

MANUAL: FOM 802	JOB AID Children's Foster Care
SUBJECT: Comprehensive Trauma Assessment Job Aid	11/2021 New Issue Partial Revision
Contact Office: Erica Barrett, BarrettE1@michigan.gov Child Welfare Permanency and Wellbeing Unit	03/2025 Complete Revision

ELIGIBILITY CRITERIA

The child must meet the following eligibility criteria to be referred for a comprehensive trauma assessment:

- The child or youth has a current open MDHHS foster care, children's protective services (CPS), or MDHHS juvenile justice (JJ) case. The current open MDHHS foster care, CPS, or JJ case must remain open until the comprehensive trauma assessment report is completed and sent to the case manager, recommendations are reviewed with the family and plans are made for implementation, and the invoice is paid.

NOTE: CPS cases must be open as a category I or category II to be eligible for comprehensive trauma assessments. CPS investigations, category III, category IV, category V, and prevention cases are not eligible for comprehensive trauma assessments.

- The child must be ages 0-17.
 - Prior to referral for a comprehensive trauma assessment, any child less than three years of age must have been referred to ALL of the following:
 - Medical professional/Pediatrician.
 - Early On.
 - CMH for Infant/Early Childhood Mental Health treatment services.

NOTE: At least one of the professionals listed above must recommend a referral for a comprehensive trauma assessment. Documentation of the decision to refer, including applicable reports, must be included with the MDHHS-5594, Comprehensive Trauma Assessment Referral/Invoice.

The child must also meet one or more of the following criteria:

- The child is struggling with functioning and behaviors in their current placement despite participating in services.
- The child entered care within the last 30 calendar days, and current placement is in danger of disrupting due to the child's functioning and behaviors. Child has not been referred to or started services.
- The assessment is recommended by a current mental health clinician or current medical professional.
- The child is not benefiting from current services AND received an 11+ on the trauma screening checklist.
- The assessment is court ordered.

The child must be participating in current services prior to referral for a comprehensive trauma assessment. The only exceptions to this are the following:

- The child entered care within the last 30 calendar days, and current placement is in danger of disrupting due to the child's functioning and behaviors. Child has not been referred to or started services.
- The assessment is court ordered.

If the child is benefitting from current services, the child is not eligible for a comprehensive trauma assessment.

REFERRAL PROCESS

When it is determined that a child should be referred for a comprehensive trauma assessment, the case manager must do the following:

1. Complete the MDHHS-5594, Trauma Assessment Referral/Invoice, and attach all supporting documentation.

NOTE: The contractor cannot accept incomplete referrals per the contract. All sections of the referral form must be complete, and all signatures must be present. Incomplete referrals will be rejected.

2. Submit the MDHHS-5594 and supporting documentation to supervision for approval. Once approved by supervision, the MDHHS-5594 and supporting documentation must be submitted to the county director for final approval. The county director will assign a contractor to the referral based on the contractor rotation and county's region.
3. The case manager must enter a case service into the electronic case record and upload the MDHHS-5594 and supporting documentation into the document section of the electronic case record.
 - a. The case manager must route the case service to supervision for approval.
 - b. Supervision must route the services authorization to the behavioral health analyst within the Child Welfare Permanency and Wellbeing Unit for approval.
 - c. The behavioral health analyst will review the MDHHS-5594 and supporting documentation.
 - i. The MDHHS-5594 must be complete and all supporting documentation must be uploaded for review.
 - ii. Eligibility criteria will also be reviewed at this time. There must be clear documentation that the child meets the eligibility criteria outlined in FOM 802. If the child does not meet the eligibility criteria outlined in FOM 802, the services authorization will be denied.
 - iii. If the services authorization is approved, the behavioral health analyst will sign, date and upload the MDHHS-5594 into the document section of the services authorization.
 - iv. The case manager or supervisor must obtain the MDHHS-5594 signed by the behavioral health analyst from the electronic case record and send it with the supporting documentation to the contractor.

NOTE: The case service authorization must be approved by the behavioral health analyst prior to sending the referral packet to the assigned contractor.

4. Send the completed referral packet to the assigned contractor. The contractor must complete all related contract activities and send the completed report to the referring case manager within 75 calendar days of the date the completed referral was sent to the contractor.

For additional information, review the following job aids in MiSACWIS Online Help:

- Record case services for individuals

- Authorize case services
- Record a services authorization

COMPREHENSIVE TRAUMA ASSESSMENT PAYMENTS

The established rate for the contracted Comprehensive Trauma Assessment is \$2343.33. Upon receipt of the completed comprehensive trauma assessment report, MDHHS-5594, and cover sheet, the case manager must pay the invoice by going into the previously added case service and adding the date the report was received as the completion date. Upload the finalized MDHHS-5594 that includes the completed invoice section. Complete a manual payment in MiSACWIS for a payment to be issued to the contractor. The manual payment must be entered within 10 business days of receiving the completed MDHHS-5594 from the contractor.

For additional information, review the following job aids in MiSACWIS Online Help:

- Record a manual payment

ANCILLARY SERVICES

Ancillary services are specific activities performed by a contractor that are necessary to provide counseling services. Ancillary services may be requested at the time of the referral or at a later time if needed. All ancillary services must be pre-approved by the case manager and supervisor on the MDHHS-5599, Ancillary Service Approval.

The following activities may be reimbursable ancillary services depending on the type of contracted service, which are indicated on the MDHHS-5599:

- Review additional documents exceeding 10.
- Partial assessment completed but cannot be completed due to client refusal or case manager determined not needed.
- Prepare duplicate original hard copy report with signature.
- Conduct an additional parent and child relationship assessment.
- Perform off-site services or observation, detention facility, jail, home, residential facility, prison, MDHHS, Placement Agency Foster Care (PAFC), and school; to include travel time.
- Attendance at a Family Team Meeting (FTM) or other meeting requested by case manager.
- Appearance for court-ordered testimony and court refuses to pay witness fee, must have written documentation.
- Prepare for and travel to and from court ordered testimony.

If ancillary services have been pre-approved on the MDHHS-5599, Ancillary Services Approval Form, the case manager must pay the invoice by going into the previously added case service and adding the date the invoice was received as the completion date. Upload the MDHHS-5599 and complete a manual payment in MiSACWIS for a payment to be issued to the contractor. The manual payment must be entered within 10 business days of receiving the completed MDHHS-5599 from the contractor.

For additional information, review the following job aids in MiSACWIS Online Help:

- Record case services for individuals
- Authorize case services
- Record a services authorization
- Record a manual payment

ADDITIONAL COMPREHENSIVE TRAUMA ASSESSMENTS

Comprehensive trauma assessments are intended to provide information that will inform ongoing case and treatment planning. Although specific elements of a child's situation may change, in nearly all circumstances a second comprehensive trauma assessment is not necessary to incorporate new information into case and treatment planning. The changes that may prompt consideration of an additional trauma assessment are listed below.

Prior to requesting an additional comprehensive trauma assessment, all of the following must apply:

1. It has been a minimum of 2 years since the first comprehensive trauma assessment.
2. All recommended services and actions steps identified in the first comprehensive trauma assessment report have been implemented.
3. Current services and interventions are not having an impact on the child's behaviors and/or mental health needs.
4. There has been a significant traumatic event in the child's life.

NOTE: If the court orders an additional comprehensive trauma assessment, the court order must be attached to the comprehensive trauma assessment referral packet.

Additional comprehensive trauma assessment referral requests must be approved by the Child Welfare Medical Permanency and Wellbeing Unit. Please email additional comprehensive trauma assessment referral requests to Erica Barrett at BarrettE1@michigan.gov.

CASE PLANNING

Based on results of the trauma screening and any subsequent assessment, appropriate trauma-specific treatment or trauma-informed services for the child and family must be included in the child's case service plan, as well as specific activities/strategies designed to help the child heal and build resiliency.

Case manager must partner with available community service providers and utilize local resources to ensure these services are provided. Additionally, appropriate referral(s) for the parent/caregiver should also be made, which may include Resource Parent Training. Treatment interventions, including services and strategies used to help build resiliency, should be documented in MiSACWIS.

Best interest decisions, such as permanency, parenting time, and placement should be made by the case manager, based on a holistic view of the child's case, and following supervisory discussion and support.

RESOURCES

1. FOM 802
[MENTAL HEALTH, BEHAVIORAL AND DEVELOPMENTAL NEEDS OF CHILDREN UNDER THE SUPERVISION OF MDHHS](#)
2. For additional information, review the following job aids in MiSACWIS Online Help:
 - Record case services for individuals
 - Authorize case services
 - Record a services authorization
 - Record a manual payment
3. Comprehensive Trauma Assessment Protocol:
[Children's Services Agency Trauma Protocol \(michigan.gov\)](#)
4. Child Welfare Medical and Behavioral Health Resources Website:

[MDHHS - Child Welfare Medical and Behavioral Health Resources \(michigan.gov\)](#)

5. Child Welfare Medical and Behavioral Health Resources – Trauma Assessments Tab: