



635 North 26th Street
Milwaukee, WI 53233-1803
Telephone: 414-343-5500
Fax: 414-220-7062

Governor Scott Walker
Secretary Eloise Anderson

Division of Milwaukee Child
Protective Services (DMCPS)

DATE: April 10, 2017

TO: DMCPS

CC: SaintA, Children's Hospital of Wisconsin Community Services, Professional Services Group

**FROM: Robin Joseph, Ph. D., Administrator,
Division of Milwaukee Child Protective Services**

RE: Request for Higher Level of Care

The Division of Milwaukee Child Protective Services (DMCPS) will begin a new procedure for requesting and staffing higher level of care approvals for children placed in out-of-home care and intensive in-home cases.

This Memo will effectively eliminate the current Central Staffing Procedure for Higher Level of Care (IA 23.02, OCM 12.02, FCA 13.02) and Emergency Higher Level of Care Approval Procedure (IA 23.01, OCM 12.01, FCA 13.01).

This Memo establishes the approval process for obtaining higher level of care approvals both for emergencies and general HLOC requests. This is the approval process for a child in need of a higher level of care (HLOC) than a general foster home can provide. Higher levels of care include treatment foster care, group home, residential care centers, out of state placement requests, and Wraparound services. **For all children being considered for a HLOC, the Case Manager must complete the Higher Level of Care Request and receive approval prior to a placement being made.**

The Division of Milwaukee Child Protective Services and Ongoing Case Management program partners share the commitment that a child needing to be placed in out-of-home care must be placed in the least restrictive, and most community based and family focused out-of-home care placement possible, that meets the need of the child. A higher level of care is only considered when supporting documentation indicates that the current placement and/or level of care being provided is unable to **meet the needs of the child**, even with supporting services such as counseling, child activities, etc. in place.

When a case manager determines that a child on their caseload requires a higher level of care, they must obtain Higher Level of Care Approval from an Outcomes and Stability Strategist prior to a change in placement, or referral to the Wraparound program, unless ordered by the Court. If an HLOC is ordered by the court, it is necessary to inform the OSS team of this using the Higher Level of Care Request.

The Higher Level of Care Approval process has been simplified and modified in the following ways:

- Formal staffing (previously called Central Staffing) will no longer be required for every case.
- Simplified paperwork for the higher level of care request.

- Greater partnership between DMCPs and the Ongoing Agencies to serve the needs of the children.
- Shorter time period between request for higher level of care and approval.

There are 3 different actions the Ongoing Services Section can take in response to a request:

- 1) Approval of the HLOC
- 2) Denial of the HLOC
- 3) Request for a HLOC staffing to gather more information prior to issuing a determination

The HLOC Staffing Team will include the following parties:

- 1) DMCPs Ongoing Services Section
- 2) DMCPs Medical Director or Health Unit designee (Ongoing or IA nurse)
- 3) Case Manager, Supervisor, and/or Program Manager/Director
- 4) Other Medical Professionals, if available
- 5) Wraparound Milwaukee Representative (on WRAP HLOC Requests)

Procedures

- 1) When a Case Manager determines that the child needs a higher level of care than that which the child is currently receiving, the Case Manager will obtain approval from their Supervisor and Program Manager, or designee.
- 2) The Case Manager will determine what type(s) of HLOC they are requesting:
 - a. TFC Placement
 - b. Group Home Placement
 - c. In-State Residential Care Center Placement
 - d. Out-of-State Residential Care Center Placement
 - e. WRAP Assessment
- 3) The Case Manager will complete the Higher Level of Care Request form and submit it to the following email address within the Ongoing Services Section of DMCPs for review: DCFdmcpsHLOCrequest@Wisconsin.gov.
- 4) The OSS will review the information provided in the HLOC Request and take action in response to the request.
- 5) **If the request is approved**, the OSS will sign and provide the Case Manager with the signed copy of the HLOC Request for their records. This record is to be uploaded into eWiSACWIS.
 - a. The Case Manager or designee will also alert any related parties of the approval (ie. Ongoing Placement Unit, Wraparound Assessment Coordinator, etc.).
 - b. If Wraparound is approved on the HLOC Approval Request by the OSS, the Case Manager is responsible for providing the necessary information to the Wrap Assessment Coordinator within 48 hours of an approved HLOC. The WRAP Assessment Coordinator will inform the Case Manager of the Referral Requirements.
- 6) **If the request is denied**, the OSS will provide the explanation for the denial.
 - a. If the Ongoing Agency believes this request needs more explanation, the Case Manager may request a meeting with the OSS to explain the denial.
- 7) **If the OSS determines that a formal staffing is required**, the OSS will alert the "HLOC Staffing team" of the staffing date. The HLOC Staffing will occur on Thursdays at

1:00pm, unless otherwise indicated by the Ongoing Services Section. All members of the HLOC Staffing Team are to participate via phone conference, unless they would prefer to appear in person at DMCPS. The telephone number for the HLOC staffing is: (888) 278-0296; Participants will enter the number 9449232 to connect to the phone call.

- a. If there is an emergency, the OSS will work with any available members of the HLOC staffing team to schedule an emergency staffing.
- 8) Follow Up
- a. Every 90 days, a review of HLOC must be documented by the Case Management Supervisor in eWiSACWIS that it is still in the child's best interests to be placed in a higher level of care, or they will document a plan to lower the child's level of care.

Attachment: Request for Higher Level of Care