



**Detroit Wayne  
Integrated Health Network**

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**MEMORANDUM**

**Date: May 5, 2020**

**To: DWIHN Residential Providers**

**From: Shirley Hirsch, Residential Department Director**

**RE: Emergent/Urgent Transfer Process in Specialized Residential Settings**

Emergent/Urgent Transfer Process in a Specialized Residential Setting

This process addresses emergent/ urgent situations in a specialized residential facility. Providers will follow this process in the event of extreme emergencies, critical housing or staffing issues.

Consumer/Guardian Notification

- Guardian and consumer will receive an immediate notification of the intent to relocate consumers to a temporary Specialized, Licensed, and Contracted facility due to emergencies in the current facility. Written notification on company letterhead will be forwarded to DWIHN Residential Unit via fax line (313) 989-9525 or email to the [residentialservices@DWIHN.org](mailto:residentialservices@DWIHN.org).
- The provider will provide written notification to the assigned CRSP (Clinically Responsible Service Provider) Case Manager/ Supports Coordinator via fax or email.

Specialized Residential Provider Notification

A written request will indicate reason for the emergency relocation. The request will include the following information:

- Reason for emergency relocation
- Number of staffing shortages and which shift (morning, afternoon, midnight)
- Expected timeframe for return to original facility
- Name, address and phone number of the contracted facility
- Member ID number
- Date of birth
- Guardian name and phone number
- Admission date to the emergency facility

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#### Clinically Responsible Service Provider

- Case Manager/ Supports Coordinator will acknowledge receipt of the notification via email to provider and DWIHN.
- Case Manager / Supports Coordinator will contact the home to discuss additional needs of the consumer.

#### DWIHN Residential Department/Unit Director or Manager

- Residential Department Manager or Unit Director reviews the request and assigns the case to Residential Care Specialist or Care Coordinator to oversee relocation process.

#### Residential Care Specialist / Residential Care Coordinator (If consumer remains in the facility for over 24 hours)

- RCS or RCC will review emergency location in MH-WIN assuring facility is a DWIHN facility.
- Follows up with email notification with address to guardian and CRSP
- Contact the Specialized Residential Provider via email or phone to advise of case assignment.
- Document case assignment and phone call to Residential Provider in MH-WIN chart notes.
- Notify the Guardian and CRSP when consumer is placed in the emergency facility. An internal authorization request will be sent to the authorization specialist to generate a new authorization.

#### Authorization Process

- The address of the facility will be verified prior to entering the authorization.
- The current authorization is end dated in MH-WIN.
- Admission date to the emergency facility is verified.
- New authorization is entered for the new facility.
- Updates consumer assignment in MH-WIN.

#### Specialized Residential Provider Return Notification

- The provider will notify DWIHN Residential Unit when shifts have returned to full capacity and/or the critical issue is resolved and it is safe to return consumers to the facility.
- The provider will provide a staffing roster to DWIHN Residential Unit to verify staffing.
- The provider will submit a return to facility notification on company letterhead to DWIHN Residential Unit via fax (313) 989-9525 or email [residentialreferral@dwihn.org](mailto:residentialreferral@dwihn.org)

#### Authorization Process

- The address of the original facility will be verified prior to entering the authorization.
- The current authorization is end dated in MH-WIN.
- Admission date to the original facility is verified.
- New authorization is entered for the original facility.
- Updates consumer assignment in MHWIN.

During Business Hours – Residential Provider will contact the Residential Unit via phone and written notification to inform of the emergent need to relocate consumer(s). The information required is as follows:

- Reason for emergency relocation
- Number of staffing shortage and which shift (morning, afternoon, midnight)
- Expected timeframe for return to original facility
- Name, address and phone number of the contracted facility
- Member ID Number
- Date of birth
- Guardian name and phone number
- Admission date to the emergency facility

After Business Hours – Residential Provider will transfer consumer(s) to relocated site to assure health and safety. On the next business day, provider will follow the above process.