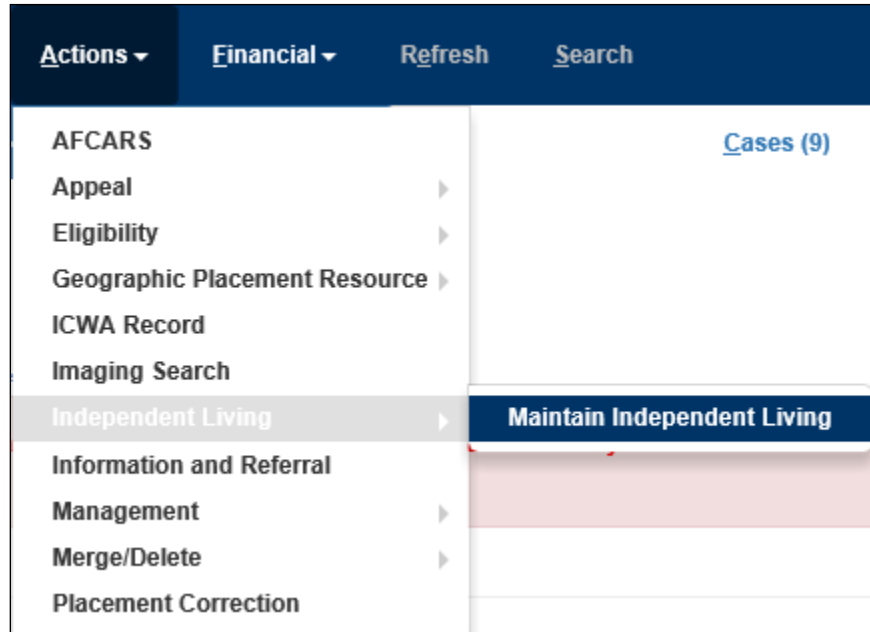


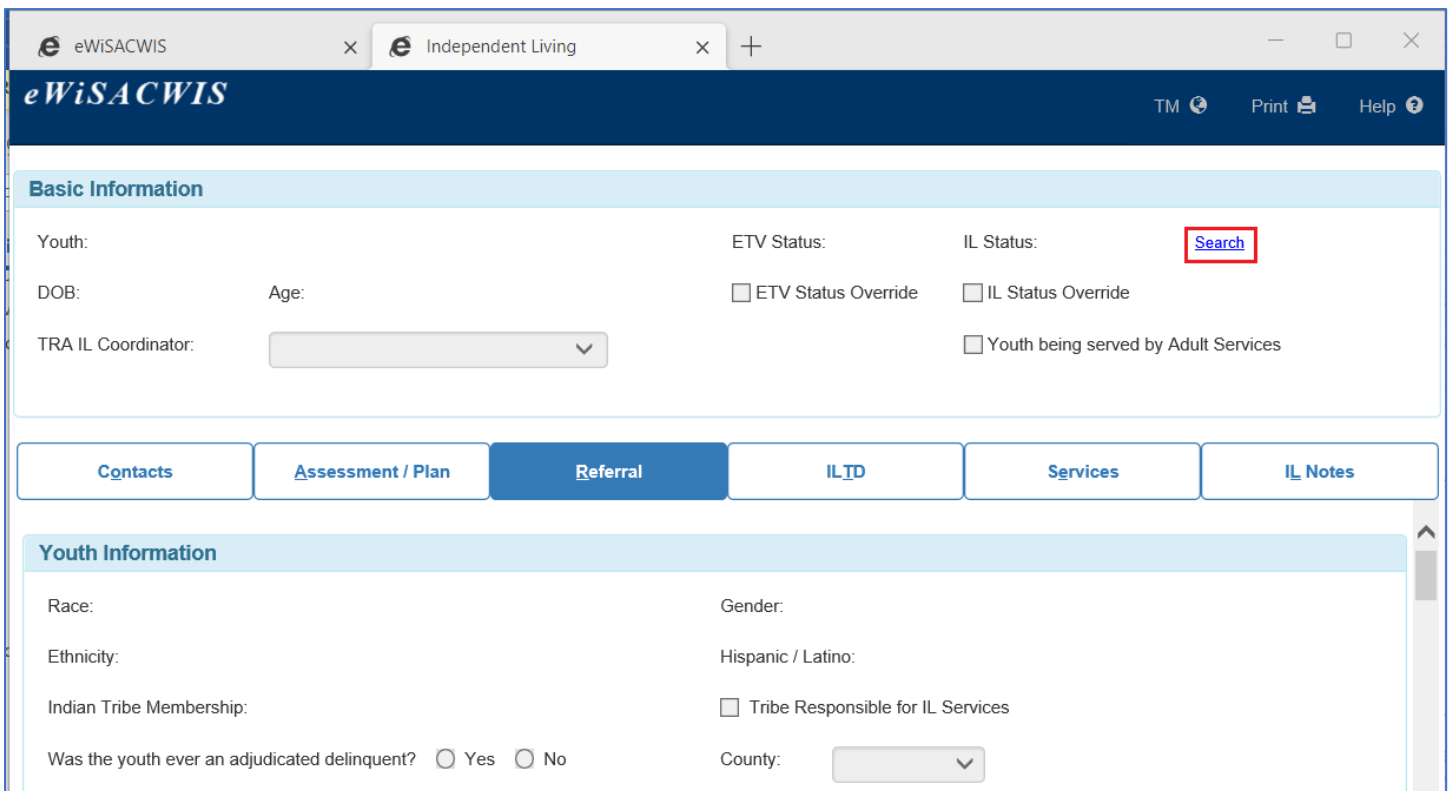
# Independent Living

**Note:** An assignment is not needed to the case to complete Independent Living (IL) work; however, additional security is required to access IL.

1. Click on Actions > Independent Living > Maintain Independent Living. This will open the Independent Living page.



2. Click the [Search](#) hyperlink to search for the youth.



eWiSACWIS

Basic Information

Youth: ETV Status: IL Status: [Search](#)

DOB: Age: ☐ ETV Status Override ☐ IL Status Override

TRA IL Coordinator:  ☐ Youth being served by Adult Services

Contacts Assessment / Plan Referral IL ID Services IL Notes

Youth Information

Race: Gender:

Ethnicity: Hispanic / Latino:

Indian Tribe Membership: ☐ Tribe Responsible for IL Services

Was the youth ever an adjudicated delinquent? ☐ Yes ☐ No County:

3. Enter the youth's name or Person ID and click Search. Select the youth by clicking the radio button next to the name and click Continue.

The screenshot displays the 'Person Search' interface. At the top, there's a header with 'Person Search', 'Print', and 'Help' links. Below this is a 'Search Criteria' section with input fields for 'Last Name' (Dove), 'First Name' (Blue), 'Person ID', 'SSN', 'DOB' (00/00/0000), 'Gender' (dropdown), 'Street', 'City' (dropdown), and 'ZIP Code'. Below the search criteria are checkboxes for 'Incl. AKA', a 'Search Precision' slider (Low, Med, High), and a 'Sort By' dropdown (Alpha). A 'Search' button is on the right. Below the search criteria is a 'Persons Returned' section showing one result: a radio button, a person icon, a blue hyperlink 'Dove, Blue ( 9226127 )', and the text '125 South Webster Street, Apt.#19D, Madison Female 05/05/2000 African American/Black'. At the bottom right are 'Create', 'Continue', and 'Close' buttons.

4. The Independent Living page will display the youth's name with his or her associated Person ID, DOB, age, ETV Status and IL Status. When the youth is enrolled in the Safe at Home program (i.e. the youth's current open Primary Residence address is a 'Primary Residence – Safe at Home' address) the Safe at Home visual indicator displays next to the youth's Name. To update any of the demographic information, click the youth's name (the blue hyperlink) to launch the Person Management page. There is also a 'TRA IL Coordinator' drop-down where the assigned Transition Resource Agency (TRA) worker for the youth can be selected. This drop-down becomes enabled once the Region Responsible for IL Services checkbox is checked on the Referral tab.

When the Independent Living page opens, it will default to the third tab, the Referral tab. There are nine sections on the Referral tab.

- **Youth Information:** A majority of the information in this section pre-fills from the youth's Person Management page. There are three user-selected questions and one user entered narrative field. An answer must be selected for "Was the youth ever an adjudicated delinquent?" in order to save the page.
- **Documents Obtained and Provided to Youth:** All of the checkboxes in this section are user-selected, except for 'Annual Credit Report' which is determined from the Case/Perm Plan. This section should be used to record what documents have been obtained and provided to the youth who will be aging out of care.
- **Current/Most Recent Placement:** This section displays the current or more recent placement information for the youth. There is also a user entered narrative field where users can record any relevant comments, including the provider's preferred method of communication.
- **Education:** Much of the information in this section pre-fills from the Education tab of the youth's Person Management page. If known, the user should indicate the youth's current

education status, post-secondary plans, whether or not the youth has applied to college, and which colleges the youth has applied to. There is also a user entered narrative field for general comments related to the youth's education.

- **Employment:** All information in this section is user entered.
- **Money Management:** All information in this section is user entered.
- **Health/Mental Health:** All information in this section is user entered.
- **Safety Considerations:** All information in this section is user entered.
- **Imaging:** This section displays any images with the category of Independent Living. Clicking the Insert button allows users to create an image with the category of Independent Living.

**Note:** When a youth reaches 17 ½, the 'Region Responsible for IL Services' checkbox becomes enabled. This is used to indicate when a youth is being served by the regional transition resource agency (TRA). The region number that displays is based on the county selected in the 'County' drop-down field.

The screenshot displays the eWiSACWIS web application interface for the 'Independent Living' section. The header includes the eWiSACWIS logo and navigation links (TM, Print, Help). The main content area is divided into several sections:

- Basic Information:** This section contains fields for Youth (Dove, Blue (9226127)), DOB (05/05/2002), Age (20), ETV Status (Not Eligible), IL Status (Not Eligible), and TRA IL Coordinator. There are also checkboxes for 'ETV Status Override', 'IL Status Override', and 'Youth being served by Adult Services'.
- Youth Information:** This section contains fields for Race (Black/African American, White), Gender (Female), Ethnicity (African American/Black), Hispanic / Latino (No), Indian Tribe Membership (N/A), and a checkbox for 'Region 3 Responsible for IL Services' which is checked. There is also a field for 'County' set to 'Milwaukee' and a text area for 'If relevant for service provision, expand upon your selection above (e.g. tribal affiliation, age of children, term in pregnancy, gender identity):'.
- Documents Obtained and Provided to Youth:** This section includes checkboxes for 'Annual Credit Report', 'Driver's License', 'Medical Records', and 'Social Security Card'.

The interface also features a navigation bar with tabs: Contacts, Assessment / Plan, Referral, ILTD, Services, and IL Notes. At the bottom, there is an 'Options' dropdown menu, a 'Go' button, and 'Save' and 'Close' buttons.

5. The first tab is the Contacts tab. This tab allows the user to document all potential contacts for a youth in order to help locate them after they have aged out of care. Due to the National Youth in Transition Database (NYTD) requirements, workers should have contact with youth at their 19<sup>th</sup> and 21<sup>st</sup> birthdays. There are four sections on this tab.
- **Contact Information:** Information in this section pre-fills from the youth's Person Management page. Any changes or updates that need to be made to address, phone, or e-mail information can be made by clicking on the youth's name (blue hyperlink) at the top of the page.
  - **Collateral Contacts:** This section will pre-fill with the Parent 1 and Parent 2 information of the youth's foster parents at the age of 17. If these are not appropriate, they can be deleted by clicking on the Delete hyperlink. Other collateral contacts can be added by clicking the Insert button and doing a person search. The role, phone number, and e-mail address should be entered for each contact.
  - **Adult Services Contact Information:** This group box displays when the 'Youth being served by Adult Services' checkbox is checked in the Basic group box. User selects the Insert button to record additional Adult Services contacts.
  - **Other Contacts:** In this section, the user can enter all other possible contacts for the youth by clicking on the Insert button and entering the person's name, role, phone number, and e-mail address.
  - **Comments:** This section contains a user entered narrative field where comments can be entered to record any additional information regarding contacts for the youth.

Independent Living - Internet Explorer

eWiSACWIS
TM
Print
Help

### Basic Information

Youth: [Dove, Blue \(9226127\)](#)
ETV Status: Not Eligible
IL Status: Not Eligible
[Search](#)

DOB: 05/05/2000
Age: 20
☐ ETV Status Override
☐ IL Status Override

TRA IL Coordinator: 
☒ Youth being served by Adult Services

[Contacts](#)
[Assessment / Plan](#)
[Referral](#)
[IL ID](#)
[Services](#)
[IL Notes](#)

### Contact Information

Address: 125 South Webster Street, 19D, Madison, WI 53702

Home Primary:                      Ext:

Cell Primary: (414)122-3232 Ext:

Alt Phone:                              Ext:

Email Primary: blue.dove@gmail.com

Additional Emails:

### Collateral Contacts

Add collateral contacts who already have an existing eWiSACWIS record. Use the "Insert" button to search each individual in the system and add them to this list. You may create a record for an individual who does not currently have a record in eWiSACWIS, but that is not required.

Name	Role	Phone	E-mail	
<a href="#">American, Annie M.</a>	Aunt	(608)123-1234	annieamerican@gmail.cc	<a href="#">Delete</a>

[Insert](#)

### Adult Services Contact Information

Name	Role	Phone	E-mail	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<a href="#">Delete</a>

[Insert](#)

Notes: [Details](#)

Options:

Text
Independent Living Plan
Independent Living Transition to Discharge Plan
Print all IL Services
Print all IL Notes
Voluntary Transition to Independent Living Agreement

[Go](#)

[Save](#)
[Close](#)

6. The second tab is the Assessment/Plan tab. This tab is used to document the date the Independent Living Assessment was completed and/or revised, along with a description of the process, tools, and methods used. The worker should also document the date the Independent Living Plan was completed and/or revised, along with the anticipated age and living situation at discharge from out of home care. Both the assessment and the plan must be completed when the youth is 14 and has been in out of home care for at least 6 months OR if the youth is 17 ½ and in out of home care for any period of time.

Independent Living - Internet Explorer

**eWiSACWIS** TM Print Help

**Basic Information**

Youth: [Dove, Blue \(9226127\)](#) ETV Status: Not Eligible IL Status: Not Eligible [Search](#)  
DOB: 05/05/2000 Age: 20 ☐ ETV Status Override ☐ IL Status Override  
TRA IL Coordinator:  ☒ Youth being served by Adult Services

[Contacts](#) **Assessment / Plan** [Referral](#) [ILID](#) [Services](#) [IL Notes](#)

**Independent Living Assessment**

Independent Living Assessment Completed: 02/15/2021 Independent Living Assessment Revised: 00/00/0000  
Description of the assessment process, tools and methods:

**Independent Living Planning**

Independent Living Plan Completed: 02/15/2021 Independent Living Plan Updated: 00/00/0000  
Anticipated age of discharge from out of home care:  
  
Anticipated living situation upon discharge from out of home care:

Options:

7. The fourth tab is the ILTD tab. This tab is used to document everything included on the Independent Living Transition to Discharge (ILTD) Plan. This plan must be done 90 days prior to the youth aging out of care.

**Note:** When a youth is 17 ½ and in an Out of Home Placement, the ILTD Plan will pre-fill to the Case/Permanency Plan.

There are 11 sections displayed on this tab by default. Two additional sections may display depending on the answers to the questions on the page.

- **Eligibility for Extension of Out-of-Home Care:** This section is used to document the youth's eligibility to extend foster care. The questions "Does the youth have an IEP?" and "Is the youth expected to graduate before age 19?" pre-fill based on the youth's Person Management record, along with the Anticipate Graduation Date. Clicking the Modify link will take the user directly to the Education tab on the youth's Person Management page.

The screenshot displays the eWiSACWIS web application interface for the ILTD (Independent Living Transition to Discharge) tab. The interface is organized into several sections:

- Basic Information:** Contains fields for Youth (Dove, Blue (9226127)), DOB (01/03/2004), Age (17), TRA IL Coordinator (dropdown), ETV Status (Not Eligible), IL Status (Not Eligible), and checkboxes for ETV Status Override, IL Status Override, and Youth being served by Adult Services (checked). A Search link is also present.
- Navigation Tabs:** Includes Contacts, Assessment / Plan, Referral, ILTD (active), Services, IL Notes, and Outcomes.
- Eligibility for Extension of Out-of-Home Care:** Features removal and discharge dates, updated by (Caitlin C. Cake), and a date (02/14/2020). It includes three questions with radio button answers: "Does the youth have an IEP?", "Is the youth expected to graduate before age 19?", and "Will the youth be a full-time student...". A Modify link is provided. A table below shows a "Determination of Eligibility" entry dated 08/08/2018 by Caitlin C. Cake with an Edit link.
- Transition Planning:** Shows completion and update dates for the ILTD plan, anticipated discharge date (09/01/2021), anticipated age at discharge (17), and a dropdown for the desired method of contact following discharge.
- Transition Meetings:** Includes a table with columns for Date, Participants, Roles, and Relationship to Youth. A meeting is listed for 02/16/2021. Links for "Add/Edit Participants" and "Delete Meeting" are provided, along with an Insert button.

- **Youth Decision:** If the youth is found eligible for extension of out-of-home care based on the answers to the three eligibility questions, the status of 'The child is eligible to continue care up to graduation or age 21 whichever occurs first' displays and the Youth Decision section will appear. This section is used to document when the youth was made aware of their options for remaining in care and to document the youth's decision to remain in care on a court order, under a voluntary agreement, or to discharge from care. If the youth chooses to discharge from care, additional fields related to the Transition to Discharge Hearing will appear.

Independent Living - Internet Explorer

**eWiSACWIS** TM Print Help

**Basic Information**

Youth: [Dove, Blue \(9226127\)](#) ETV Status: Not Eligible IL Status: Not Eligible [Search](#)  
 DOB: 01/03/2004 Age: 17 ☐ ETV Status Override ☐ IL Status Override  
 TRA IL Coordinator:  ☒ Youth being served by Adult Services

[Contacts](#) [Assessment / Plan](#) [Referral](#) **[ILTD](#)** [Services](#) [IL Notes](#) [Outcomes](#)

**Eligibility for Extension of Out-of-Home Care**

Removal Date: 11/01/2006 Discharge Date: Updated By: Caitlin C. Cake Date: 02/14/2020  
☒ Yes ☐ No Does the youth have an IEP? [Modify](#)  
☐ Yes ☒ No Is the youth expected to graduate before age 19? [Details](#) Anticipated Graduation Date: 06/15/2023 [Modify](#)  
☒ Yes ☐ No Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?  
 The youth is eligible to continue care up to graduation or age 21 whichever occurs first.

Type	Date	Worker	Document		
Determination of Eligibility	08/08/2018	Caitlin C. Cake	<a href="#">Edit</a>		
		Caitlin C. Cake		<a href="#">Delete</a>	<a href="#">Imaging Search</a>

**Youth Decision**

☒ Yes ☐ No The youth has been made aware of options for remaining in care. Date: 00/00/0000  
 Updated By:  
 The youth chooses to:  
☐ Remain in care under court order.  
☐ Remain in care under voluntary agreement.  
☐ Discharge from care.  
 The current dispositional court order ends at:  
☐ Age 18  
☐ Age 19  
☐ Anticipated Graduation Date: 06/15/2023 [Modify](#)



If the youth decides to remain in care, a new row will appear to attach the scanned court order or voluntary agreement documents. Select the Type from the drop-down and click the Imaging Search hyperlink to search out or create the image. The Determination of Eligibility template is also available. This template will pre-fill the information from the Eligibility for Extension of Out-of-Home Care section and the Youth Decision section. Information on how to appeal the eligibility decision is listed at the bottom of the template.

**Note:** The eligibility is not considered “final” until an image has been attached. Attaching the document will freeze the eligibility for the youth.

The screenshot shows the eWiSACWIS web application interface. The top navigation bar includes the logo and links for TM, Print, and Help. The main content area is divided into several sections:

- Basic Information:** Displays youth details (Dove, Blue, 9226127), DOB (01/03/2004), Age (17), and TRA IL Coordinator. It also shows ETV Status (Not Eligible), IL Status (Not Eligible), and checkboxes for ETV Status Override, IL Status Override, and Youth being served by Adult Services.
- Navigation Tabs:** Contacts, Assessment / Plan, Referral, **IL ID** (active), Services, IL Notes, and Outcomes.
- Eligibility for Extension of Out-of-Home Care:**
  - Removal Date: 11/01/2006, Discharge Date: , Updated By: Caitlin C. Cake, Date: 02/14/2020.
  - Questions with radio button options:
    - Does the youth have an IEP? (Yes selected)
    - Is the youth expected to graduate before age 19? (No selected)
    - Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18? (Yes selected)
  - Anticipated Graduation Date: 06/15/2023.
  - Text: "The youth is not eligible to continue care up to graduation or age 21 whichever occurs first."
  - Hyperlinks: [Modify](#), [Details](#), [Create Appeal](#).
  - Document Attachment Table (highlighted with a red box):**

Type	Date	Worker	Document		
Determination of Eligibility	08/08/2018	Caitlin C. Cake	<a href="#">Edit</a>		
		Caitlin C. Cake		<a href="#">Delete</a>	<a href="#">Imaging Search</a>
- Youth Decision:**
  - Radio button options: Yes (selected), No.
  - Text: "The youth has been made aware of options for remaining in care."
  - Date: 00/00/0000.
  - Updated By:
  - The youth chooses to:
    - ☐ Remain in care under court order.
    - ☐ Remain in care under voluntary agreement.
    - ☐ Discharge from care.
  - The current dispositional court order ends at:
    - ☐ Age 18
    - ☐ Age 19
    - ☐ Anticipated Graduation Date: 06/15/2023 [Modify](#)

If a youth is not eligible for an extension of out-of-home care, and the youth appeals the decision, the appeal results can be documented by selecting the Create Appeal hyperlink.

### Eligibility for Extension of Out-of-Home Care

Removal Date: 11/01/2006
Discharge Date: .
Updated By: Caitlin C. Cake
Date: 02/14/2020

☒ Yes ☐ No Does the youth have an IEP? [Modify](#)

☐ Yes ☒ No Is the youth expected to graduate before age 19? [Details](#)

Anticipated Graduation Date: 06/15/2023 [Modify](#)

☐ Yes ☒ No Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?

The youth is eligible to continue care up to graduation or age 21 whichever occurs first. [Create Appeal](#)

Type	Date	Worker	Document		
Determination of Eligibility	08/08/2018	Caitlin C. Cake	<a href="#">Edit</a>		

In order to launch the “Notice of Decision of Appeal of Eligibility” template on the Appeal page, first make selections for each column. Then select the Reasons hyperlink and choose a reason. Lastly, click Text under the Appeal Document column.

Extension of Out of Home Care - Appeals
Resource
TM
Print
Help

#### Person Information

Name: [Dove, Blue \(9226127\)](#)
DOB: 01/03/2004

#### Appeal Record

Appeal Of	Appeal To	Appeal Date	Decision	Decision Date	Appeal Document
Eligibility Determination	Agency Director	02/16/2021	Upheld	00/00/0000	<a href="#">Text</a> <a href="#">Reason(s)</a> <a href="#">Delete</a>

Supporting Documentation Date:

[Imaging Search](#)

Insert

Save
Close

Edit Document

Close

### Notice of Decision of Appeal of Eligibility

**Use of form:** This form is used to notify a child or their guardian of the decision on their appeal of an eligibility decision for extension of out-of-home care. Personally identifiable information on this form is used to verify the information necessary for providing benefits and will be used only for this purpose.

Name and Address Below:

Today's Date: 07/27/2020

#### Child Information

Dove, Blue  
125 South Webster Street, Apt. 19D  
Madison, WI 53702

Name: Dove, Blue  
Birthdate: 05/05/2000  
18th Birthdate: 05/05/2018  
Case ID Number: 9222764

This notice is to inform you that the Request to Appeal the Eligibility Determination has been Upheld due to one or more of the following reason(s):

- ☐ The child is eligible for extension of out-of-home care and the agency will enter a Voluntary-Transition-to-Independent-Living Agreement with the child or guardian.
- ☐ The child was not in an out-of-home care placement on or after 8/1/2014.
- ☐ The child did not age out of out-of-home care on or after their 18th birthday.
- ☐ The child is not under the age of 21 years.
- ☒ The child is not a full-time student at a secondary school or its technical or vocational equivalent.
- ☐ The child does not have an individualized education plan under s. 115.787 Wis. Stats.

You or your guardian may appeal the eligibility determination within 10 days of this notice in accordance with rules and procedures of the state's fair hearing and appeal process.

A request for a Hearing shall be in writing addressed to the Division of Safety and Permanence Administrator at:

Extended Out-of-Home Care Panel Division of Safety and Permanence  
201 E. Washington Ave.  
P.O. Box 8916  
Madison, WI 53701  
or by email to [OHCEExtensionAppeal@wisconsin.gov](mailto:OHCEExtensionAppeal@wisconsin.gov)

- **Subsequent Eligibility for Extension of Out-of-Home Care:** If a youth who is eligible for an extension discharges from out-of-home care, and later returns to care, the Subsequent Eligibility for Extension of Out-of-Home Care section will appear to document that the youth remains eligible. A signed voluntary agreement will need to be attached via Imaging Search. Like the initial extension, a Determination of Eligibility template is available. Select the Text hyperlink to launch the document. If the youth does not qualify for the subsequent extension, the results of an appeal can also be documented in the same way as the initial extension.

**Note:** This eligibility must be completed in order to approve a placement in eWisacwis for anyone over the age of 19.

**Subsequent Eligibility for Extension of Out-of-Home Care**

Removal Date:      Discharge Date:      Updated By: Caitlyn C. Cake      Date: 02/04/2021      [Delete](#)

☒ Yes    ☐ No    Does the youth have an IEP?      [Modify](#)

☒ Yes    ☐ No    Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?

The youth is eligible to continue care up to graduation or age 21 whichever occurs first.

Type	Date	Worker	Document		
Determination of Eligibility ▼	02/04/2021	Caitlyn C. Cake	<a href="#">Edit</a>		
Request to Determine Eligibility ▼					<a href="#">Imaging Search</a>
Voluntary Transition to IL Agreement ▼					<a href="#">Imaging Search</a>

Insert

- **Transition Planning:** This section is used to document the date the ILTD plan was completed and/or updated, as well as information about the youth's anticipated discharge, follow-up appointments, and methods of contact.

**Note:** A date must be entered for the Independent Living Transition to Discharge Plan Completed field in order for the plan to be considered complete and the corresponding tickler deleted.

- **Transition Meetings:** This section is used to document information about any transition meetings that occur. The date of the meeting, the participants, their roles, and their relationship to the youth should be recorded. Click on the Insert button to add a row where information for each meeting can be entered. Click on the Delete Meeting hyperlink to remove the row.

**Note:** At least one IL transition meeting must be held 90 days before a youth turns 18. At a minimum, meetings should include the youth, the ongoing worker, a TRA representative, and adult supporters.

Independent Living - Internet Explorer

**eWiSACWIS** TM Print Help

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**Basic Information**

Youth: [Dove, Blue \(9226127\)](#) ETV Status: Not Eligible IL Status: Not Eligible [Search](#)  
 DOB: 01/03/2004 Age: 17 ☐ ETV Status Override ☐ IL Status Override  
 TRA IL Coordinator:  ☒ Youth being served by Adult Services

[Contacts](#) [Assessment / Plan](#) [Referral](#) **[IL ID](#)** [Services](#) [IL Notes](#) [Outcomes](#)

---

**Eligibility for Extension of Out-of-Home Care**

Removal Date: 11/01/2006 Discharge Date: Updated By: Caitlin C. Cake Date: 02/14/2020  
☒ Yes ☐ No Does the youth have an IEP? [Modify](#)  
☐ Yes ☒ No Is the youth expected to graduate before age 19? [Details](#) Anticipated Graduation Date: 06/15/2023 [Modify](#)  
☒ Yes ☐ No Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?  
 The youth is not eligible to continue care up to graduation or age 21 whichever occurs first. [Create Appeal](#)

Type	Date	Worker	Document		
Determination of Eligibility	08/08/2018	Caitlin C. Cake	<a href="#">Edit</a>		
		Caitlin C. Cake		<a href="#">Delete</a>	<a href="#">Imaging Search</a>

---

**Transition Planning**

Independent Living Transition to Discharge Plan Completed: 00/00/0000 Independent Living Transition to Discharge Plan Updated: 00/00/0000  
 Date of Youth's Anticipated Discharge:  Anticipated Age at Discharge:  
 Date of follow-up appointment following discharge: 00/00/0000  
 Desired method of contact following discharge: Other (newsletter, Facebook, etc.)  Facebook

---

**Transition Meetings**

Date	Participants	Roles	Relationship to Youth		
02/15/2019	Blue Dove	Youth	N/A	<a href="#">Add/Edit Participants</a>	<a href="#">Delete Meeting</a>

[Insert](#)

When the Add/Edit Participants hyperlink is clicked, a pop-up window opens with the youth pre-filled as a meeting participant. Click on the Insert button to add another participant. Select the participant's role. If the role of care provider, CASA/Guardian ad Litem, county representative, or regional IL worker are selected, a Search hyperlink will appear to allow the user to search out a person with an existing eWiSACWIS record. If any of the other roles are selected, the Participant Name is user entered.

- Click on the Delete hyperlink to remove a row.
- Click on the Save button to save the participant information.
- Click on the Close button to close the pop-up window and return to the ILTD tab of the Independent Living page.

Transition Meeting Participants
Print
Help

Participants

Below, list the individuals present at the transition meeting, as well as their relationship to the youth.

- If the youth is not present at the meeting (e.g. missing from care), delete the row with the "Youth" role below.
- Some role selections (e.g. County Representative) will require you to search for a specific individual in eWiSACWIS and add them to this list via their existing record. You can create a record for the attendee(s) in such a role(s) if he or she does not already have a record in eWiSACWIS.
- Other role selections require you to manually enter the individual's name.
- For role selections manually entered, provide more information in the "Relationship to Youth" field to explain their connection to that youth (e.g. you may choose three relatives and specify aunt, uncle, and grandmother).

Role	Relationship to Youth	Participant Name		
Youth	N/A	<a href="#">Blue Dove (9226127)</a>	N/A	<a href="#">Delete</a>
<div> <div>Care provider</div> <div>CASA/Guardian ad Litem</div> <div>County representative</div> <div>Education professional</div> <div>Other</div> <div>Regional IL worker</div> <div>Relative</div> <div>Supportive adult</div> </div>			N/A	<a href="#">Delete</a>

Insert

Save
Close

The remaining eight sections on this tab are used for documenting progress on goals relating to Housing, Health, Education, Mentors and/or Other Supportive Adults Identified, Opportunities for Continuing Support Services, Income, Employment Services and Workforce Support, and Other Areas of Focus.

Independent Living - Internet Explorer

**eWiSACWIS** TM Print Help

### Basic Information

Youth: [Dove, Blue \(9226127\)](#) ETV Status: Not Eligible IL Status: Not Eligible [Search](#)

DOB: 05/05/2002 Age: 18 ☐ ETV Status Override ☐ IL Status Override

TRA IL Coordinator:

[Contacts](#) [Assessment / Plan](#) [Referral](#) **ILID** [Services](#) [IL Notes](#)

### Housing

Goal: Safe and secure living environment upon leaving care.

Anticipated location youth will transition to:

Address youth will transition to:

Housing Resource (if applicable):

Telephone Number at Housing Resource:

Description of Activities to Achieve Goal:

8. The fifth tab is the Services tab. The Services tab displays the Independent Living services provided to the youth. Click the Insert button to add services to the page. This will open the Maintain Independent Living Services page. To print a list of all services/activities entered, select 'Print all IL Services' from the Options drop-down.

The screenshot shows the 'eWiSACWIS' web application interface. At the top, there's a navigation bar with 'TM', 'Print', and 'Help' icons. Below this is a 'Basic Information' section with fields for Youth (Dove, Blue (9226127)), DOB (05/05/2002), Age (18), TRA IL Coordinator (a dropdown menu), ETV Status (Not Eligible), IL Status (Not Eligible), and checkboxes for ETV Status Override, IL Status Override, and Youth being served by Adult Services (checked). A 'Search' link is also present. Below the basic information is a tabbed interface with 'Contacts', 'Assessment / Plan', 'Referral', 'IL ID', 'Services' (selected), and 'IL Notes'. The 'Services' tab displays a table titled 'Independent Living Services' with columns: Service Category, Service / Activity, Provider / Responsible Person, Begin Date, End Date, and two action links (Edit and Delete). The table contains two rows: one for 'Budget and financial management' (Learning to manage a bank account, Foster Parent, 12/15/2017) and one for 'Financial Assistance - DCF Scholarship' (DCF Scholarship, University of Wisconsin - Milwaukee, 12/15/2017). An 'Insert' button is located at the bottom right of the table. At the bottom of the page, there's an 'Options' dropdown menu, a 'Go' button, and 'Save' and 'Close' buttons.

9. In the Services/Activities section is a drop-down to select the IL Service Category. The Service Category Definitions hyperlink can be selected to see the definitions for each of these federal reporting categories. The IL Service Category, Begin Date, County/Agency Providing Service/Activity, Service/Activity, and Provider/Responsible Person are required fields. The End Date is not required; however, an End Date must be entered in order to make a service or activity historical on the Independent Living Plan template. The County/Agency Providing Service/Activity defaults to the county or agency of the worker entering the service/activity. This field cannot be changed once the page has been saved. To insert more services/activities, click the Insert button. Click the Save button to save the service/activity.

**Note:** When the IL Service Category is "Financial assistance - DCF Scholarship," three additional fields display: Awarded Amount, Amount Paid, and Institution. The Awarded Amount and Institution fields are required. An e-mail message is sent when a DCF Scholarship has been awarded. Any Independent Living Coordinators for the County providing the Service/Activity and county workers identified on the IL DCF Scholarship automated message distribution list will be notified.

When the IL Service Category is "Financial assistance - Education Training Voucher (ETV)," three additional fields display: Institution, Amount, and Type. All three fields are required.



When the IL Service Category is “Financial assistance - room and board,” an additional field displays: Total Amount. The amount is not required until an end date is entered for the service/activity.

The Goal/Service/Activity History Log section is used to document updates for each service/activity provided to the youth. The Date and Action Taken fields are user entered. The Worker and County fields pre-fill with the name and county of the worker that clicked on the Insert button.

Maintain Independent Living Services
Print
Help

Name
Youth: Dove, Blue ( 9226127 )
DOB: 05/05/2002
Gender: Female
[Service Category Definitions](#)

Services/Activities
IL Service Category:
Budget and financial management
Begin Date:
02/16/2021
End Date:
00/00/0000
County/Agency Providing Service/Activity:
Milwaukee
Service/Activity:
Learning to manage a bank account
Provider/Responsible Person:
Foster Parent
Comments:
Foster parent will work with Blue to open a bank account and teach Blue how to manage a bank account.

Goal/Service/Activity History Log

Staff are not expected to work on or discuss all IL domains during every contact, and may not update every service every time. Some services may be more substantial than others and need more time to complete. Other services may take priority. In the boxes below, provide updates for a given service to allow for easy review of the current status of a youth's service provision.

Date	Worker	County	Action taken	
00/00/0000	Caitlin C. Cake	Milwaukee		<a href="#">Delete</a>

Insert

Save

Close

10. Once the information is saved on the Maintain Independent Living Services page, the information is summarized on the Services tab.

**Note:** There are several e-mails to remind workers to close IL Services. These e-mails will be sent to the worker who entered the service, to the IL Coordinator, and anyone else the county has identified on the corresponding automated message distribution list.

- “IL Service - Open for a Year” is sent as a reminder once an IL Service reaches a year old. The service will remain open if no action is taken.
- “IL Service Ended – Youth Turned 18” is sent when a youth turns 18 and has open IL Services. This ends IL services and they would need to be re-entered if they are continuing to be provided after 18.
- “IL Service Ended – Youth Turned 21” is sent when a youth turns 21 and has open IL Services. This ends IL services.
- “IL Service Ended – Youth Turned 23” is sent when a youth turns 23 and has open IL Services. This ends IL services.

11. The sixth tab is the IL Notes tab. This tab is used to document Independent Living specific notes about the youth. Click on the Insert button to add a new IL Note. When the Insert button is clicked, the IL Notes page opens. To print a list of all IL Notes, select ‘Print all IL Notes’ from the Options drop-down.

The screenshot displays the eWiSACWIS web application interface. At the top, the browser title is "Independent Living - Internet Explorer" and the page header is "eWiSACWIS". Navigation links include "TM", "Print", and "Help".

The "Basic Information" section contains the following fields:

- Youth: [Dove, Blue \(9226127\)](#)
- DOB: 05/05/2002
- Age: 18
- ETV Status: Not Eligible
- IL Status: Not Eligible
- Search button
- ETV Status Override checkbox
- IL Status Override checkbox
- TRA IL Coordinator: [Dropdown menu]
- ☒ Youth being served by Adult Services

The navigation tabs are: [Contacts](#), [Assessment / Plan](#), [Referral](#), [IL ID](#), [Services](#), and **IL Notes**.

The "IL Notes" section features a table with the following data:

Date of Contact	Worker	Note Type		Contact Type	Status
<a href="#">02/15/2019</a>	Caitlin C. Cake	Employment	<a href="#">Details</a>	Face-to-Face	Finalized

An "Insert" button is located below the table.

At the bottom, there is an "Options:" dropdown menu, a "Go" button, and "Save" and "Close" buttons.

There are three sections on the IL Notes page.

- **Basic:** This section contains the youth's name, the worker who created the note, the note ID, the date and time the note was entered, and a Note Finalized checkbox.
- **IL Note Information:** This section contains detailed information about the note, including the date of contact, the contact type, the note type, the begin time, and the end time. The Date of Contact, Contact Type, and Note Type fields are required.
- **Narrative:** This section contains the text of the IL note. This is a required field.

Once the information is saved on the IL Notes page, the information is summarized on the IL Notes tab.

The screenshot displays the 'IL Notes' form interface. At the top, a dark blue header bar contains the title 'IL Notes' on the left and 'Print' and 'Help' icons on the right. Below the header, the form is organized into three main sections, each with a light blue header bar: 'Basic Information', 'IL Note Information', and 'Narrative'. The 'Basic Information' section includes fields for 'Youth: Dove, Blue ( 9226127 )', 'Worker: Cake, Caitlin, C.', 'IL Note ID:', and 'Date Entered: 02/16/2021 01:55 PM', along with a 'Note Finalized' checkbox. The 'IL Note Information' section contains 'Date of Contact' (00/00/0000), 'Contact Type' (a dropdown menu), 'Begin Time' (00:00 AM/PM), 'End Time' (00:00 AM/PM), and 'Note Type' (a dropdown menu with options: Education, Employment, Financial, Health/well-being, Healthy relationships, Housing, Other, Permanent connections, Transportation). A note at the bottom of this section states 'Hold down the 'Ctrl' key for multi-selection'. The 'Narrative' section features a large text area with a placeholder 'IL Note Details' and a small icon in the bottom right corner. At the bottom right of the form, there are 'Save' and 'Close' buttons.

IL Notes		Print	Help
<b>Basic Information</b>			
Youth: Dove, Blue ( 9226127 )	Worker: Cake, Caitlin, C.	<input type="checkbox"/> Note Finalized	
IL Note ID:	Date Entered: 02/16/2021 01:55 PM		
<b>IL Note Information</b>			
Date of Contact:	00/00/0000	Contact Type:	▼
Begin Time:	00:00 <input type="radio"/> AM <input type="radio"/> PM		
End Time:	00:00 <input type="radio"/> AM <input type="radio"/> PM	Note Type:	Education Employment Financial Health/well-being Healthy relationships Housing Other Permanent connections Transportation
Hold down the 'Ctrl' key for multi-selection			
<b>Narrative</b>			
IL Note Details			
Save Close			

12. The final tab of the Independent Living page is the Outcomes tab. The Outcomes tab will only display when the youth is eligible to take the NYTD survey. A youth is eligible when they are placed in out of home care after their 17<sup>th</sup> birthday. UW Survey Center has been contracted to administer the survey. Youth will receive an e-mail with instructions. The contact info for UW Survey Center is listed on the page.

Independent Living - Internet Explorer

**eWiSACWIS** TM Print Help

**Basic Information**

Youth: [Dove, Blue \(9226127\)](#) ETV Status: Not Eligible IL Status: Not Eligible [Search](#)

DOB: 01/03/2004 Age: 17 ☐ ETV Status Override ☐ IL Status Override

TRA IL Coordinator:  ☒ Youth being served by Adult Services

[Contacts](#) [Assessment / Plan](#) [Referral](#) [ILTD](#) [Services](#) [IL Notes](#) **Outcomes**

For more information contact the University of Wisconsin Survey Center at 1-800-291-8624 and ask for extension 9991.

**NYTD 17 Survey**

Due Date: 02/17/2021 Completed Date: Outcomes: N/A

☐ Youth did not complete the survey Reason:  Worker: Updated:

Options:

13. There are several reasons why a youth may not complete the survey. To document this, check the checkbox the 'Youth did not complete the survey,' and select a reason why the youth did not complete it from the Reason drop-down. This also satisfies the NYTD requirements.

14. Once a completed survey has been received, the Completed Date will indicate the date the youth completed the survey. The Outcomes field will either show a [View](#) hyperlink or N/A. Clicking the [View](#) hyperlink will launch the survey the youth took. If N/A is displayed, this indicates the youth did not give permission for their answers to be shared.

**Note:** There can be up to a two-week wait time for eWiSACWIS to receive the youth survey.

Youth who complete a survey at age 17 will also be asked to take the survey at age 19 and 21. The NYTD 19 Survey and NYTD 21 Survey sections will appear when the respective reporting period is reached.

**Note:** If the checkbox, "Youth did not complete the survey" is selected for the NYTD 17 Survey, or the survey was not completed on time, the NYTD 19 & 21 Survey sections will not appear.

**National Youth in Transition Survey for Wisconsin Youth Age 17**

Foster Club Profile ID: 9376707

Date of Survey: 10/21/2010

Date of Birth: 10/05/1993

First Name: Youth MI: Last Name: Example Suffix :

Q1: Address: Street Number: 777 Street Name: 1st Ave Apt # :

City: Madison State: WI Zip Code: 55555

Phone: (608)777-7777 Email: youth\_example@email.com

**EMPLOYMENT**

Q2. Currently are you employed full-time?

☐ Yes

☒ No

☐ Declined

Q3. Currently are you employed part-time?

☐ Yes

☒ No

☐ Declined

15. The Options drop-down contains the Independent Living Plan template, the Independent Living Transition to Discharge template, and the Voluntary Transition to Independent Living Agreement template along with the options to Print all IL Services (if any exists) and Print all IL Notes (if at least one exists). All options can be selected from any tab on the Independent Living page.

Options:

- Text
- Independent Living Plan
- Independent Living Transition to Discharge Plan
- Print all IL Services
- Print all IL Notes
- Voluntary Transition to Independent Living Agreement

Go

Save Close

100%

16. Information from the Independent Living page will pre-fill and not be editable on either the Independent Living Plan or Independent Living Transition to Discharge Plan templates.

BIRT PDF Document - Internet Explorer

**eWiSACWIS**

Close

### INDEPENDENT LIVING AND TRANSITION PLANNING

Name - Youth Dove, Blue		Birthdate 05/05/2000	Gender Female
<b>Independent Living Assessment</b>			
Date Completed 12/15/2017		Date Revised	
Description of the assessment process, tools, and methods Describe...			
<input type="checkbox"/> Yes <input type="checkbox"/> No   Did the youth receive the Handbook for Youth in Foster Care which describes the rights listed in § 48.38(4)(h)7./ §938.38(4)(h)? Date received:			
<b>Independent Living and Transition Plan</b>			
Independent Living Plan Completed 12/15/2017		Independent Living Plan Updated	
Independent Living Transition to Discharge Plan Completed 12/15/2017		Independent Living Transition to Discharge Plan Updated	
Anticipated age of discharge from out of home care Describe...			
Anticipated living situation upon discharge from out of home care Describe...			
<b>Current Services / Activities</b>			
Independent Living Service Category Budget and financial management			
Service / Activity Learning to manage a bank account	Begin Date 12/15/2017	End Date	
Provider / Responsible Person Foster Parent			
Specifically Explain Goal / Service / Activity Foster parent will work with Blue to open a bank account and teach Blue how to manage a bank account.			
Independent Living Service Category Financial Assistance - DCF Scholarship			
Service / Activity DCF Scholarship	Begin Date 12/15/2017	End Date	

Information will pre-fill to the Voluntary Transition to Independent Living Agreement template, but some information is still required to be entered on the template.







Voluntary Transition to Independent Living Agreement			
<p><b>Use of form:</b> This voluntary agreement to extend care may be used for a person who is eligible under Wisconsin Statute Section 48.366 or 938.366 for Extended Out-of-Home Care and is placed in an approved foster home, group home, residential care center for children and youth, in the home of an approved relative other than a parent, or in an approved supervised independent living arrangement. A person who is eligible under Wisconsin Statute Section 48.366 or 938.366 for Extended Out-of-Home Care, or the person's authorized guardian, and the appropriate agency which was primarily responsible for providing services to the person under a prior order or the appropriate agency where the person resides may enter into a transition-to-independent-living agreement under which the person continues in out-of-home care until age 21 if the person continues to be a full-time student at a secondary school or its vocational or technical equivalent under an individualized education program, meets all other eligibility requirements and conditions of the agreement, and the agency provides services to the person to assist him or her in transitioning to independent living.</p>			
I	Blue Dove	, born on	05/05/2000
	(First, MI, Last)		(mm/dd/yyyy)
herby request	Bureau of Milwaukee Child Welfare	to continue to live or place me into:	
	(County Department, BMCW or DCF)		
<input checked="" type="checkbox"/>	foster home	<input type="checkbox"/>	treatment foster home
<input type="checkbox"/>	relative home	<input type="checkbox"/>	group home
<input type="checkbox"/>	Supervised Independent Living	<input type="checkbox"/>	RCC
Placement dates are from		to	
	(mm/dd/yyyy)		(mm/dd/yyyy)
<p>I understand that I or my authorized guardian may terminate this agreement at any time before my 21<sup>st</sup> birthday.</p> <p>I understand that a Permanency Plan, under s. 48.38 or s. 938.38 Wis. Stats., will be prepared and reviewed by a court and that I will be involved in the development and review of my Permanency Plan.</p> <p>I agree to:</p> <ul style="list-style-type: none"> <li>Maintain enrollment as a full-time student at a secondary school or its technical or vocational equivalent;</li> <li>Be the subject of an individualized education plan under s. 115.787 Wis. Stats.</li> <li>Comply with school attendance requirements in my individualized education program under s. 115.787 Wis. Stats., school district policies, and truancy laws and ordinances;</li> <li>Grant placement and care responsibility to the agency named above;</li> <li>Participate in activities assigned by my agency to prepare me for independent living;</li> <li>Live in out-of-home care in a foster home, group home, residential care center for children and youth, in the home of an approved relative other than a parent or in an approved supervised independent living arrangement approved by (County Agency, BMCW or DCF).</li> <li>Inform the agency named above of my whereabouts and not have periods of time in which I would be considered missing from out-of-home care;</li> <li>Maintain regular contact with the agency named above;</li> <li>Notify the agency above within 10 days of any change in circumstances that affects my complying with this agreement, including but not limited to changes in my living arrangements, school status, and my participation in independent living activities assigned by my agency.</li> </ul> <p>I understand this agreement will terminate in any of the following circumstances:</p> <ul style="list-style-type: none"> <li>The conclusion of the terms of this agreement;</li> <li>At my request or my guardian's request;</li> <li>I attain the age of 21;</li> <li>I am no longer a full-time student at a secondary school or its technical or vocational equivalent;</li> <li>I no longer have an individualized education plan under s. 115.787 Wis. Stats.;</li> <li>I am absent without permission or missing from my out-of-home care placement for more than two weeks; or</li> <li>Upon my entry military service.</li> </ul>			

DCF-F-5030-E (N. 11/2014)

17. There are four ticklers associated with Independent Living:

- **IL Assessment and IL Plan:** This tickler will appear when the youth is 14 and has been in care for six months. The tickler will be deleted upon entering a date in the Independent Living Assessment Complete and Independent Living Plan Completed fields on the Assessment/Plan tab of the Independent Living page.
- **IL Transition to Discharge:** This tickler will appear when the youth is 17 ½. The tickler will be deleted upon entering a date in the Independent Living Transition to Discharge Plan Completed field on the ILTD tab of the Independent Living page.
- **NYTD 17 Survey:** This tickler will appear when the youth is in out of home care on or after their 17<sup>th</sup> birthday. The tickler will be deleted when the NYTD survey has been received or by selecting the “Youth did not complete the survey” checkbox, if applicable.
- **Schedule ILTD Mtg:** This tickler notifies the worker that they have 90 days to schedule at least one Independent Living transition meeting prior to the youth’s 18<sup>th</sup> birthday. The tickler will appear when the youth is 14 and has been in care for six months. The tickler will be deleted when a transition meeting has been documented on the ILTD tab of the Independent Living page.

**Note:** A Permanency Plan cannot be completed if the IL Transition to Discharge tickler is overdue. Here is an example of the IL Assessment and Plan tickler, as well as the NYTD 17 Survey tickler.

Date Due	Due In	Case/Provider Name	Participant(s) Name	Task Name	Responsible Worker	Shared With	Action
09/27/2004	-4846	Europe, OldWorld (9221316)	Europe, Italy (9222011)	IL Assessment & Plan	Cake, Caitlin M., III	-	 
02/26/2006	-4329	Naberrie, Padme (9221333)	Naberrie, Padme (9222061)	IL Assessment & Plan	Cake, Caitlin M., III	-	 
09/28/2007	-3750	IndependentLiving, Mom (9222488)	IndependentLiving, Chris (9225332)	IL Assessment & Plan	Supervisor, Partnership	-	 

18. If you have an assignment to the case, Independent Living will appear on the desktop under the Planning icon.

**Dove, Mother (9222764)**  
Case details:  
Child Welfare  
Dane - North  
Open OHP exists for associated participant(s)

Case address:  
125 South Webster Street, Apt. #19D  
Madison, WI 53702

Primary worker:  
Supervisor, Partnership  
spoonm@dhfs.state.wi.us

**Actions:**  
Please select an action ▾

View case information

Access Reports

Assets and Income

1 2 3 Assignments

Eligibility

Placements

Planning

Related People

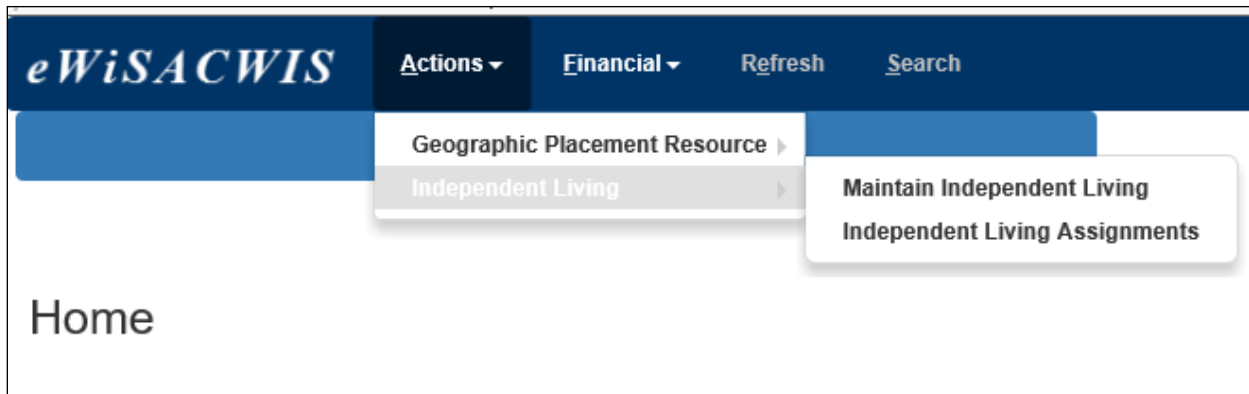

**Planning**  
[Independent Living](#)

01/02/2018   Dove, Blue   Not Eligible



19. Workers with the required security will also have access to the Independent Living Assignments page. This page allows workers to view all of their assigned youth in one central location. Workers can also assign different statuses to each assigned youth to that have been provided and/or may be provided to the youth in the future. The page has one section, “My Independent Living Assignments,” which contains five columns of information.

- **Name:** Displays the youth’s name as documented on the Person Management page.
- **Maintain Independent Living:** A hyperlink to the youth’s Independent Living page.
- **Gender:** Displays the youth’s gender selected on the Person Management page.
- **Date of Birth:** Displays the youth’s date of birth as documented on the Person Management page.
- **Status:** A user-selectable drop-down that enables worker to select a status for the youth.



Independent Living Assignments - Internet Explorer

**eWiSACWIS** Print Help

**My Independent Living Assignments**

Name		Gender	Date of Birth	Status
<a href="#">Dove, Blue (9226127)</a>	<a href="#">Maintain Independent Living</a>	Male	12/19/2000	Nonresponsive to outreach
<a href="#">Abelmann, Samantha (9226069)</a>	<a href="#">Maintain Independent Living</a>	Female	05/15/2001	<div> Active  Nonresponsive to outreach  Out of state  Declined  Other </div>
<a href="#">Addison, Jean (9222741)</a>	<a href="#">Maintain Independent Living</a>	Female	07/30/1999	

Save Close