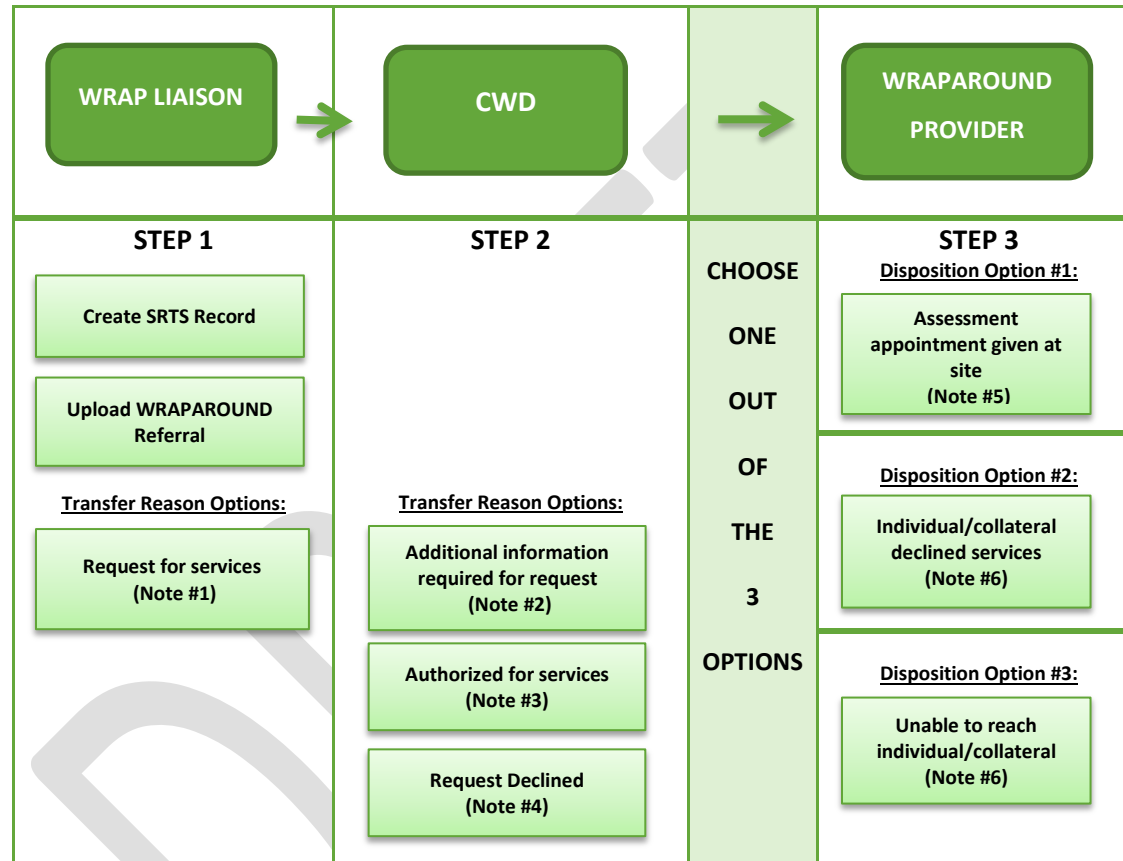


**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
SERVICE REQUEST TRACKING SYSTEM (SRTS)**

**CHILD WELFARE DIVISION (CWD) ADMINISTRATION WRAPAROUND SRTS WORKFLOW
AUTHORIZATION – REFERRAL BEGINNING WITH LIAISON**



Note #1: Liaison to collaborate with referring party to obtain all necessary documents for a Wrap packet.

Note #2: If CWD needs additional information to determine approval for this request, they will transfer back to the Liaison with the transfer reason of “Additional information required for the request.”

Note #3: The provider has 7 days from this contact to enroll the child/youth. (3 days for urgent referrals) CWD to notify WRAP Liaison the provider has been authorized for services by forwarding email notification alert.

Note #4: If a request for authorization is declined, CWD will transfer the record back to the Liaison for linkage.

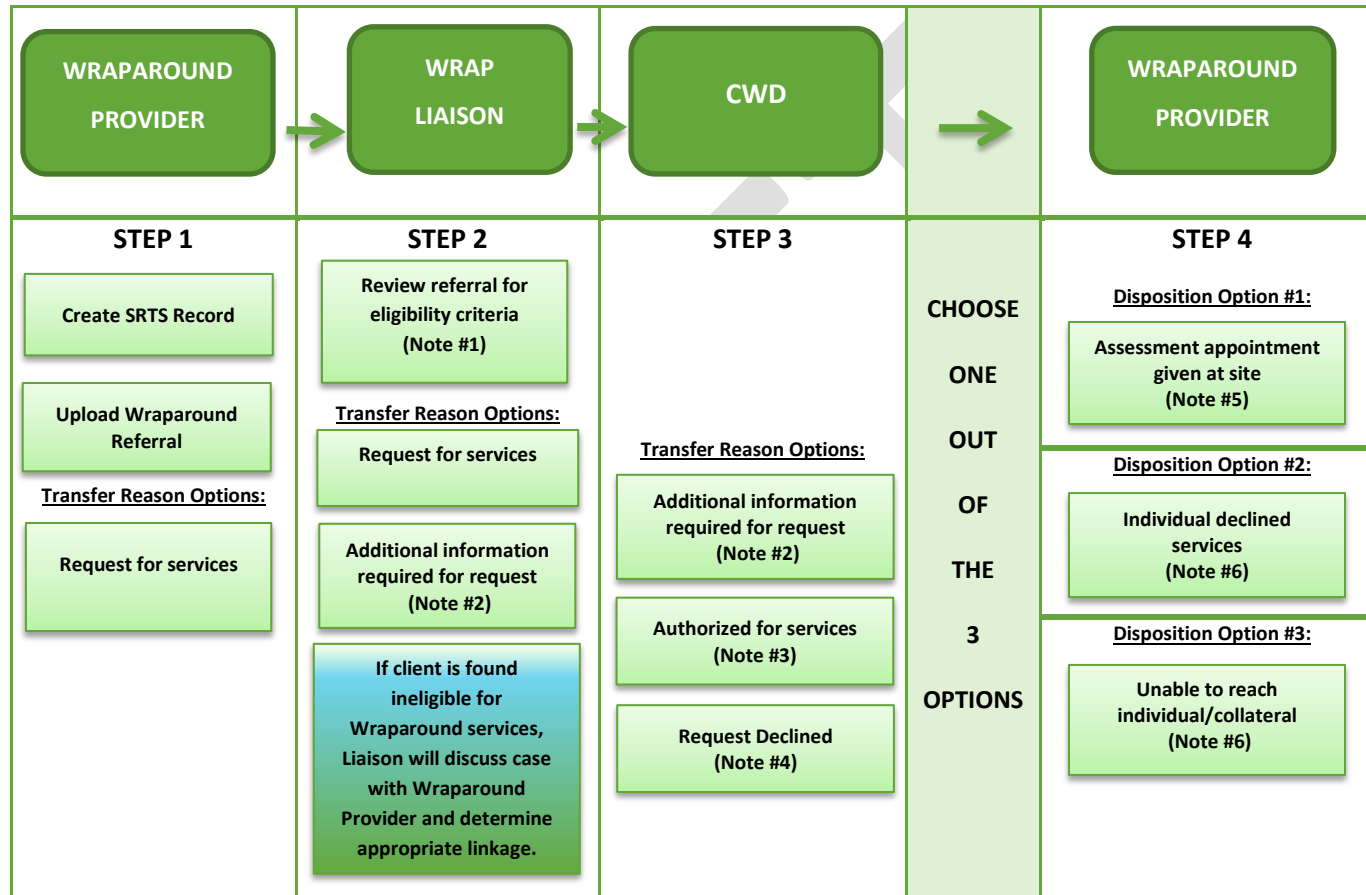
Note #5: Assessment is the enrollment date. Provider to notify CWD via email once the Provider section of the disposition form is completed in the SRTS.

Note #6: If the client declines DMH services or the provider is unable to reach individual, provider to discuss with Liaison.

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
SERVICE REQUEST TRACKING SYSTEM (SRTS)**

CHILD WELFARE DIVISION (CWD) ADMINISTRATION WRAPAROUND SRTS WORKFLOW

AUTHORIZATION – REFERRAL BEGINNING WITH WRAPAROUND PROVIDER (SELF-REFERRALS)



Note #1: Liaison to collaborate with referring party to obtain all necessary documents for a Wrap packet.

Note #2: If Liaison or CWD needs additional information to determine approval for this request, they will transfer back to the Liaison with the transfer reason of "Additional information required for the request."

Note #3: The provider has 7 days from this contact to enroll the child/youth. (3 days for urgent referrals) CWD to notify WRAP Liaison the provider has been authorized for services by forwarding email notification alert.

Note #4: If a request for authorization is declined, CWD will transfer the record back to the Liaison for linkage.

Note #5: Assessment is the enrollment date. Provider to notify CWD via email once the Provider section of the disposition form is completed in the SRTS.

Note #6: If the client declines DMH services or the provider is unable to reach individual, provider to discuss with Liaison.