

DCFS 4213 Approval Process Flow Chart

The SCSW must ensure all management signatures are obtained within 24 hours of the OHCMD approval.

The DCFS 4213, Special Placements and 1:1 Requests, form must be approved in the following order:

1. CSW →
2. SCSW →
3. Out-of-Home Care Management Division (OHCMD) Division Chief/Designee →
4. SCSW →
5. ARA →
6. RA →
7. Service Bureau Deputy Director (DD) →
8. Bureau of the Medical Director (BMD) Staff →
9. Bureau of Finance and Administration →
(if net county costs will be incurred)
10. BMD Staff →
 1. CSW
 2. OHCMD Chief/Designee
 3. Service Bureau DD