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To: County Department of Human Services Directors
County Department of Social Services Directors
County Department of Community Programs Directors
Long-Term Support Supervisors and Leads

From: Deborah Rathermel, Director *Deborah Rathermel*
Bureau of Children's Services

Revisions to Wisconsin Children's Long-Term Support Functional Screen Clinical Instructions

Background

The Wisconsin Children's Long-Term Support Functional Screen (CLTS FS) is a web-based application used to determine functional eligibility for multiple programs for children with long-term support needs. Certified screeners collect information regarding the needs of children with disabilities and how they relate to functional eligibility required for children's long-term support programs. The CLTS FS is completed by certified screeners through an interview with the child and parent(s), usually in the home.

The CLTS FS has been evaluated by a quality management system and has undergone extensive validity testing. Though the efficacy of the CLTS FS has been documented, it is an evolving tool that benefits from continued improvement efforts. The Department of Health Services (DHS) is committed to ongoing quality assurance initiatives to enhance the screen's accuracy and reliability. This includes the continued fine-tuning of the CLTS FS written instructions to assist certified screeners in making the most appropriate selections on the screen, so that eligibility determinations are accurate for every child and the needs of every child are appropriately captured.

Purpose

The CLTS FS clinical instructions are intended to support local operating agencies in proper administration of the CLTS FS and to ensure accurate eligibility determinations. In an effort to enhance the accuracy and consistency of CLTS FS determinations, the CLTS FS written clinical instructions have been revised. Revisions to the clinical instructions are intended to:

- **Improve the tone of the instructions.** Professionals who work with families of children with disabilities note that parents are often likely to present optimistic and positive views of what their child could do or might do, as opposed to overemphasizing their child's need for assistance. With this understanding, language in the CLTS FS clinical instructions that may lead screeners to question parents' descriptions of the extent of their child's needs has been revised. Additionally, statements in the instructions that suggest parents may overstate the severity of their child's disability in order to access services have been removed.
- **Improve the clarity of the instructions.** Unclear language and guidance that could potentially cause delays in access to services or result in children being inaccurately found ineligible for

programs has been revised or removed. Revisions to improve clarity also include the addition of language and guidance to help certified screeners make appropriate selections on the CLTS FS.

- **Enhance the consistency of the CLTS FS clinical instructions with CLTS program goals.** Community integration and inclusion are fundamental goals of children's long-term support programs in Wisconsin. With these goals in mind, language has been added to the employment section of the instructions to begin conversations with families and children, while the children are still young, about their future employment as adults in the community. This includes providing families and children with information and resources to help with transition planning, goal setting, and determining employment outcomes.

Revisions to the Wisconsin Children's Long-Term Support Functional Screen Clinical Instructions

- **Module #1: Overview of the Children's Long-Term Support Functional Screen**

Several statements in this module have been removed in order to adjust tone. Language has also been added to improve clarity. An example of a situation in which a certified screener is presented with inconsistent information regarding a child's functioning was added to this module. The example walks the screener through how to use the recommended three-step process given in the instructions to make the most appropriate selection on the screen when presented with inconsistent reports related to a child's needs.

The following section of module #1 has been revised:

1.8 Screening Limitations

- **Module #3: Diagnoses**

Statements in this module have been removed in order to adjust tone. Revisions were also made to correct inconsistencies in the instruction guidance, prevent delays in access to services, clarify how often diagnoses must be confirmed, and clarify who can confirm a mental health diagnosis.

The following sections of module #3 have been revised:

3.3 Whose Diagnosis is Accepted?

3.4 Child's Diagnosis Must be Current

3.5 Required Documentation of Mental Health Diagnoses

- **Module #4: Mental Health**

Revisions made in this module clarify that autism spectrum disorders (Asperger's syndrome, autism, and pervasive developmental disability) as well as attention-deficit/hyperactivity disorder (ADHD) and attention deficit disorder (ADD) are considered mental health diagnoses. Additionally, the minimal frequency of symptoms required to select suicidality on the screen has been reduced.

The following sections of module #4 have been revised:

4.3 Duration of Diagnosed Emotional Disability

4.4 Mental Health Symptoms/Minimum Frequency

- **Module #5: Behaviors**

The method of calculating the frequency of a child's behavior when the behavior fluctuates and is not predictable has been revised in order to better capture the true extent of the child's behavior. Rather than being instructed to select "less than once a month" whenever the child's behavior

fluctuates and is not predictable, certified screeners are now instructed to select the average frequency of the child's behavior over the past six months. Language has also been added to clarify that screeners must remember to consider the impact of current interventions on the child's behaviors when making selections regarding the frequency of the child's behaviors on the functional screen.

The following section of module #5 has been revised:

5.3 Frequency of Behavior

- **Module #6: Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs)**

Several statements in this module have been removed in order to adjust tone. Revisions were also made in this module to clarify that there are situations in which a child could be considered needing assistance with an ADL or IADL, even though he or she is able to complete a task independently. Additionally, language was added to the Social Competency section of this module to help certified screeners make appropriate selections on this section of the CLTS FS.

The following sections of module #6 have been revised:

6.2 ADL/IADL Requires Substantial Impairment AND Frequent Assistance

6.4 "Needs" versus "Safety"/Fluctuating Needs

6.6 Corroborating Activities of Daily Living Between Home and Other Environments

6.18 Social Competency

- **Module #7: School and Work:**

Children with disabilities are five times more likely to work in the community as an adult if the adults in their lives, especially their parents, expect that they will work. The language added in this module is intended to start conversations about employment in the community with children and parents while children are young. This is intended to better align the CLTS FS clinical instructions with the CLTS program goals of community integration and inclusion. Language added in this module is also intended to help certified screeners make appropriate selections on this section of the CLTS FS.

The following section of module #7 has been revised:

7.2 Employment

*To view the full revisions made to the CLTS FS Clinical Instructions, please see the following:

<https://www.dhs.wisconsin.gov/functionalscreen/cltsfs/instructions.htm>

Summary and Effective Dates

The revised CLTS FS Clinical Instructions are effective on the date of publication. The revised CLTS FS clinical instructions supersede all former versions of the instructions. To get the most accurate screens, certified screeners should use these instructions while completing all functional screens going forward.

Assistance

Questions may be sent to dhscltsfs@wisconsin.gov