



**Youth Emergency Detention and Civil Commitment**  
**Presentation for Legislative Council Study Committee**

**August 21, 2024**

# TOPICS FOR WCHSA PRESENTATION

County human service department responsibilities

Options for serving youth in crisis

Challenges for serving youth in crisis

Residential care

Recommendations for study committee to consider

# County Human Service Responsibilities

Behavioral health services under Chapter 51

- Emergency mental health/crisis intervention
- Mental health treatment

Child protection services under Chapter 48

Youth justice services under Chapter 938

# County Human Services for Children in Crisis

Crisis plans with family, schools, etc.

Crisis intervention services

Comprehensive Community Services (CCS)

Coordinated Service Teams (CST)

Respite care for parents/guardians

Outpatient treatment services

Inpatient treatment – voluntary and involuntary



# Voluntary Options for Children In Crisis

## 51.13 admission of minors for treatment

- Parent/guardian can admit child under age 14
- Child aged 14-17 can admit themselves but parent/guardian must agree; child can file court petition if parental/guardian doesn't agree
- Parent/guardian can admit child aged 14-17 but child must agree; parent/guardian can file court petition if child does not agree

# Involuntary Options for Children In Crisis, cont.

## 51.15 emergency detention

- Child must be currently dangerous to self or others

## 51.20 involuntary civil commitment

- 3 party petition to court
- Pattern of behavior versus current danger
- County human service departments rarely use this option
- Persons filing petition must testify at court hearing

# Emergency Detention Process

Who can initiate emergency detentions:

- Law enforcement can initiate for children or adults
- County human service intake workers for Chapters 48/938 can initiate for children

Whoever initiates must testify to the child's dangerousness at court hearing

County human service departments must approve

## Chapter 48 Intervention

### Grounds for CHIPS (48.13):

- Child is abused or neglected
- Child alcohol or drug use
- Child has emotional damage that parent/guardian has neglected
- No grounds for mental health treatment

Children's Court can take actions under Chapter 51



## Chapter 938 Intervention

Grounds for Delinquent (938.12 and 938.125):

- Child committed criminal offense
- Child committed ordinance violation
- If child is not competent to be determined Delinquent, can do JIPS

Juvenile Court can take actions under Chapter 51

## Chapter 938 Intervention

### Grounds for JIPS (938.13):

- Child is habitual truant, dropout or runaway
- Child has sexualized behaviors
- Child alcohol or drug use
- Child is uncontrollable; uncontrollable is not defined
- No grounds for mental health treatment

# Challenges for Serving Children in Crisis

## Chapter 51:

- Designed for emergency mental health intervention
- Can act quickly if danger exists
- Not designed for ongoing treatment services
- No authority to compel children and parents/guardians to participate in services
- No authority to place children in residential care

# Challenges for Serving Children in Crisis

## Chapters 48/938:

- Designed for ongoing services to protect child
- Not designed for quick action; dispositions can take months
- No specific grounds for mental health treatment
- Can compel children and parents/guardians to participate in services
- Authority to place children in residential care



# Residential Care Services

Residential care facilities licensed under Chapter 48 to provide care and supervision

Residential care facilities provide therapeutic services but not licensed as treatment providers

Child stays can be under voluntary placement agreement \* or CHIPS/Delinquent/JIPS court order

County human service departments must do permanency planning and comply with federal Title IV-E requirements

\* VPA stays can be 180 days in foster homes, 20 days in shelters and 15 days in group homes.

## Residential Care Services, cont.

Residential treatment options are limited – Winnebago Mental Health Institute and hospital behavioral health units

Youth crisis stabilization facilities are being piloted; can only accept voluntary admissions

2023 Wis. Act 249 authorized creation of crisis urgent and observation centers that will take involuntary admissions

County human service departments sometimes place children out-of-state to find suitable facilities

## Recommendations for Study Committee to Consider

Creation of Psychiatric Residential Treatment Facilities (PRTFs)

Full state funding for Medicaid Crisis Intervention services

Full state funding for Medicaid Community Support Program (CSP) services; CSP can be used for children

Creation of Medicaid Respite service; Medicaid respite currently available only under CLTS waiver

Authority under Chapter 51 to compel children and parents to participate in mental health treatment services

# QUESTIONS?

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