protective Plan or Safety Plan in place due to the identification of danger threats that affect child safety and the plan is documented in eWiSACWIS **OR** there is an active, approved Case Plan to ensure the child's safety associated with the child's CPS case. **Note:** There is a

validation in eWiSACWIS that requires the Case Plan, Protective Plan or Safety Plan to be active in order for the child to be enrolled.

A child reunified on a trial-reunification is eligible for TSSF if there is an active, approved Protective Plan or Safety Plan in place due to the identification of danger threats that affect child safety and the plan is documented in eWiSACWIS **OR** there is an active, approved Case Plan to ensure the child's safety,

### **Enrollment Process:**

If a local child welfare agency determines that it would be appropriate to enroll a child(ren) in TSSF, the agency is responsible for entering beginning and ending dates in eWiSACWIS on the Program Assignment screen. An enrollment must be entered for each child that the agency will be requesting reimbursement for under TSSF.

Agencies determine the length of enrollment based on the child's needs. The following reasons may result in a closure:

- The child is determined to be safe in their home and a Case Plan, Protective Plan or Safety Plan is no longer needed. **Note:** There are validations in eWiSACWIS that will prompt the ending of TSSF enrollment if there is no longer a Case Plan, Protective Plan or Safety Plan in place but the enrollment in eWiSACWIS does not automatically end.
- Safety can no longer be assured through in-home planning and an out-of-home placement is necessary.
- The local child welfare agency is closing the family's CPS case.
- Funding for service provision using TSSF is no longer determined to be needed to support safety.

## **Documenting Enrollment in eWiSACWIS**

### **Verify eligibility:**

- Local child welfare agency identifies children who would benefit from TSSF.
- Local child welfare agency runs the *TSSF County Pre-Enrollment Report (SM06A130)* or *TSSF Pre-Enrollment by Case-Child Report (SM06A131)* to confirm that the child is eligible. These reports identify children who meet eligibility requirements within the reporting period.
- Enrollment status and service outcomes can be monitored using the TSSF Enrollment and Outcomes Report (SM06A132)

### **Entering the start of TSSF enrollment:**

- The local child welfare agency enters a [program assignment](#) for eligible child in eWiSACWIS. If there is a question regarding TSSF eligibility, the local child welfare agency should reach out to the [DCF Program Coordinator](#) prior to enrolling the child.

### **Documenting the end of TSSF enrollment:**

If it is determined a child is no longer in need of TSSF or the child is no longer eligible:

- The local child welfare agency is responsible for closing out the program enrollment in eWiSACWIS using an end date that reflects the timing of this determination.
- Children are not automatically disenrolled after a set time period.
- **Note:** There are validations in eWiSACWIS that will prevent case closure if a TSSF enrollment is still open.

## Allowable Services Overview

Program expenditures must provide a *direct benefit* to the children and families enrolled in TSSF and be necessary to keep the child safely in the home. Certain costs are explicitly unallowable per Chapter IV of DCF's [Allowable Cost Guide Manual](#). Please note that many of the explicitly unallowable costs in DCF's Allowable Cost Guide Manual refer to *agency* costs, and do not necessarily apply to *client* costs. Cost categories such as "goods and services for personal use" and "personal housing and living expenses" are allowable if they can be justified as helping the family manage the child(ren) safety.

Considerations for approving expenditures:

- Is this expenditure meaningfully related to maintaining safety of the child and/or children in the home?
- Is there a plan to make the service or assistance sustainable for the family beyond the unsafe and at-risk of removal from home period?
- Do the supervisor and financial manager approve of the use of TSSF in this way?

## Allowable Services: TSSF Service Categories

### A Note on the Use of Separation

There are times when short term separation is used as a control on a Protective or Safety Plan. If separation is intended to be used 24/7 long term, it's important to consider if a placement via TPC or VPA is necessary. This may require consideration in how your agency understands and describes the difference between 24/7 separation and an out-of-home care placement.

When deciding to use separation, it's important to take the following considerations into account:

- How does separation control the safety threat?
- When is it needed? (ex: consider daytime hours, after school, weekend etc.)
- How long is separation needed? When will it be able to be decreased?
- How does the family understand separation and what they can or cannot do?
- How does using 24/7 separation for a lengthy period of time impact parent's legal rights to due process?

### TSSF Service Categories

Only costs from these allowable service categories listed below can be reimbursed with Targeted Safety Support Funds. If the service is Medicaid billable, Medicaid should continue to be billed first.

Services that may be included in a plan that are eligible for reimbursement can be found below. Services that are not included below will need to be approved by the [DCF TSSF Program Coordinators](#) for reimbursement, as allowable under state and federal law.

The services listed below tie directly back to Service/Activity as identified on the family's Case Plan, Safety Plan or Protective Plan. If there are services identified on a family's Case Plan that do not appear on the list below, they cannot be reimbursed by TSSF. Services that are reimbursed by TSSF must be documented as services to ensure the child's safety in the home.

## Using Change Services on a Protective or Safety Plan

Control is the primary function in all contacts with the family that are contained in the Protective or Safety Plan. Ensuring child safety is always the priority for these services. Change services may be included only if they do not detract from this primary goal. If it is determined that control and child safety can be fully maintained the following change services may also be provided. Change services are focused on transition to safety and independence or a Case Plan in Ongoing Services. The following change services can be reimbursed by TSSF when offered in relation to safety management or the provision of safety related services. The below categories cannot be listed on a Protective or Safety Plan but will be reflected in monthly cost reporting via SPARC.

- Mental Health and AODA services (*non-medical*)
- Case management
- Parenting Education
- Peer Support

## Time-Limited Resources (Four Months)

Costs within this list include concrete resources provided to families to ensure a child's safety in the home, as documented on the Case Plan, Safety Plan or Protective Plan. These services are **only able to be reimbursed by TSSF for four months**, although this does not prohibit an agency from continuing to provide these resources at their own expense.

**TSSF can be used to reimburse the cost of services provided by either formal or informal supports identified by the family and the child welfare professional and must be included on the Safety Plan, Protective Plan or Case Plan.**

The examples provided after each category are not intended to be an exhaustive list.

- Food/Clothing Services:** Services to connect a family with food and/or clothing that are necessary to control for and maintain safety.
- Housing Assistance:** Emergency assistance to help families access safe housing when it is necessary to control for and maintain safety. This includes providing rent or a stay in a hotel.
- Household Support:** Assistance from the agency in obtaining services or household items needed to control for and maintain safety. This may include but is not limited to utility assistance and household items including car seats, safety gates, door alarms, and safety monitors, etc. as well as repairs to the home so that it is safe.
- Transportation:** This may include bus passes, gas vouchers, taxis, professional drivers, and providing rides to family members to access services.
- Daycare:** The paid care of a child by a person other than the child's legal guardians or custodians to create separation between the children and their caregivers and control for and maintain safety. This includes payments to both established childcare centers and informal supports.
- Recreational Activities:** Any activities a child or parent participates in during times of separation to control for and maintain safety. This could include having a mentor take a child or parent out of the home for periods of time.
- Respite:** Respite services include services such as temporary care for children to relieve a primary caregiver who may be experiencing severe distress or who may be in a state of crisis. This may be used in circumstances where the accumulation of caregiving responsibilities results in threats to safety.

## Unlimited Resources

Costs associated with these resources do not have time restrictions and can be submitted for reimbursement if used on a Case Plan, Safety Plan or Protective Plan throughout the period of enrollment and meet all other allowable cost requirements. **Note:** *Change services are not listed on a Protective or Safety Plan.*

**TSSF can be used to reimburse the cost of services provided by either formal or informal supports identified by the family and the child welfare professional and must be included on the Safety Plan, Protective Plan or Case Plan.**

- a) **Social Supports:** Supportive resources by family, friends, neighbors, coworkers, or others used to control for safety threats or maintain safety. Social connection and emotional support are an appropriate safety response for a parent whose isolation and unmet emotional needs result in threats to child safety. This is only an appropriate safety response if the planned connection and support has an immediate impact on the parent's behavior toward the child. Social connections may be used as part of a case plan to help support a parent to maintain the child's safety in the home. Social supports may also include spiritual cultural supports identified as part of a Case Plan.
- b) **Supervision/Observation:** Supervision and observation may involve informal or formal providers whose primary focus is to oversee interactions between parents/caregivers and children and intervene if safety threats arise. Informal providers, such as friends, neighbors or relatives, may be especially effective for providing supervision during critical times of day when safety threats may become active and result in harm to the child. For example, this could include observing/supervising a parent at bedtime if this has been identified as a critical time for the family. Formal providers may include, but are not limited to in-home safety teams, agency paraprofessionals, other contracted workers, and CPS professionals.
- c) **Basic Home Management:** Controlling for or maintaining safety by assisting with budgeting, household schedules, and daily tasks or any other activities needed to maintain a household.
- d) **Unique Child Condition Service:** Services used to address safety issues specific to one child in the family that may be related to a special need or circumstance.
- e) **Basic Parenting Assistance:** Services that address the parent's inability to perform basic parenting and other life skills that affect child safety. It could include helping with basic functions such as feeding, bathing and supervision or more specialized modeling to learn to care for a child's specific non-medical physical wellbeing and psycho-social needs. The provider is responsible for seeing that these functions are performed.
- f) **In-Home Health Support (non-medical)\*:** Providers that assist the family in non-medical services that support the health of the family members to control for or maintain safety. This includes modeling for the family how to provide care for the child. If services are eligible for Medicaid (MA) funding, MA should be billed first.
- g) **Crisis Services (non-medical)\*:** Crisis stabilization or diversion services specifically focused on maintaining safety. This could be related to AODA, emergency mental health care or other family stressors. If services are eligible for MA funding, MA should be billed first.
- h) **Case Management Services:** Working with families, youth, children, providers and others for provision of tasks and activities to support, develop, implement, monitor, and manage the enrolled child(ren)'s Case Plan, Protective Plan or Safety Plan.
- i) **Mental Health and AODA Services (non-medical)\* (Change service):** Counseling or other non-medical therapeutic services that focus on increasing parental protective capacities to eliminate the identified safety threats or maintain safety in the home. When used as part of a Safety or Protective Plan, this service may only be provided if safety can be fully maintained and may never compromise child safety. TSSF should be used to reimburse for these services if using TSSF funds would allow for the service to begin sooner or if it would not otherwise be funded through MA or private insurance.

- j) **Parenting Education (Change service):** Parenting education is provided to teach parents appropriate parenting techniques and is used to enhance parental protective capacities. This service may only be provided if safety can be fully maintained and may never compromise child safety. If safety is a concern during parenting education the provider must be willing to provide what is needed to the child. For example, the provider must step in and provide food to the child if the parent is unable or unwilling to do so.
- k) **Peer Support (Change Service):** This service is provided to parents when there is an active Case Plan, Safety Plan or Protective Plan to provide support and mentorship.

*\* For the purpose of this program, the following definitions apply:*

*Medical Services, which cannot be reimbursed under this program, are services provided by a medical professional, such as a doctor or nurse or other medical provider.*

*Non-Medical Services, which can be reimbursed under this program if they fall within the categories below, are services that are provided by anyone outside of the medical profession, such as a counselor, social worker, psychologist, or home health aide (if the home health aide is not a medical professional, such as doctor or a nurse or other medical provider).*

In practice, when an agency creates a Case Plan, Protective Plan or Safety Plan and a child on that plan is enrolled in TSSF, that family may receive multiple services.

For example, under the plan, a family could be receiving:

1. **Housing assistance** (Time-Limited Resource)
2. **Transportation** (Time-Limited Resource)
3. **Social Supports** (Unlimited Resource)
4. **Case Management** (Unlimited Resource)

## **Cost Reporting**

The local child welfare agency will report actual program costs in SPARC on a monthly basis. Costs for enrolled children to ensure the child's safety in their home can be submitted for reimbursement under TSSF within the confines of the allowable program services described above.

DCF will reimburse 90.11% of program costs monthly on SPARC contract code 3632, up to the allocated award amount. The other 9.89% of reported costs will appear under SPARC contract code 9632 and are considered agency matching funds as required by state statute. Subject to available funds, DCF will perform a closeout adjustment for all SPARC lines to reimburse agencies with reported expenses that exceed their original allocations at the end of the contract period. Reimbursement in excess of original contract allocation is not guaranteed.

The TSSF award can be used flexibly by the agency on all enrolled children, within the confines of the allocation and allowable cost parameters. There are no daily or monthly dollar limits and local child welfare agencies are able to receive reimbursement on allowable costs up to their allocation award limit.

Funding will be awarded January – April (Allocation 1) and May – December (Allocation 2). Eligible costs shall be reported in SPARC by the 28<sup>th</sup> of the month following the expense date. It is important to report eligible costs within the given allocation reporting period because funding from Allocation 1 does not carry over to Allocation 2. Each allocation period reporting deadline(s) are outlined below:

Allocation Period	Final Reporting Deadline
Allocation 1 (January-April)	June 29
Allocation 2 (May-December)	March 1

Subject to available funding, any closeout adjustment will be made after the March 1 reporting deadline. Timely reporting prior to the March 1 deadline is crucial to the reimbursement process; therefore, any late reporting after March 1 will not be accepted.

There are three cost reporting line codes for TSSF in SPARC. Refer to [Appendix E](#) with Reporting Visual Guide.

- Line 3632A – Time-Limited Resources
- Line 3632B – Unlimited Resources
- Line 3632C – Case Management

Line 3632A – Time-Limited Resources - Costs within this list include concrete resources provided to families to ensure a child’s safety in the home, as documented on the Case Plan to ensure safety, Safety Plan or Protective Plan. The resources within this list are limited to the four-month time frame outlined previously. Costs that should be reported on this line consist of:

- Food/Clothing Services
- Housing Assistance
- Household Support
- Transportation
- Daycare
- Recreational Activities
- Respite

Line 3632B – Unlimited Resources – Costs within this list do not have time restrictions and can be submitted for reimbursement if used on a Case Plan to ensure safety, Safety Plan or Protective Plan throughout period of enrollment and meet all other allowable cost requirements. Costs that should be reported on this line consist of:

- Social Supports
- Supervision/Observation
- Basic Home Management
- Unique Child Condition Service
- Basic Parenting Assistance
- In-Home Health Support (non-medical)
- Crisis Services (non-medical)
- Mental Health and AODA Services (non-medical)
- Parenting Education
- Peer Support

Line 3632C–Case Management Services should include case management services provided either by Local Child Welfare staff not enrolled in WiLearn or by contracted staff. **Any costs reported on this line should be excluded from the Children and Families Cost Pool SPARC lines 3301, 3301N and 3683, 3683N. The costs should also not be reported on SPARC lines 3561, 3681 and 9681.** For more detailed information on these SPARC lines visit <https://dcf.wisconsin.gov/sparc/codes>.

For more detailed description of costs refer to the [Allowable Services](#): TSSF Service Categories section of this guide.

DCF recognizes that each agency will have its own methodology for calculating an hourly rate for child welfare case management staff, and integrating the extra effort required to support families served using TSSF into its staffing plan. For auditing purposes, DCF requires agencies to annually describe that methodology ([Appendix C](#)). Agencies must keep this methodology on file.

Families enrolled in TSSF may also be participating in Children's Long-Term Support (CLTS) or benefit from other Medicaid funded services or programs. This is allowable so long as expenditures reported in SPARC reflect **CPS** case management and paid service costs that directly support meeting the needs and achieving the goals of the family as articulated in the Case Plan, Protective Plan or Safety Plan. In addition, Cost Reporting must reflect the **net cost** incurred by the agency for the provision of these services.

As with other state and federal funding sources and allocations, agencies are responsible for tracking and maintaining internal documentation to support service costs submitted in SPARC. If an agency is using TSSF to support positions, it must be done so in accordance with this manual and the [DCF Allowable Cost Guide Manual](#). DCF recognizes the complexity that accompanies the above funding requirements and will continue its evaluation of the resulting business and programmatic implications through ongoing feedback from agencies and in coordination with our DCF finance and budget staff.

## Local Agency Match

In accordance with [Wis. Stat. s. 49.175\(1\)\(t\)](#), TSSF requires a 9.89% agency match for the receipt of funding. A match of 9.89% will be calculated and allocated to 9632; agencies will be reimbursed at a 90.11% rate.

## Sub-Contracting Requirements

TSSF can be used to purchase services from contracted providers. In the case of contracted providers, the local child welfare agency is responsible for ensuring that there is no delegation of responsibility of safety assessment, documentation, planning, or case closure activities to the contracted provider. Agencies will be asked as part of their regular reporting to DCF to indicate if the agency is contracting out any service provision for TSSF and how the agency monitors the services provided by contractors.

Please note, contracted providers are required to provide to the agency cost reporting information that aligns with service costs detailed in [Appendix C](#).

## Contract Monitoring

During the renewal of funds process, each agency will identify measurable outcomes to track for TSSF. Agencies will be required to report on this information, as well as population served annually in a required report. A contract schedule is attached to this document as [Appendix D](#).

The DCF TSSF Program Coordinator will review SPARC data, local child welfare agency's eligibility data and other program information periodically. Technical Assistance calls will be scheduled as needed to better understand the population served and current and evolving program needs.

# Appendices

[A. TSSF FAQ](#)

[B. TSSF Contact Information](#)

[C. TSSF Case Management Staffing Cost Plan](#)

[D. TSSF Programmatic Report Schedule](#)

[E. TSSF Reporting Decision Tree](#)

[F. TSSF Dually Involved Youth/Families](#)

[G. TSSF Staff Time Flow Chart](#)

## Appendix A: TSSF FAQ

### **Q1: Are there time limits for how long a child(ren) can be served with TSSF?**

There is no limit to the length of enrollment for a child in TSSF as long as they continue to meet eligibility requirements. While total enrollment length is individualized at the agency's discretion for each child enrolled, certain services are only reimbursable for four months. If the agency determines that the services are still needed to mitigate a safety threat or ensure safety in the home past the four-month reimbursable time-limit, the agency is responsible for those service costs. Agencies are responsible for determining the best use of their funds.

### **Q2: Do children who have been reunified qualify for TSSF?**

Children who have been in out-of-home care but have returned home, including on a Trial Reunification, qualify for TSSF if they meet the [eligibility criteria](#).

### **Q3: What reporting requirements exist for agencies?**

An [Annual Report](#) is due on February 28 of each year that provides information on how the agency spent their funds as well as demographic information about who was served with the funds.

Cost reporting occurs monthly through SPARC. See [Appendix D](#) for details.

### **Q4: What documentation requirements exist for agencies?**

A: Agencies are required to follow the [Enrollment Requirements](#) for each enrolled child(ren) as described above. Additionally, agencies will submit an [Annual Survey](#) in the fall which sets the agency's goals for their use of TSSF and provides updated contact information.

### **Q5: Does TSSF have to start right away when a Case Plan, Safety Plan or Protective Plan begins? Or can agencies wait?**

TSSF does not have to start on day 1 of a Case Plan, Safety Plan or Protective Plan, but it can. Time-Limited Services do not have to start day 1 of TSSF enrollment, but once one or more Time-Limited Services are used, the 4-month "clock" starts. Unlimited Services can be provided before and/or after Time-Limited Services (they do not need to start or end at the same time).

### **Q6: If eligibility is staggered for multiple children in the home, does that mean time-limited services can, effectually, be more than four months (four months for one child, four months for another child)**

No, the four-month limit applies to the entire household, not per child.

### **Q7: Is the four-month time frame for all time-limited services?**

The four-month time frame starts for all services within the Time-Limited services category at the first use of any one of the identified [Time-Limited](#) service.

Ex: TSSF enrollment begins February 1<sup>st</sup>. The agency pays rent for a family on March 1<sup>st</sup> and this is reimbursed through TSSF. The agency has four months, from March 1<sup>st</sup> to June 30<sup>th</sup> to use any of the services in the Time-Limited Services list.

**Q8: If a family received Time-Limited services and then we work with the family again in the future, can they receive one of the Time-Limited services again?**

[Time-Limited](#) services can be reimbursed again after 12 months from the date of the last payment.

**Q9: If the family received Time-Limited services for four months but there are still needs identified in the plan, can we continue to work with a family after the four months are up?**

Yes. The time limits are only for how long TSSF can be used to reimburse the specific services identified in the [Time-Limited](#) services section. If the family continues to need services on the Time-Limited services list after the four months, the local child welfare agency is responsible for the cost of those services. The agency is responsible for ensuring safety management for a family, regardless of timeframe, and regardless of how costs of needed services are covered.

**Q10: Does case management include supervision observation or is it separate? Is it different for a case manager vs. Social Work Aide?**

If it is the case manager doing supervision and observation as a part of their role managing the case, this can be counted as case management time. Agencies may encounter times where someone other than the primary case manager is conducting case management functions (i.e. Social Work Aide). In those situations, agencies will need to make the decision locally on how that person's time is coded based on the functions being performed. For more information, see [Appendix G](#).

**Q11: How is a supervisor's time captured with TSSF?**

An important aspect of supervision is reviewing and supporting the case planning and assessment activities, including reviewing and supporting a Case Plan, Safety Plan or Protective Plan. Time spent on these tasks for families enrolled in TSSF can be claimed under the case management line. Unless a supervisor is hired to only support TSSF cases, additional funding will be needed to supplement that position equivalent to other responsibilities.

**Q12: Can agencies use TSSF to reimburse the cost of staff training?**

No. For information about which line to report costs associated with case management, see [Appendix E](#). Agencies cannot use TSSF to reimburse the cost of staff training. For county workers enrolled in the WiLearn training program, **all** costs must be reported on SPARC Line Code 3301N. These workers are not sampled as part of the RMTS sampling process while they are enrolled in WiLearn. For county workers that are not enrolled in WiLearn, training is captured through the RMTS sampling process, and any worker costs related to training must be reported on SPARC Line Code 3301.

**Q13: Can we use both formal and informal providers to provide services that are reimbursed by TSSF?**

A: Yes. Services can be provided by either formal or informal providers when appropriate or necessary. The use of informal providers, when possible, may help create natural supports for the family to utilize after CPS intervention ends. Payments can be made to either formal or informal providers. Rates and modality of payments for providers of all services are determined by the local agency.

**Q14: Can TSSF reimburse for the time the CPS professional spends with a family to develop or monitor the Case Plan, Protective Plan or Safety Plan?**

A: Yes. Case management time is an [Unlimited Resource](#) and can be reimbursed by TSSF. [Appendix C](#) contains the Case Management Staffing Plan agencies should complete and keep on file in their agency to document how their case management costs are calculated.

**Q15: Do we have to get approval from DCF to spend over a certain dollar amount?**

A: No. DCF does not have a threshold that needs prior approval for spending, as long as costs are in line with what is detailed in this Program and Fiscal Guide as well as the [Allowable Cost Guide Manual](#). However, if there are certain spending limits or approval requirements within your agency, you will still need to follow those requirements.

**Q16: When will we know how much our TSSF Allocation will be for next year?**

A: DCF will provide an Information Memo with preliminary contract numbers in the summer so agencies have that information for the following year's planning and budgeting purposes. The final allocation amount will be included with the agency's State/County contract which is sent to agencies in late fall.

**Q17: I missed entering the enrollment for a child that we used TSSF for and the plan is no longer active. What do I do?**

A: eWiSACWIS validations are in place to ensure that there is an active Case Plan, Protective Plan or Safety Plan documented in eWiSACWIS in order for a child to be enrolled in TSSF. Sometimes agencies miss documenting enrollment because the plan was only in place for a short period of time. If this occurs, email the [DCF TSSF Coordinator](#) with the Case ID, Child(ren) ID, and the dates of enrollment. The TSSF Coordinator will work with the Service Desk to get the enrollment entered.

**Q18: Can we use TSSF for Unborn Child Abuse cases?**

A: No. Once the child is born, the agency should reassess safety to determine whether agency intervention is needed and determine eligibility based on that. If the agency works with the newborn and the parent(s) under the [Drug Affected Infant Policy](#), TSSF can be used. The agency will need to provide the Case ID, Child ID, and enrollment dates to the [DCF TSSF Coordinator](#).

**Q19: Are we required to track case management time minute-by-minute?**

A: TSSF does not require minute-by-minute tracking in order for agencies to submit case management costs to TSSF. Your agency needs to track case management as outlined in your time and effort payroll systems and follow the requirements outlined in your State/County contract – there is no different or additional requirement specific to TSSF.

**Q20: Can we use TSSF to buy gift cards?**

A: TSSF can be used to reimburse the cost of gift cards that are used for or by a family enrolled in TSSF. TSSF cannot be used to buy gift cards in advance or in bulk to have on hand for a family. If your agency has a policy that restricts or prevents the use of gift cards, you must follow your agency's policy.

**Q21: Can we use TSSF for a family prior to reunification?**

A: If there is a specific item or items that are preventing reunification or providing those items would speed up reunification, the [DCF TSSF Coordinator](#) may grant an exception. This might include things like paying for the cost of a security deposit for a parent to secure housing or purchasing a bed so the child has a place to sleep in the parent's home. Exceptions will be considered based on the identified needs and how it connects to how soon the reunification will occur.

**Q22: We are working with a parent with an in-home TPC Order or an In-Home CHIPS Order. Can we still use TSSF?**

A: Yes. TSSF does not require the presence or absence of any specific type of court order for the child to be eligible. As long as the child is still living in their home, TSSF can be used regardless of whether there is a court order or the type of court order.

**Q23: I am using a VPA with a child and their family. Can the child be enrolled in TSSF since this is voluntary and the parents agreed to it?**

A: Even though voluntary, the child is placed out-of-home under an order which makes them ineligible for TSSF.

A VPA is considered an out-of-home placement as defined in [Safety Intervention Standards](#): Out-of-Home Placement refers to when a child is placed outside of their home via a Petition for Protection or Services (CHIPS) order or through a Voluntary Placement Agreement (VPA). Out of-home care and placement are used interchangeably throughout these Standards.

The use of the VPA triggers out-of-home care requirements (including a permanency plan pursuant to s. [48.63](#)) in ongoing standards.

## **Appendix B: TSSF Contact Information**

For questions related to TSSF, please contact the DCF TSSF Coordinator:

[DCFTSSF@wisconsin.gov](mailto:DCFTSSF@wisconsin.gov)

TSSF Program Website:

<https://dcf.wisconsin.gov/cwportal/safety/tssf>

## Appendix C: TSSF Case Management Staffing Cost Plan

County/Tribe: \_\_\_\_\_

Calendar Year: 2026

The Department recognizes that each county and tribe will have its own methodology for calculating an hourly rate for child welfare case management staff, and integrating the extra effort required to support TSSF cases into its staffing plan. Line 3632C –Case Management Services should include case management services provided either by Local Child Welfare staff not enrolled in WiLearn or by contracted staff. **Any costs reported on this line should be excluded from the Children and Families Cost Pool SPARC lines 3301 and 3683. The costs should also not be reported on SPARC lines 3561, 3681 and 9681.** For more detailed information on these SPARC lines <https://dcfsparc.wisconsin.gov/codes>.

For auditing purposes, the Department requires participating TSSF counties and tribes to annually describe that methodology by responding to the following questions. Please retain documentation to support these calculations and make available as needed.

1. Indicate who will be providing case management services:

Local CW Agency Staff     Contracted Staff     Both

2. Please provide the hourly rate (or range of rates) for:

A. Case Management Services that will be used as the basis for reporting case management staffing costs on line 3645B

\$\_\_\_\_/hour; (or) Between \$\_\_\_\_ and \$\_\_\_\_/hour.

B. Contracted Agency that will be used as the basis for reporting case management staffing costs on line 3645C

\$\_\_\_\_/hour; (or) Between \$\_\_\_\_ and \$\_\_\_\_/hour.

3. Briefly describe the methodology used to develop this case management rate. Is it based on the CLTS methodology using child welfare staff as the basis for rate calculation, or some other case management rate methodology?

4. Are Agency Management, Support, and Overhead (AMSO) costs included in the case management hourly rate? \_\_\_\_\_

If so, what percentage of the hourly rate is AMSO? \_\_\_\_\_

If you are allocating AMSO based on FTE, what is the estimated AMSO cost per FTE? \_\_\_\_\_

How frequently are AMSO costs determined/re-calculated? \_\_\_\_\_

5. Will your county or tribe be reporting retroactive adjustments to the rate(s) listed in question #1 or the AMSO costs in question 3? If so, when and on what basis?

*\*Please retain a copy of this plan for your local child welfare agency's financial records.*

## Appendix D: TSSF Programmatic Report Schedule

Programmatic Annual Report		Cost Reporting
Due Date	Report Period	
March 1	January 1-December 31	Monthly in SPARC

# Appendix E: TSSF Reporting Decision Tree

## TSSF County Reporting Decision Tree

Additional context to reporting categories (Time-Limited Resources, Unlimited Time Resources, Case Management) can be found in the *TSSF Program and Fiscal Guide*.

TANF

What kind of TSSF cost are you reporting?

Time-Limited Resources

Unlimited Time Resources

SPARC 3632A

SPARC 3632B

Case Management

SPARC 3632C

Non-Case Management

If reported costs do not fit into any of these categories, please contact [DCFTSSF@wisconsin.gov](mailto:DCFTSSF@wisconsin.gov)

Match is automatically calculated and reported to SPARC 9632 (no county action required). Reimbursement from SPARC 3632 will be reimbursed at 90.11% to account for the deducted match amount.

How to Choose Which Reporting Line

## Appendix F: TSSF Dually Involved Youth/Families

### Purpose:

County and tribal human service agencies cannot control through which “door” families enter the child welfare system. Dually involved youth are those who have concurrent involvement with both the child protective services (CPS) and youth justice (YJ) system. It is critical for all child welfare professionals (CPS and YJ) to conduct a holistic needs assessment for youth with dual involvement to understand the interpersonal dynamics of the family system. This type of analysis could work to further enhance caregiver’s protective capacities which could increase overall family stability and limit possible re-entry into the system. Providing TANF for purposes of youth justice services remains unallowable. For families that are CPS and YJ involved, we are using their CPS eligibility to serve them with TSSF. Agencies cannot provide youth justice safety services with this TSSF TANF funding.

### General:

These two requirements must be met for dually involved youth to be enrolled in TSSF:

1. Youth is involved with both the CPS and YJ system (DPA, Delinquency order, or JIPS order) concurrently at the time of and throughout enrollment.
2. The second piece for considering eligibility is dependent on which agency is working with the family:
  - For Counties: There is an active, approved Protective Plan or Safety Plan in place due to the identification of safety threats (as part of a CPS case) that affect child(ren) or youth safety OR there is an active, approved Case Plan in place that addresses a CPS concern related to safety. The plan must be documented in eWiSACWIS.
  - For Tribes: The child or youth must be at risk of removal from the home.

### Agency Collaboration:

A critical component for dually involved youth is for CPS and YJ professionals to communicate, collaborate and match services to a safety need. Through agency collaboration, CW professionals can work with families to create long lasting dynamic change needed within the family unit regardless of which system is involved with the family. Agencies often find it beneficial to staff cases to ensure families receive the appropriate services to meet their needs. The following questions may be beneficial for agencies to consider during these types of staff meetings.

### Questions to consider when staffing a case:

- What does the family report they need?
- What type of community services are/have been put in place?
- What are the top underlying issues for the family?

After discussing the needs of the family, the agency would determine whether to use TSSF to reimburse for services on the Protective Plan or Safety Plan. At the end of each meeting, ask team members “What worked?” and “What did not?” to improve future collaboration.

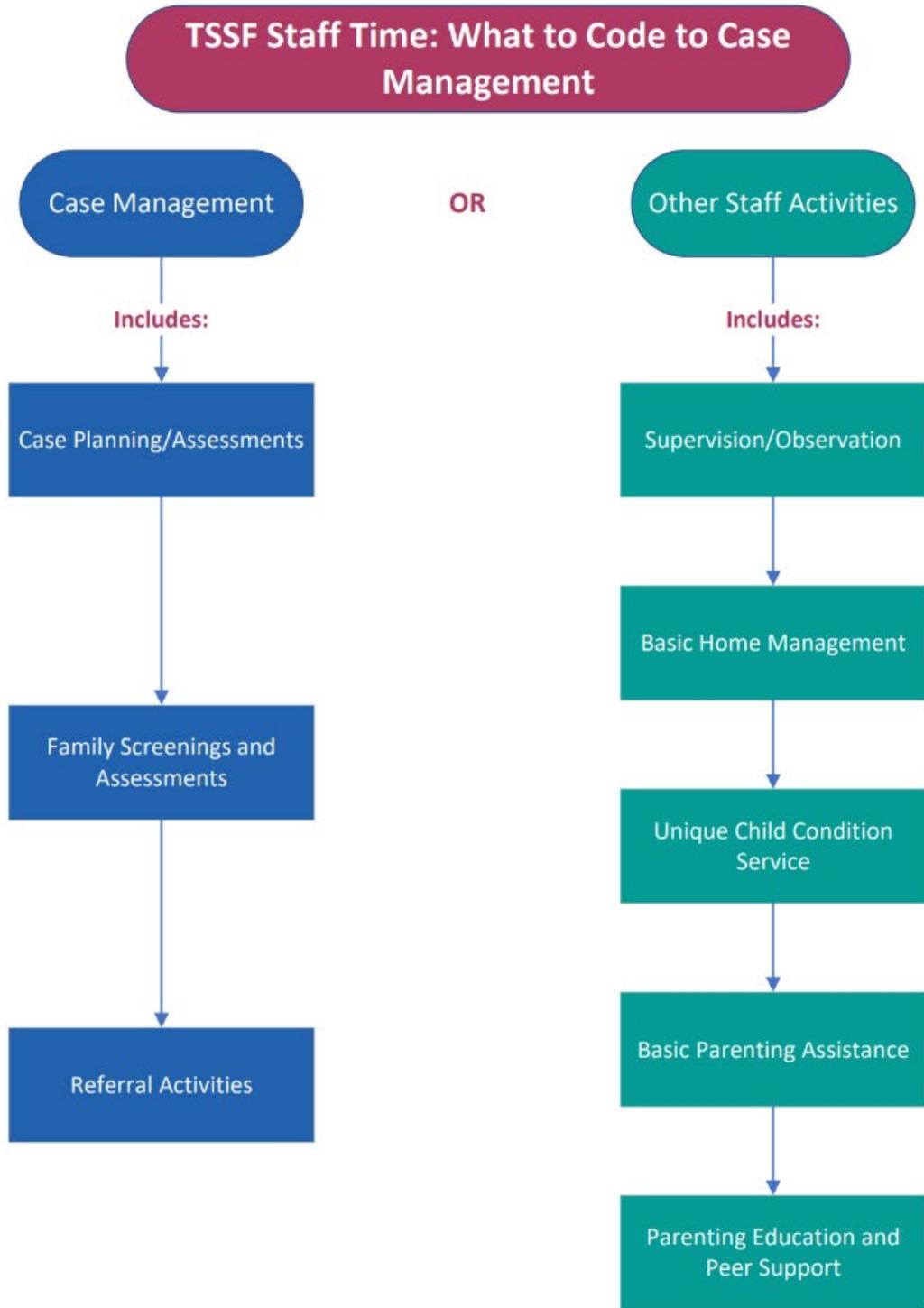
There are a wide variety of ways that services used to support a family when there is dual involvement can be reimbursed by TSSF. For example, TSSF could reimburse for services put in place to avoid an RCC placement or support a youth on a JIPS order when returning from an RCC when there are parental factors that may impact that transition. Another example for accessing these funds appropriately may be contracting services to help families access therapy sooner in familial sexual abuse cases. CW professionals could also further assess children subject to JIPS referrals due to a delinquent act before the age of 10. It is recommended to

assess which system (CPS and/or YJ) could appropriately serve and meet the service needs of children at this young age.

Note:

Agencies are recommended to thoroughly assess families with a holistic lens and they should continue to consider the potential consequence of bringing families deeper into the CPS and/or YJ system. In order to access TSSF services the identification of a safety threat or a need to ensure safety is required, and a threat should not be selected solely to be able to access TSSF services. Services are allowable for dually involved youth/families if they are characterized as helping caregivers manage safety of the youth in the home.

# Appendix G: TSSF Staff Time Flow Chart



Examples for each category can be found on page 2

<b>TSSF Staff Time: What to Code to Case Management</b>	
<b>Case Management</b>	<b>Other Staff Activities</b>
<p><b>Case Planning/Assessments</b></p> <ul style="list-style-type: none"> <li>• Meeting with the child, family, and service providers;</li> <li>• Writing and reviewing a safety, protective, or case plan.</li> <li>• Obtaining and reviewing information regarding psychological, developmental, behavioral, educational, and family-specific factors.</li> </ul>	<p><b>Supervision/Observation</b></p> <ul style="list-style-type: none"> <li>• Staff time to supervise and/or observe interactions between parents/caregivers and children and intervene if safety threats arise. This service is used when it is outside a regular meeting with the child, family and service providers.</li> </ul>
<p><b>Family Screenings and Assessments</b></p> <ul style="list-style-type: none"> <li>• Infant/postpartum assessment</li> <li>• Domestic abuse assessment screening</li> <li>• Perceived stress scale to identify caregiver stress</li> <li>• Ages and Stages questionnaire and child development screen; and HOME Inventory; and</li> <li>• Assessing or examining the CANS, resources, and existing support systems.</li> </ul>	<p><b>Basic Home Management</b></p> <ul style="list-style-type: none"> <li>• Staff time providing education around or assisting with budgeting, household schedules, and daily tasks or any other activities needed to maintain a household.</li> </ul>
<p><b>Referral Activities</b></p> <ul style="list-style-type: none"> <li>• Referring, contacting or scheduling child and/or family to services needed to ensure child safety</li> <li>• Assessing and evaluating the appropriateness of starting or continuing services;</li> <li>• Analyzing specialized assessments to inform any safety decisions</li> <li>• Meeting with appropriate case participants, foster parents, or others to determine the appropriateness of starting or continuing services</li> </ul>	<p><b>Unique Child Condition Service</b></p> <ul style="list-style-type: none"> <li>• Staff time providing services used to address safety issues specific to one child in the family that may be related to a special need or circumstance.</li> </ul>
	<p><b>Basic Parenting Assistance</b></p> <ul style="list-style-type: none"> <li>• Staff time providing education or support around a parent's inability to perform basic parenting and other life skills that affect child safety including but not limited to: <ul style="list-style-type: none"> <li>○ Feeding, bathing, and supervision or more specialized modeling to learn to care for a child's specific non-medical physical wellbeing and psycho-social needs.</li> </ul> </li> </ul>
	<p><b>Parenting Education and Peer Support</b></p> <ul style="list-style-type: none"> <li>• Staff time providing parenting education to teach parents appropriate parenting techniques and is used to enhance parental protective capacities.</li> <li>• Peer staff providing support and mentorship</li> </ul>