



## WRAPAROUND MILWAUKEE – RESOURCE GUIDE SERVICE GROUP DESCRIPTION WORKSHEET

**INSTRUCTIONS:** Complete one form for each service group provided by your agency (*i.e., if you provide Life Skills and Transportation – you would complete one form for Life Skills and a second form for Transportation*).

**- ALL FIELDS MUST BE COMPLETED -**

<b>AGENCY NAME</b>		
<b>CONTACT PERSON NAME</b> Resource person for referring party.	<b>PHONE NUMBER (10 digit)</b> Number people will call for an appointment. (     )	
<b>AGENCY CONTACT EMAIL ADDRESS</b>		
<b>DOES THE AGENCY PROVIDE SERVICES AT MORE THAN ONE LOCATION</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>(Required for AODA/Behavioral Health Practitioners)</i> <b>DOES THE AGENCY TAKE T19</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>AGENCIES PROVIDING SERVICES TO CLIENTS AT MORE THAN ONE LOCATION</b> Identify secondary addresses/locations where this service is provided.		
<b>NAME of SERVICE GROUP</b> (See attached list for the group that apply to your agency.)		
<b>AGE RANGE SERVED</b> - Check all that apply <b>for this service group</b> : <input type="checkbox"/> Birth to 3 <input type="checkbox"/> 4 - 10 <input type="checkbox"/> 11 – 15 <input type="checkbox"/> 16-18 <input type="checkbox"/> Adult (age 18 - 65) <input type="checkbox"/> Older Adult (Over 65)		
<b>HOURS OF SERVICE</b> Include days of week-beginning and end times; weekend hours; specialty hours such as “after hours and weekend by appointment”.		
<b>AGENCY SERVICE DESCRIPTION – Limit 3-5 lines of text.</b> (see attached sample descriptions) Agency specific description – <b>do not duplicate Wraparound description</b> for a service.		
<b>APPT. WAITING PERIOD</b> - In days or weeks. Amount of time between request for appt and the actual appt	<b>MAXIMUM NUMBER OF CLIENTS SERVED</b> (For this service)	<b>NUMBER OF SLOTS AVAILABLE</b>
<b>Completed by</b>	<b>Phone</b>	<b>Date</b>

**NOTE:** Descriptions are subject to review and approval by Wraparound Milwaukee prior to inclusion in the resource guide.

**E-mail or fax form to Theresa Randall, Provider Network:**

E-mail: [Theresa.Randall@milwcnty.com](mailto:Theresa.Randall@milwcnty.com)

Fax: (414) 257-7575

**SEE SAMPLES FOR AGENCY DESCRIPTION ATTACHED**  
**WRAPAROUND MILWAUKEE – RESOURCE GUIDE**

# SERVICE GROUP DESCRIPTION WORKSHEET

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## SERVICE GROUPS

- AODA Services
- Child Care/Recreation
- Crisis
- Day Treatment
- Family/Parent Support Services
- Foster Care
- Group Home
- In-Home
- Life Skills
- Med. Management/Nursing Services
- Outpatient Therapy
- Psychological Assessment
- Residential Treatment
- Respite
- Transportation
- Youth Support Services

## SAMPLE SERVICE DESCRIPTIONS

### **Service Group:** Outpatient Therapy

#### **Sample Agency Service Description:**

Acme Therapy Group offers individual and family therapy services emphasizing a holistic approach in treatment. Whether you are experiencing problems with depression, stress or managing your child's behavior, we have trained staff that can help you and your family. Many of our staff have staff special training and experience with problems related to post traumatic stress disorder, anger management, grief management, and eating disorders. Our clinic offers flexible hours and several convenient locations to serve you. Please contact our office for more information.

### **Sample Service Group:** Child Care/Recreation

#### **Sample Service Description:**

All Kids Recreation Center offers after-school programming that focuses on helping kids learning to get along with other. We offer individual and group recreation activities supervised by training recreation staff. Help with homework and educational computer work is provided daily. The summer recreation program focuses on leisure skill training, fun group activities and outings to community based sports, recreation and educational programs. Youth are welcome to bring their own lunch or sign up in advance for our daily bag lunch. A calendar of the upcoming week's activities is send home to parents each Friday.