



Exhibit 1: Scope of Services

Group Home (GH) Contract

with the Division of Milwaukee Child Protective Services (DMCPS)

Contract Period: January 1, 2025 – December 31, 2025

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Program Overview

The primary purpose of Group Home (GH) placements is to provide treatment, needs, and physical placement to youth receiving case management services through one of the Contracted Case Management Agencies of the Division of Milwaukee Child Protective Services (DMCPS). These services are provided to youth subject to orders under Wis. Stat. Ch. 48 when placed in an out-of-home care (OHC) placement when the youth cannot remain safely in the home of their family of origin.

Group home placements are short-term to address specific needs of the youth. All placements must be authorized and monitored by the youth's Child Welfare Case Manager and approved through the youth's Court Order. The Contractor must follow all licensing requirements according to Ch. DCF 57, Adm Code. The Contractor's license must be in good standing with the Wisconsin DCF Child Welfare Licensing Section and the Contractor must hold a contract with DMCPS for the placement and care of youth served by DMCPS. The Contractor must provide a safe and high-quality group home for all youth served in the home. While placement in a group home is a congregate care setting, the environment shall be home-like to promote normalcy for youth who have experienced the trauma due to removal from their families of origin.

Youth Well-Being

Physical Environment

The home must be clean, well-maintained, and nurturing for youth in out-of-home care. A well-maintained home must include adequate furnishings, decorations, with is sensory-friendly, and a home-like environment.

Food Policy/Availability

The Contractor will ensure a four-day supply of various nutritional foods is available to meet the needs of the total number of youths placed in the home include daily meals and snacks. The Contractor will make reasonable efforts to consider and accommodate the following:

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

The group home must create and post a menu of planned meals for each week. The group home must allow youth access to food and beverages in a manner that is most home-like and least restrictive. Youth shall have access to food when a youth is hungry or has missed a meal during the day. The group home must not have any food locked away unless it is for food supply storage and/or future meal preparations.



Provisions

The Contractor shall, at a minimum, provide youth with essentials that include:

- Personal hygiene products
- Hair products conducive, appropriate, and respectful to the youth's hair needs, including brushes and/or combs
- Seasonally appropriate clothing, including coats, hats, gloves, and shoes
- Undergarments and socks
- Any specialized supplies that include, but are not limited to, hand braces, helmets for protection, communication devices, specialized medical equipment, protective undergarments, and feminine products
- Towels and bathing/showering supplies such as shower shoes, hand towels, wash cloths, and shower caps
- Any school supplies
- Any equipment and/or supplies needed for extracurricular sports or other activities the youth may take part or join in while in care.

At a minimum, the Contractor will provide the youth with the necessary essential items based on need or a specialized type of care.

The Contractor should keep a record or inventory at the group home of the youth's personal belongings during the youth's placement time. Any provisions or essential items bought for the youth during their time in the group home setting are the youths to take upon discharge.

The Contractor shall ensure youth have adequate clothing during their stay. When youth bring their personal belongings, including clothing and personal items, to the group home, they must be allowed to keep them. However, the Contractor shall provide or replace clothing as needed, ensuring it is age-appropriate, clean, and suitable for the weather (such as undergarments, coats, hats, and gloves). If a youth needs clothing upon placement, the Contractor is responsible for providing it. The Contractor will document the youth's clothing and belongings, which shall be returned to the youth upon discharge from the facility.

Child Specific Provisions

When youth are in group home and require specialized equipment or supplies, including, but not limited to, beds to accommodate the youth's size, technology recommended by a mental health provider, specialized hygiene products (due to allergies or skin sensitivities), personalized hobby supplies (art supplies, journals, etc.), helmets for

protection, protective undergarments, weighted blankets, or other devices to aid in treatment, those items are to be discharged with the youth.

The group home should keep a record of these items bought either through Extraordinary Payment Requests, facility funding/donations, or other financial means. If the youth's Contracted Case Management Team, an insurance entity, or parts of the youth's child and family team buys any specialized products, must be included in the youth's log of personal belongings.

Toileting/Bathroom

Youth who need toileting support through either a toileting schedule, wearing of protective undergarments, or assistance with managing cleanliness after toileting should have a written plan that is supervised by a staff supervisor. The staff supervisor should report any concerns about toileting issues to the youth's FPT and Case Management Team immediately and ensure that the concerns are documented and reviewed with necessary professionals, such as a nursing staff or primary care medical teams, as needed.

Youth who have toileting mishaps or needs should not be made to sleep, sit or be exposed to soiled beds, linens, and clothing. Staff should ensure youth are immediately cleaned up, along with their bed, linens and clothing, upon noticing the accident.

Youth who do need toileting assistance shall not be ridiculed, shamed, or mistreated. They should be treated with respect, privacy, dignity, and care when this assistance is needed in a group home.

Promoting Normalcy

The Contractor shall use the Reasonable and Prudent Parenting (RPP) Standard (<https://dcf.wisconsin.gov/files/cwportal/policy/pdf/memos/2017-27.pdf>) in decision making as it relates to an activity of a youth in their care. These RPP decisions often relate to the safety, extracurricular, social, and age-appropriate developmental activities that are in the best interest of the youth. The RPP Standard also must consider decisions related to the youth/family's cultural, religious, and tribal values. The Contractor will use RPP to make decisions about a youth's day or overnight passes and shall discuss with the Contracted Case Management team and FPT when appropriate. The Contracted Case Management Agency shall make the final decision whether a location where the youth has a day or overnight pass is safe and appropriate based on the Ongoing Standards. It is encouraged that this decision be a collaborative process between the youth's RCC treatment team, FPT and Contracted Case Management Team.

The Contractor's workforce should be culturally competent and able to support the youth in her/his/their diverse culture, daily regime, and any religious practice. Cultural competency training is required for all staff in compliance with Wisconsin's Executive Order #1 (https://docs.legis.wisconsin.gov/code/executive_orders/2019_tony_evers/2019-1.pdf) and



and #59 (https://docs.legis.wisconsin.gov/code/executive_orders/2019_tony_evers/2019-59.pdf).

Group Homes shall also promote normalcy by providing the youth with activities outside of treatment and programming within the facility. This can include community activities in various areas, participation in community-based groups, shopping trips, religious activities, etc.

Note: The Contractor must account for the youth's safety while outside of the facility and shall document internally where and when the youth left, what the youth will be doing on their pass, and where/how the youth can always be reached.

Programmatic Elements

Available Programming

The Contractor shall accept youth with treatment needs that match programming available in the group home. If the Contractor accepts youth with needs which are different from their current group home programming, the Contractor must create programming to accommodate the needs of the youth or develop specialize in the facility. The Contractor should coordinate with the child welfare case management team to develop treatment goals as needed. All programming should be provided in accordance with the Wisconsin Youth Welfare Model for Practice (<https://dcf.wisconsin.gov/cwportal/model>).

The group home shall offer appropriate programming, including, but not limited to:

- 1) Mental and behavioral health intervention.
- 2) Independent living skill development.
- 3) Support for youth to encourage healthy peer relationships.

The Contractor must ensure the youth has connections to cultural and community resources for recreational activities, health care, and other services. The Contractor shall update the youth's treatment plan of any community resources utilized and inform the case management agency.

The Contractor will collaborate with the case management agency to ensure family support and connections occur whenever possible unless court-ordered restrictions prevent family interactions.

The Contractor will also provide the youth with the group home rights and responsibilities to ensure equitable and fair treatment.

Note: The Contractor does not need to provide all services directly to the youth in placement. The youth's treatment and case plan may address the services and be provided outside the facility.

Supervision of Youth

There shall be proper adult supervision, nurturing and effective engagement of youth in programming. The Contractor will ensure that youth are supervised 24 hours per day, 7 days per week except when adhering to Wis. Stat. § 48.383 (Reasonable and Prudent Parenting Standards).

Treatment Planning

The Contractor must follow all treatment planning requirements of their license and as required by law. The youth's treatment care plan will be provided timely to the parent/guardian and the youth's Child Welfare Case Manager. The contractor shall ensure the youth engages in the development of their treatment goals and planning to that is age and developmentally appropriate. This plan must also be available upon request of any of the parties in the youth's case. The Contractor must create and maintain open and supportive communications among all parties legally involved in the care and planning for a youth's interests, to reach a final goal of permanence for youth in out-of-home care. All youth shall receive crisis intervention and safety planning if determined necessary by their treatment/case plan or requested by the youth's Contracted Case Management team.

The Contractor will be responsible for providing written progress reports monthly for each youth in care under this contract and for providing these reports to the youth's family and the youth's Contracted Case Management team. Each report is due to the youth's Contracted Case Management team the following month for any youth that was in contractor's care for ten or more days in the prior month.

The report must provide a response to the following questions/topics:

- 1) The youth's education status, highlighting any recent accomplishments, setbacks, or concerns in relation to learning or the school environment.
- 2) Whether the youth has experienced any sudden, unusual changes in behavior, any specific progress related to the youth's treatment, or any recent changes or related issues of concern.
- 3) The youth's progress towards discharge.
- 4) The youth's level of engagement in services.

Note: This report is not limited to the information listed above and may include as much information as the Contractor feels is necessary to convey the youth's status to the Youth Welfare Case Manager.

Medication Management

The Contractor shall ensure youth are administered prescribed medications as scheduled. If a youth is refusing to take prescribed medications, if a change in affect is observed, or if there are noticeable side effects, the Contractor should clearly document



these concerns. In addition, the Contractor must notify the case manager, a parent, or a legal guardian within 12 hours, and shall document any medication refusals, denials, side effects and any changes in affect the youth may experience and shall be noted in the youth's group home records.

Adherence to DCF/DMCPS Transformation

The Contractor must comply with all applicable Family First Prevention Services Act (FFPSA) and Child Welfare Transformation policies and procedures as required by DCF and/or DMCPS. Preference for placement may be given to Contractors who are certified as Qualified Residential Treatment Programs (QRTP) by DCF.

During a youth's placement in the group home, the Contractor will arrange for, encourage, support, and cooperate in assisting the youth to maintain contact with family through regular visitation and family interaction as required in the court order, permanency plan, case plan, and direction from the youth's Child Welfare Case Manager.

Transportation

The Contractor must provide for or arrange transportation to and from all medical/mental health/dental appointments, all court-ordered services, school, and other community-related activities. If youth are working on developing independent living skills, it may be a requirement for them to utilize public transportation (or something similar), but only if it is included in the youth's treatment/independent living plan and is consistent with their demonstrated level of responsibility. It is the Contractor's responsibility to provide the youth with the skills and resources for transportation. **The Contractor must provide DMCPS documentation available upon request as it relates to the means what form of transportation will be used and how the youth will access transportation for school related and/ or community related events or activities.**

Personal Electronics and Internet Use Policy

The Contractor must establish a written policy regarding possession and use of personal electronics, including but not limited to mobile/cell phones, tablets, laptops, gaming equipment, or other items that allow the youth to be connected to their network. The policy should include when youth can have their electronics, what areas of the facility are "safe zones" for electronics usage and who will monitor the usage. In addition, the Contractor should have a policy or contract that is posted for the youth to know what allowable use of their electronics are. This policy must be provided to DMCPS Contract Administrator within 30 days of the signing of this contract. The policy must identify:

- 1) What happens when a youth possessing electronics is brought to the facility for admission?



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

Agency Requirements

Placement Referrals

The Contractor must gain access to the [Supporting Youth and Children](#) (SYNC) website to accept placement of any DMCPs youth. Once the Contractor has access to the website, the Contractor may accept, waitlist, or decline the placement referral. The Contractor will review each referral it receives for appropriateness for placement to ensure supportive programming is appropriate for the youth. The Contracted Case Management agency authorizes all placement referrals electronically for each youth using the SYNC website.

The Contractor will consult with the Contracted Case Management agency when there are concerns.

Acceptance of Youth into the Group Home

The Contractor must always ensure a single point of contact for placement coordination. The Contractor must be available for placement between the hours of 8:00 a.m. and 5:00 p.m. Monday through Friday. If the Contractor wishes to be available for after-hours referrals, the Contractor should develop an afterhours contact and share the information with DMCPs and the PRU. The Contractor must respond to the referring



agency for all placement referrals within 3 business days of receipt of referral to accept or deny placement, or to ask for more information about the youth. The Contractor is required to track all denials for placements with a focus on reason(s) for the denial and submit this information to the PRU monthly.

The Contractor may accept or deny placement referrals in accordance with the needs of the referred youth or youth in their care. Placement denials shall focus on specific reasons, including, but not limited to the following:

- 1) Needs of the youth are greater than the staff in the Contractor's home can safely manage. The Contractor must describe the specific needs that they are unable to meet.
- 2) The youth does not fit within the age requirements that can be placed at the home.
- 3) The histories and experiences of a youth already placed at the facility are contrary to the best interests of the youth seeking placement (i.e., youth is a member of a rival gang).
- 4) Case management team has not appropriately coordinated placement (i.e., Case Manager or representative of case management agency does not have the placement folder ready and available with any consents and resources needed to create a smooth transition for the youth)

Extraordinary Payment Requests

Group home providers can request an Extraordinary Payment Request (EPR) for additional funds that are not included in the daily rate. EPRs are only for a youth with an acceptance into the group home who are exhibiting a need for more support while in placement.

The group home shall complete the [EPR Form](#) in its entirety and submit it to the youth's assigned case management team for review. Once the group home and case management team agree on the terms of the EPR, the group home will submit the EPR in accordance with the posted [Extraordinary Payment Request Policy](#).

Once an EPR is approved, the Contractor will document everything related to the EPR and the child's needs. Additional information may be requested by DMCPs or the youth's Contracted Case Management team to verify services are being provided, such as 1:1 support staffing schedule, shift staff communication logs or proof of payments.

Placement Holds

DMCPs may place facilities "on hold" for new placement referrals for reasons including, but not limited to, the following:

- 1) New allegations of maltreatment in the home



- 2) Identification of placement danger threat(s)
- 3) Concerns with the quality of care provided to residents.
- 4) Financial instability of entity

When DMCPs is notified that the group home is placed on hold for placements by DCF Child Welfare Licensing, DMCPs may also place a hold on placement until the DCF Child Welfare Licensing hold is lifted.

If DMCPs places a specific home "on hold", the DMCPs Contract Administrator will notify the Contractor via email of this decision.

Note: Entering a contract with DMCPs does not guarantee placement of youth.

Placement Disruptions

The Contractor shall provide a written 30-day notice for any youth for which they are asking removal to allow for appropriate planning and transition for the youth. It is recommended that for each 30-day request there has been clear and consistent communication with the assigned Child Welfare Case Manager to attempt to plan for any potential disruption. Immediate and 15-day removal requests must be staffed with the Program Manager of the Child Welfare Case Management Agency.

The Contractor will be responsible for documenting the following related to all youth once they are discharged. The contractor must provide quarterly reports to the Placement Referral Unit (PRU) for all discharges.

- 1) The length of stay in the group home from placement to discharge
- 2) Where the youth is discharged to, e.g., birth home, foster home, treatment foster home, another RCC, group home, or that the youth is missing from care, etc.
- 3) Specific rationale detailing discharge reason(s)

Bed Holds

Bed Holds may be requested for reasons including, but not limited to:

- The youth is hospitalized for a medical or mental health assessment
- The youth chronically goes missing from care, but returns shortly
- The youth is on an extended pass/vacation with her/his/their family
- The youth is serving court-ordered sanction days in Milwaukee County Children's Court Detention Center or another court-ordered location.

If a bed hold is needed for these reasons, or another reason not listed but considered appropriate, the Contractor shall collaborate with the Contracted Case Management Agency on this approval. The Contracted Case Management Agency will determine if a bed hold is justified and ensure payment continues based on the agreement.

Once the agreement is made to place a bed on hold, the Contractor must complete the DMCPs Bed Hold Authorization Form and submit to the Contracted Case Management Agency assigned supervisor, then to DCF as needed.

Note: Bed holds should not exceed 13 days without further approval from the DMCPs Contract Administrator. The Contractor and Contracted Case Management Agency must agree about the extended time of a bed hold and shall provide the reasons in writing within 10 days of a bed hold.

Bed holds are not to be issued prior to a placement date to "hold" a placement. Any need for bed holds for this reason must be approved by the DMCPs Contract Administrator prior to any agreements.

Trainings Required

The Contractor must provide the following trainings for their staff upon hire, and at specified times during employment:

- 1) Training on positive behavioral interventions, which excludes the use of physical discipline and corporal punishment, must be provided to all direct care staff during each licensing period.
- 2) Training on the dynamics of high-risk behavior and its prevention and management must be provided to all direct care staff during each licensing period.
- 3) Training regarding the prevention of maltreatment while a youth is in their care.
- 4) Training detailing protocols for staff regarding mandated reporting of youth abuse or neglect.
- 5) Training related to medical neglect and procedures or programs, or both to provide for:
 - a) Coordination and consultation with individuals designated by and within appropriate health-care facilities.
 - b) Prompt notification by individuals designated by and within appropriate healthcare facilities of cases of suspected medical neglect.

The Contractor shall continue the improvement of skills and qualifications of the direct line and supervisory staff providing services to youth by participating in continuous quality improvement initiatives within their agency.

Information about trainings shall be made available for the DMCPs Contract Administrator upon request. The Contractor must be able to provide information to DMCPs Contract Administrator as it relates to implementation of methods, strategies, skills given at training.

Reporting Serious Incidents

The Contractor must submit a [Serious Incident Report](#) per DCF's CH 57.13 within 72 hours of the incident occurring to the DMCPs Contract Administrator by emailing the completed Report to dcfdmcp/provider@wisconsin.gov.

Missing from Care

In accordance with [DMCPs Missing from Out-of-Home Care Policies](#), the Contractor must reach out to Child Welfare Case Manager via email immediately to share information about the youth's missing status. The Contractor shall also provide information to the parent(s)/guardian(s) about the youth's status at this time.

Youth Safety While in Placement

DMCPs supports a child protection system that is comprehensive, youth-centered, family-focused, and community-based; incorporates all appropriate measures to prevent the occurrence or recurrence of youth abuse and neglect; and promotes physical and psychological recovery and social re-integration in an environment that fosters the health, safety, self-respect, and dignity of the youth.

While in the group home, youth shall be protected from potential threats to their safety, both in and out of the home, to the best of the Contractor's ability.

In the group home, the use of physical restraints and corporal punishment is prohibited, except in the event of an emergency as defined by Ch. DCF 57, Adm Code licensing guidelines. Any restraint policies must be approved by DMCPs at the beginning of each contract period. The Contractor shall not utilize any physical restraint unless the Contractor's policy has been approved by DMCPs. An exception from DCF on the Contractor's license for physical restraint does not equal approval from DMCPs.

Reporting Maltreatment

If staff at the facility witness, become aware or suspect alleged maltreatment regarding a youth in their care, they must follow the group home's procedures to report the alleged maltreatment to the Division of Milwaukee Youth Protective Services Intake (414-220-SAFE) (<https://dcf.wisconsin.gov/cps/mandatedreporters>) and notify the youth's Child Welfare Case Manager and other parties as outlined in the facility's current license. If a youth in care reports maltreatment that occurred outside of the group home, the staff at the facility have a responsibility to also make a report to 220-SAFE.

Any substantiated maltreatment in a group home requires the agency to submit a Corrective Action Plan (CAP) to DMCPs within 30 days of being notified of the substantiation, in addition to any required documentation of their license. This CAP shall include any action initiated in response to the recommendations of the agency that conducted the Initial Assessment. Approved Corrective Action Plans will be added to the Contract as an addendum.



Independent Investigations (Initial Assessments)

When an allegation of maltreatment is screened in with a contracted facility of DMCPs, a third party conducts the Independent Investigation (Initial Assessment). The Contractor is expected to cooperate with any investigating body/agency during the investigation and must follow up and complete any recommendations from the Initial Assessment. The Contractor shall allow third-party access to group home records, interviews with staff, youth, or documentation to investigate upon request to ensure allegations.

Necessary Resources

Except as detailed elsewhere in the Contract as obligations of the Department, the Contractor shall provide the personnel and any materials or resources necessary for the performance of the services. All current and newly hired staff must successfully and timely complete and comply with the core competencies and staff professional development requirements for their employment position to provide quality services and support successful outcomes for youth. This includes compliance with strategies for increasing the tenure of group home staff, supervisors, and managers.

Compliance with DMCPs Required Meetings

Contractors are expected to attend all group home-related program and contract meetings convened by DMCPs (either virtually or in-person). If attendance is not possible by any staff member, the Contractor must notify the assigned DMCPs Contract Administrator prior to the meeting of the agency's inability to attend. At times, DMCPs may request additional meetings if warranted.

Performance Standards and Accountability

The Contractor shall perform all services consistent with the documents constituting the Contract. DMCPs may evaluate Contractor performance based on outcomes developed by DCF and/or DMCPs. Performance standards may be developed regarding the care the youth has received in the facility, to include, but not be limited to, the youth's stability, safety, and well-being. The Contractor's performance will be a factor in determining placement referrals and contract renewal. The Contractor will meet with DMCPs on a periodic basis to discuss and review any potential operational concerns or developments along with the Contractor's performance under the requirements of this contract. Corrective action, or any other remedies available to the State under the Contract, may be undertaken for failure to comply with the provisions of the Contract, including failure to follow DMCPs Policies and Procedures, the Federal Child and Family Service Review's Program Improvement Plan (PIP) and applicable state and federal law.



Department of Youth and Families (DCF) Structure/Organization

The Department of Youth and Families (DCF) directly administers youth welfare services in Milwaukee through the Division of Milwaukee Youth Protective Services (DMPCS) and runs the Statewide Public Adoption Program. DCF also provides licensing of facilities that provide out-of-home care for youth. In addition, DCF oversees child welfare at the local level. Local youth welfare agencies administer programs to assist children and families that include assistance for children in need of protection or services, foster care services, youth abuse and neglect investigations, and community-based juvenile justice services. DCF also administers a variety of other family-centered state programs such as early childhood education services and W-2 programs. The Youth Abuse and Neglect Prevention Board is administratively attached to the Department of Youth and Families.

The vision of the Department of Children and Families is that all Wisconsin youth and youth are safe and loved members of thriving families and communities. To reach our vision, we are focused on reducing racial and ethnic disparities in our programs and services, focusing on five key priorities:

- 1) Systematically increasing access to quality early care and education programs that support the needs of youth and families statewide
- 2) Putting families in the center of successful youth support and good-paying jobs programs
- 3) Safely transforming the youth welfare and youth justice system to dramatically increase the proportion of youth supported in their homes and the community
- 4) Dedicating additional resources to support vulnerable and historically underserved youth, specifically teenage girls, kids with complex care needs, and youth transitioning out of the foster care system.
- 5) Fostering a workplace where agency staff feel engaged, valued, and connected to our vision.

Milwaukee Child Welfare Structure

The Division of Milwaukee Youth Protective Services (DMCPS)

DMCPS works with families to ensure the safety and well-being of children and youth. With its many community partners, DMCPS provides services to families in crisis that help keep children safely in the home. When it is necessary, DMCPS looks to out-of-home care placements to provide appropriate temporary and permanent homes for children who cannot live with their families of origin. DMCPS contracts with service providers to provide placement, case management, in home services, and other supportive services to families in the Milwaukee community.



DMCPS is responsible for administering child protective services in Milwaukee County and works to assure the safety, well-being, and permanence of youth. DMCPS provides oversight over the Case Management Services contract, as well as other contracted services serving youth and families in need of youth welfare services. The vision of DMCPS is to have safe youth and healthy families in Milwaukee County and to execute DCF's mission that all Wisconsin youth will be safe and loved members of thriving families and communities.

DMCPS Ongoing Services Section

The DMCPS Ongoing Services Section is responsible for managing the programming, policy, and coordination of contract agencies providing ongoing services for the Milwaukee youth protective services system. This includes direct involvement in the negotiation, monitoring and performance evaluation of contracts with agencies that provide Contracted Case Management services, in-home services, out-of-home care placement providers, independent living providers, and other providers who fall in the scope of the Ongoing Services Section.

One of the DMCPS Ongoing Services Section's key objectives is to ensure youth are receiving high-quality care from the Contractors providing group home care for DMCPS youth. DMCPS Ongoing Services Section may conduct site visits (announced and unannounced) to meet this key purpose, and the DMCPS Contract Administrator will perform these visits and may be accompanied by an additional state employee.

Bureau of Quality Improvement

The DMCPS Bureau of Quality Operations (BQO) holds primary responsibility for supporting all Division administrative operations and quality improvement initiatives. BQO oversees the Division's financial operations to support state operations, private contractor administrative costs and direct client services. BQO is responsible for the management of division funding as well as the coordination of fiscal operations with DCF financial management staff. BQO ensures that proper accounting and audit measures are in place.



Appendix 1: Required Policies

Below is the minimum list of policies that the Contractor is required to submit to DMCPs with its Registration materials. A Registration will not be considered complete for review until all policies have been submitted. It is acceptable that some areas below may be covered within the same policy/agreement. The Contractor may create (or have) additional policies in line with program design.

1. Youth Provisions Policy
2. Mobile Phone and Internet Use Policy
3. Youth Restraint Policy
4. QRTP Policies
 - a. Additional Programming Available
 - b. Aftercare Policy

Addendum

Qualified Residential Treatment Program (QRTP)

Program Overview

The Family First Prevention Services Act (FFPSA) of 2018 is designed to help families whose children are at risk of removal, stay together. However, at times, youth may exhibit more mental health and behavioral health needs that could impact their ongoing safety or the safety of others and when this happens, they will be placed outside the home.

Qualified Residential Treatment Programs (QRTP) are non-family settings under FFPSA that are intended to provide quality mental health and behavioral health care for youth. QRTPs are leading providers of best practice in the field of child development, trauma, and attachment. QRTPs provide specialty programming that is designed to give the youth in their care tailored services and supports based on that youth's individual needs. More about the expectations of QRTP Providers is covered in Wis. Admin. Code Ch. DCF 61 ([Wisconsin Legislature: Chapter DCF 61](#)).

A QRTP setting shall provide individualized treatment needs for youth receiving case management services through one of the Contracted Case Management Agencies of the Division of Milwaukee Child Protective Services (DMCPS). These services are provided to youth who are subject to the jurisdiction of Wis. Stat. Ch. 48 and, when applicable, Wis. Stat. Ch. 938, and who are placed in an out-of-home care (OHC) placement when the youth cannot be safely maintained in the home of their family of origin or a community setting.

QRTP Requirements

The Contractor shall comply with all licensing requirements based on their type of Congregate Care (Residential Care Center (RCC) or Group Home) as outlined in Wis. Admin. and be in good standing with the Wisconsin DCF Child Welfare Licensing Section and hold a contract with DMCPS. As a certified QRTP provider, the Contractor shall also follow all requirements under Wis. Admin. Code Ch. DCF 61.

The Contractor shall provide safe and high-quality care. High-quality care includes creating and maintaining open, supportive, and strength-based communication among all collaborators involved in the youth's care. The Contractor shall ensure the facility's treatment and programming follow a trauma informed care model that provides consistency with the best interest of the youth and meet the youth's unique mental health and behavioral health needs. By providing high-quality care for children in placement, the Contractor will assist in the youth's permanency goal by planning for transition into a least restrictive setting.

A QRTP provider must meet the following requirements under FFPSA:

- The Congregate Care setting is accredited through an independent, not-for-profit accrediting organization approved by the U.S. department of health and human services.
- Utilizes a trauma informed treatment model



- The Congregate Care setting assist in engaging, and building, a Family Permanency Team (FPT) for that youth
- Has access to registered/licensed nursing staff and licensed clinical staff 24/7
- After Care-the Congregate Care setting shall provide discharge planning and family-based aftercare for at least 6 months after the youth's discharge from the QRTP.

QRTP providers shall articulate how the facility's specialized programming will not only help the youth transition from a most restrictive setting to a family-like setting but will ensure the programming assists in the transition through specific mental health, emotional health, and behavioral health treatment. This includes making professional recommendations for the After Care plan in conjunction with the Contracted Case Management Team and FPT.

QRTP providers will ensure monthly Family Permanency Team meetings are held, to the extent possible, at a convenient location for the youth's family. QRTP providers should keep notes on who attends the meetings and continue to build the youth's FPT.