



# Webinar Starting Soon!

In the meantime, please note...

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- Check your settings in the audio pane if you are experiencing audio problems.
- During the presentation, you can send questions to the webinar organizer, but these will be held until the end.

This webinar and the PowerPoint will be available on the NWI website at <http://nwi.pdx.edu/previous-nwi-webinars>.



# Behavioral Health is Essential To Health



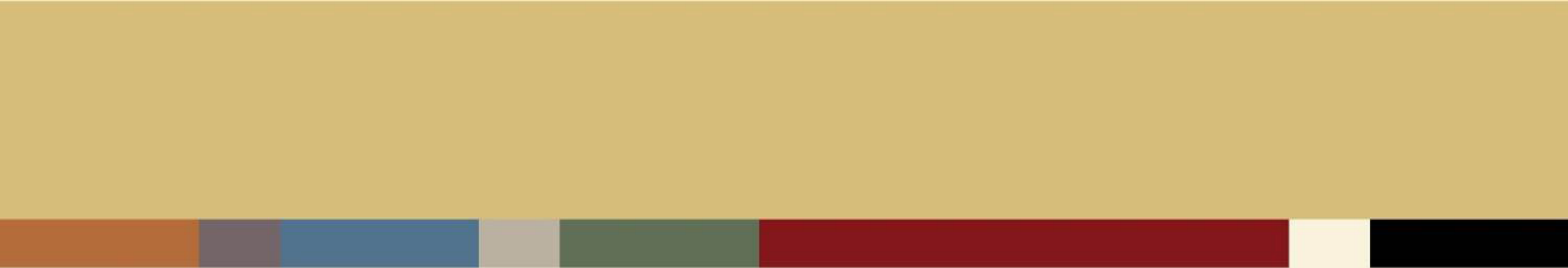
Prevention Works



Treatment is Effective



People Recover



*This webinar is hosted by the National Wraparound Initiative, a partner in the National TA Network for Children's Behavioral Health, operated by and coordinated through the University of Maryland.*

*This presentation was prepared by the National Technical Assistance Network for Children's Behavioral Health under contract with the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Contract #HHSS280201500007C. The views expressed in this presentation and by speakers and moderators do not necessarily represent the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.*

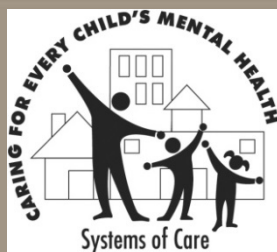


# Practice, Organization, and System Standards for Wraparound: A New Resource from the National Wraparound Initiative

Eric J. Bruns, PhD

Jennifer Schurer Coldiron, MSW, PhD

University of Washington Wraparound Evaluation & Research Team (WERT)

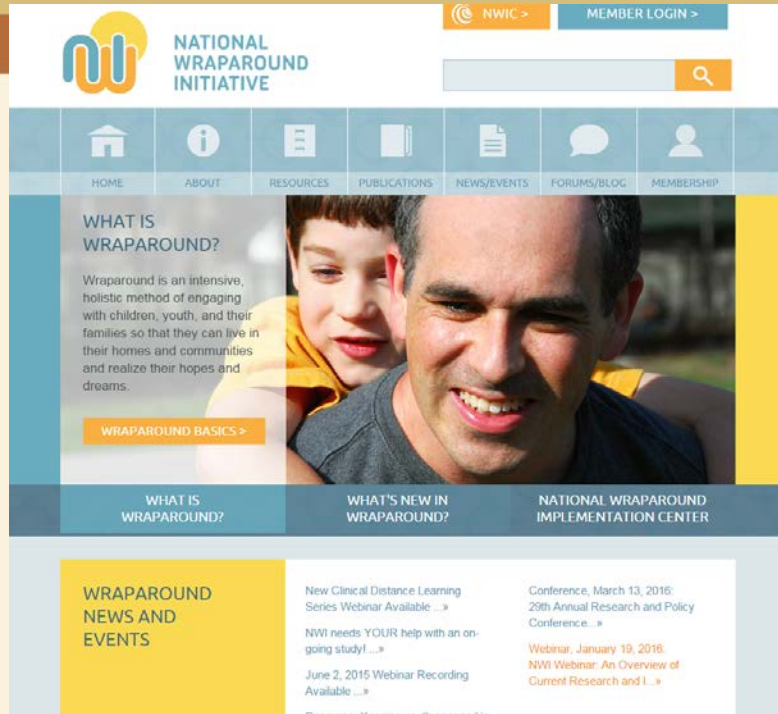


**THE TA NETWORK**  
the national technical assistance network for children's behavioral health



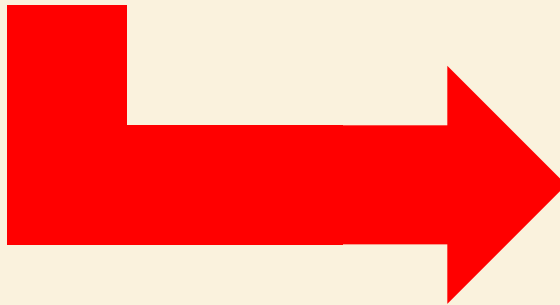


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**SIGN UP FOR OUR NEWSLETTER**



# Today's webinar



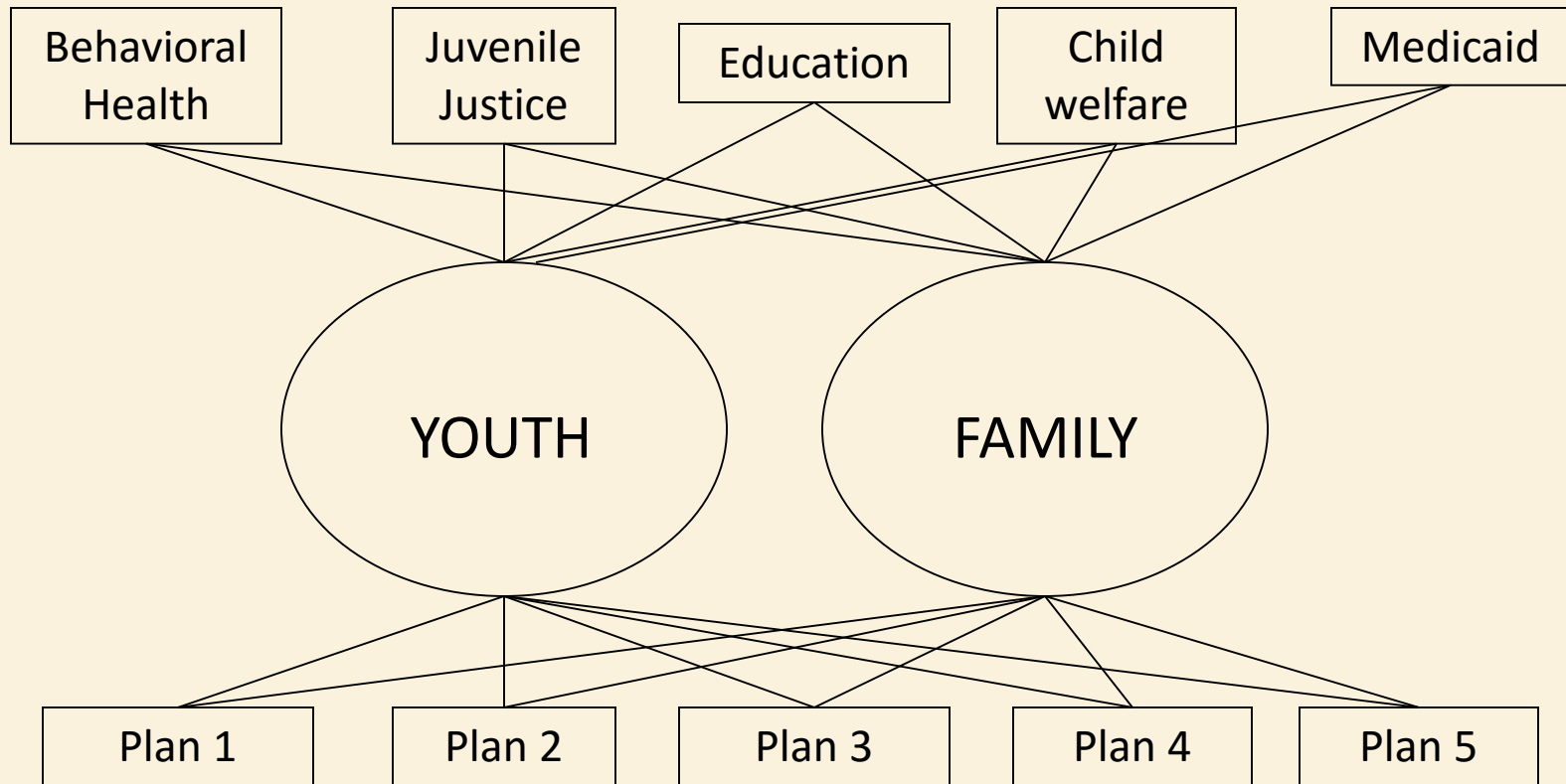
- The importance of system and program supports to Wraparound quality, fidelity, and outcomes
- Developing a set of NWI implementation and practice standards for Wraparound
- Where you can find the standards, and how you can use them (now and in the future)

# Poll

What is your current role within Wraparound?

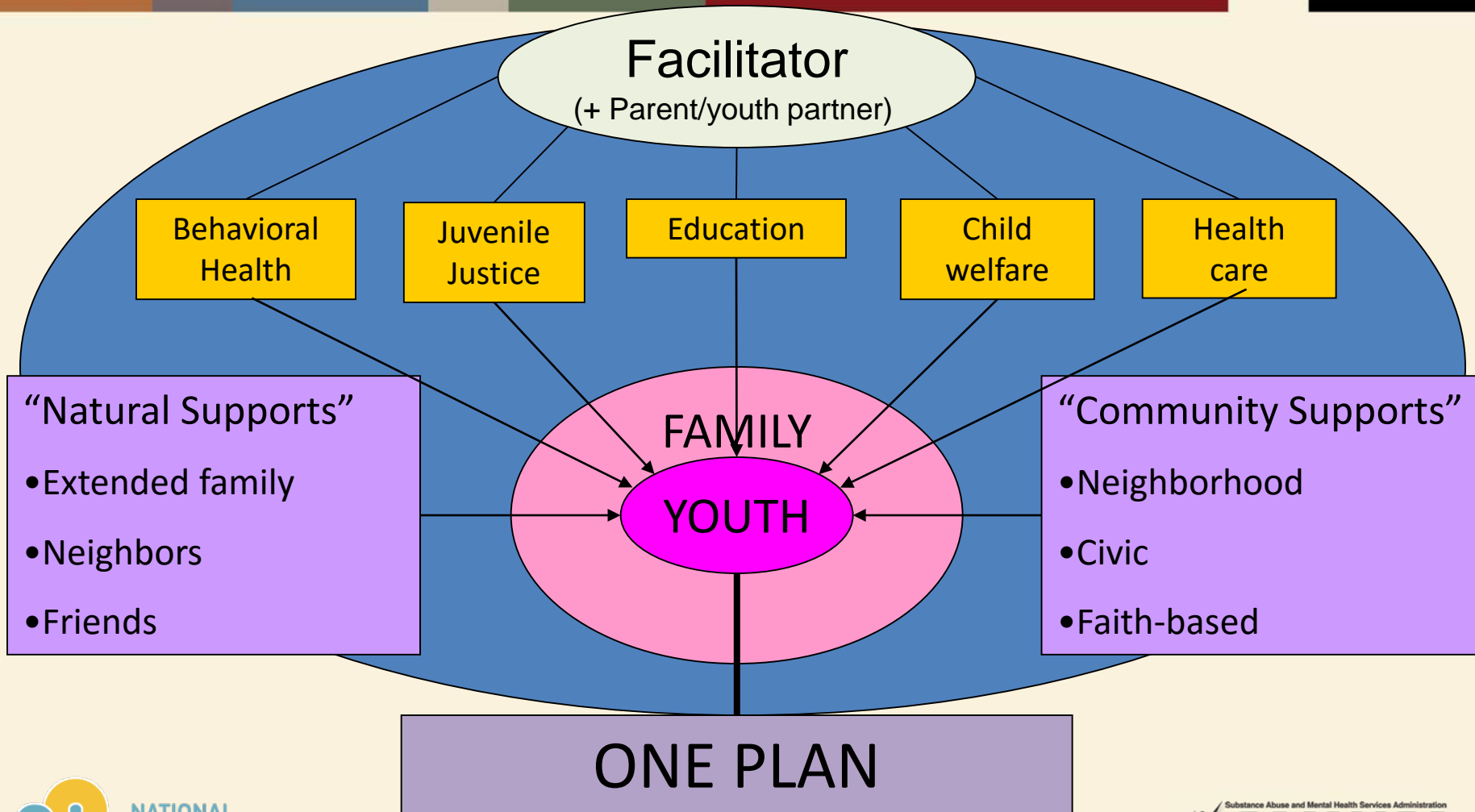
- Facilitator
- Program Administrator
- Supervisor
- System or State Administrator
- Other

# Traditional services rely on professionals and result in multiple plans

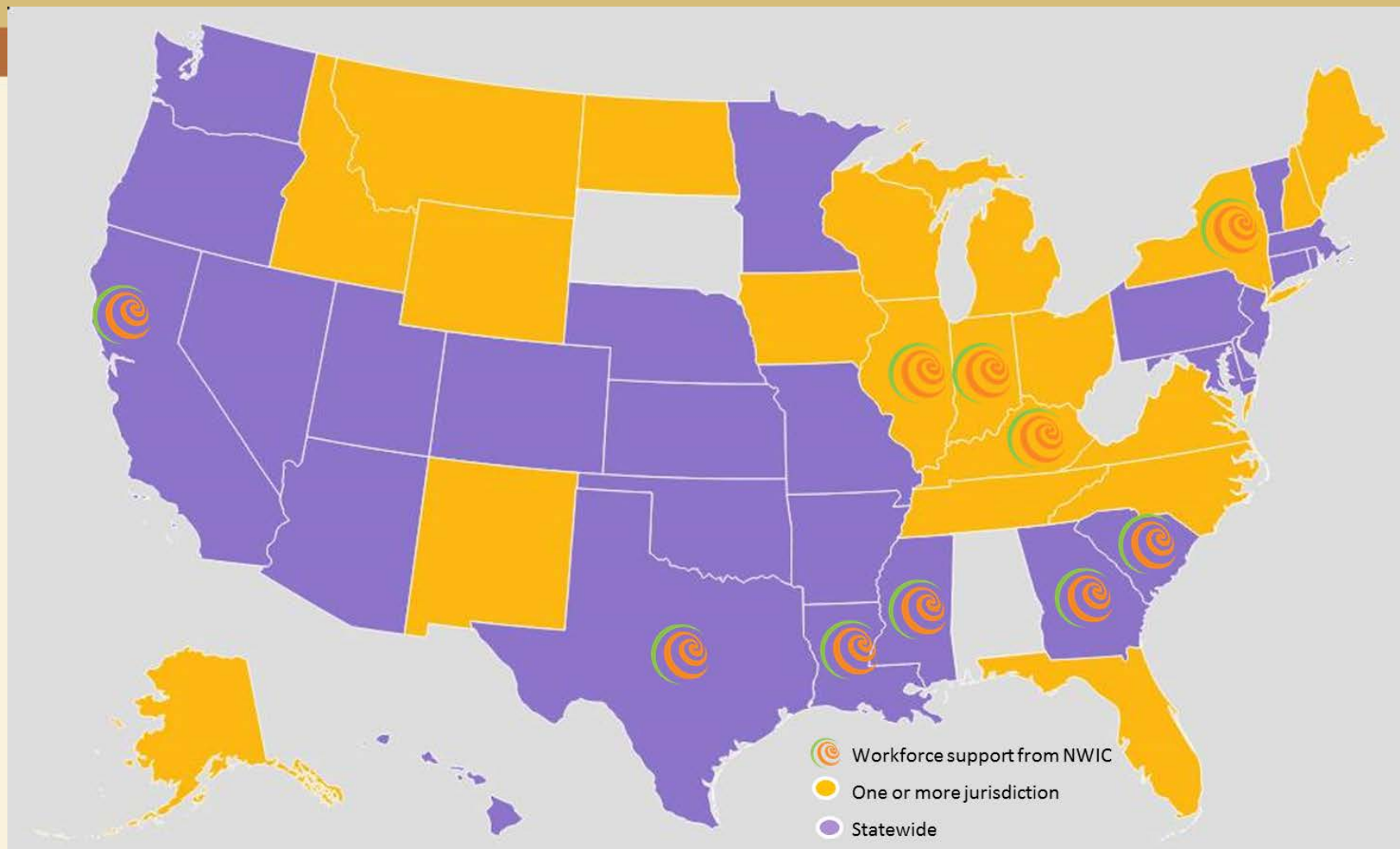




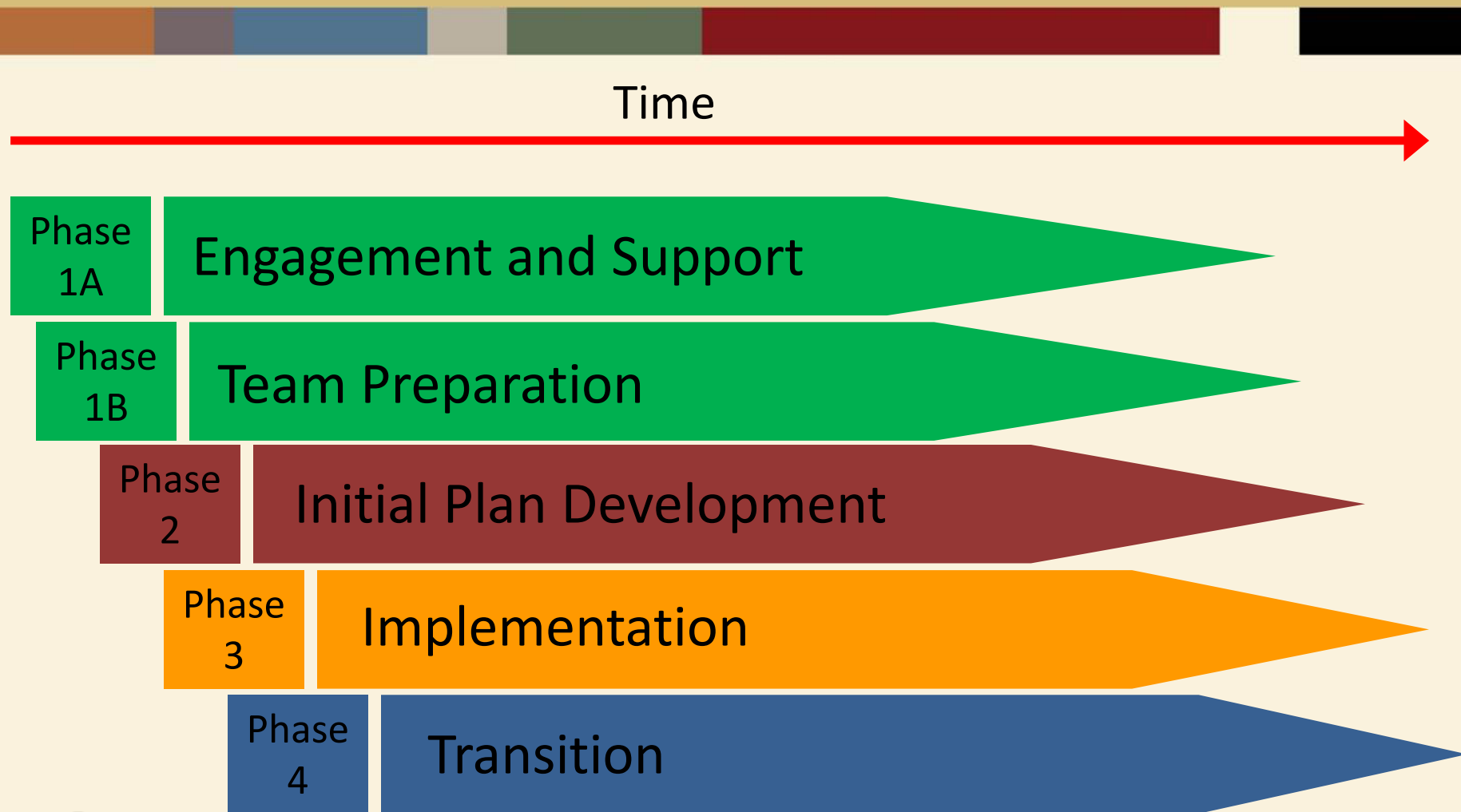
# Role of a Facilitator in Wraparound Integrated Care Models



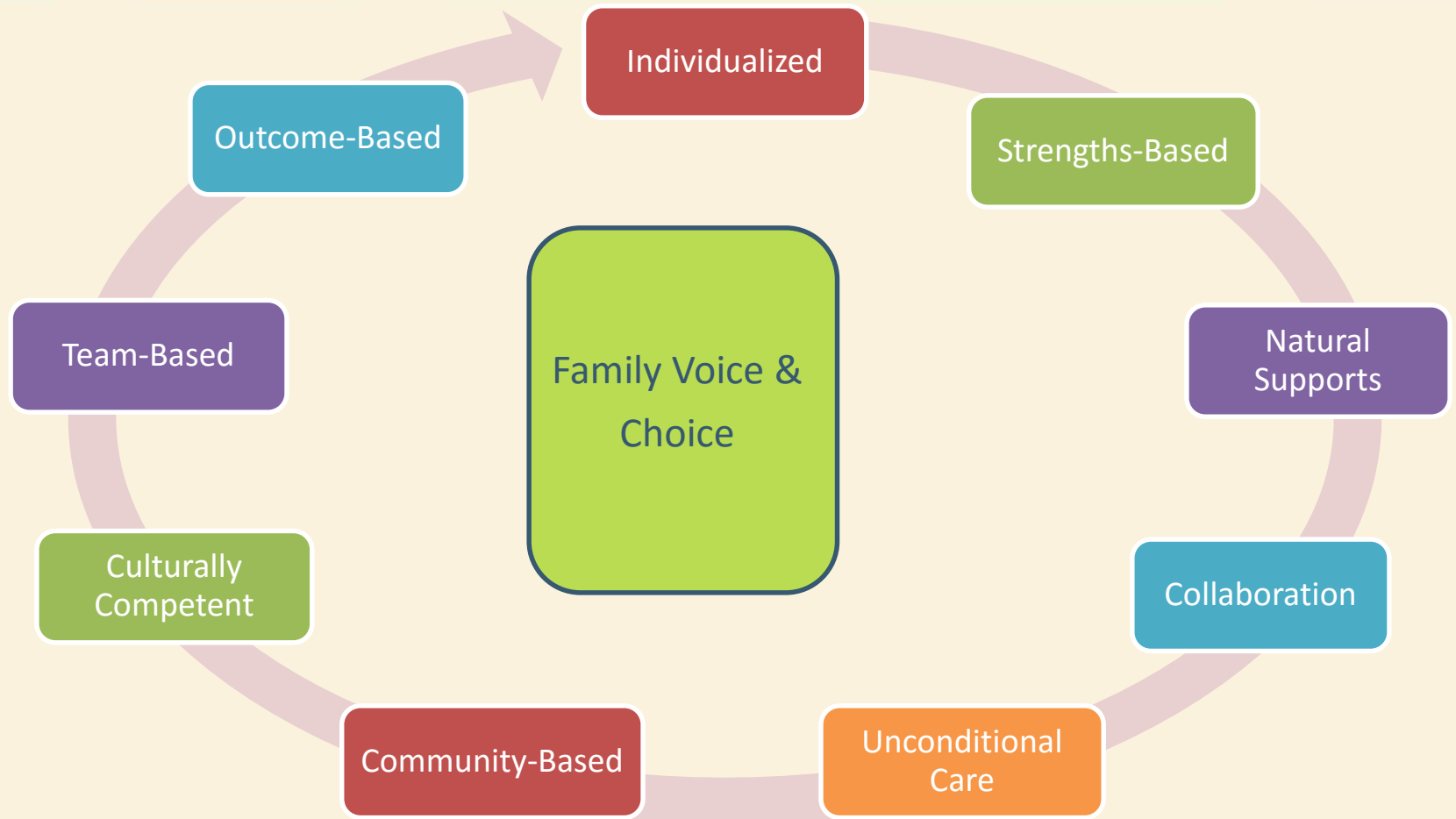
# Wraparound across the USA



# The Four Phases of Wraparound



# Principles of Wraparound



# Wraparound Research Base

## 13 Published Controlled Studies of Wraparound

Study	System	Control Group Design	Comparison Tx	N
1. Hyde et al. (1996)*	Mental health	Non-equivalent	Traditional Resid./comm. services	69
2. Clark et al. (1998)*	Child welfare	Randomized	Child welfare services as usual	132
3. Evans et al. (1998)*	Mental health	Randomized	Traditional CW/MH services	42
4. Bickman et al. (2003)*	Mental health	Non-equivalent	Mental health services as usual	111
5. Carney et al. (2003)*	Juvenile justice	Randomized	Conventional JJ services	141
6. Pullman et al. (2006)*	Juvenile justice	Historical	Traditional mental health services	204
7. Rast et al. (2007)*	Child welfare	Matched	Traditional CW/MH services	67
8. Stambaugh et al (2007)	Mental health	Non-equivalent	Multisystemic Therapy (MST)	320
9. Rauso et al. (2009)	Child welfare	Matched	Residential services	210
10. Mears et al. (2009)	MH/Child welfare	Matched	Traditional child welfare services	121
11. Grimes et al. (2011)	Mental health	Matched	Usual care	211
12. Bruns et al. (2014)	Child welfare	Randomized	Intensive Case Management	93
13. Jeong et al. (2014)	Juvenile justice	Non-equivalent	Other court-ordered programs	228

# Outcomes of Research Base

- Better functioning and mental health outcomes
- Reduced recidivism and better juvenile justice outcomes
- Improved school success
- Child welfare case closures and permanency
- Lower costs and fewer residential/inpt. stays
  - Wraparound Milwaukee
  - MHSPY in Massachusetts
  - CMS PRTF Waiver evaluation
  - L.A. County
  - NJ, Maine, more...





# Outcomes Depend on Implementation

At a **practice level**, Wraparound teams often fail to:

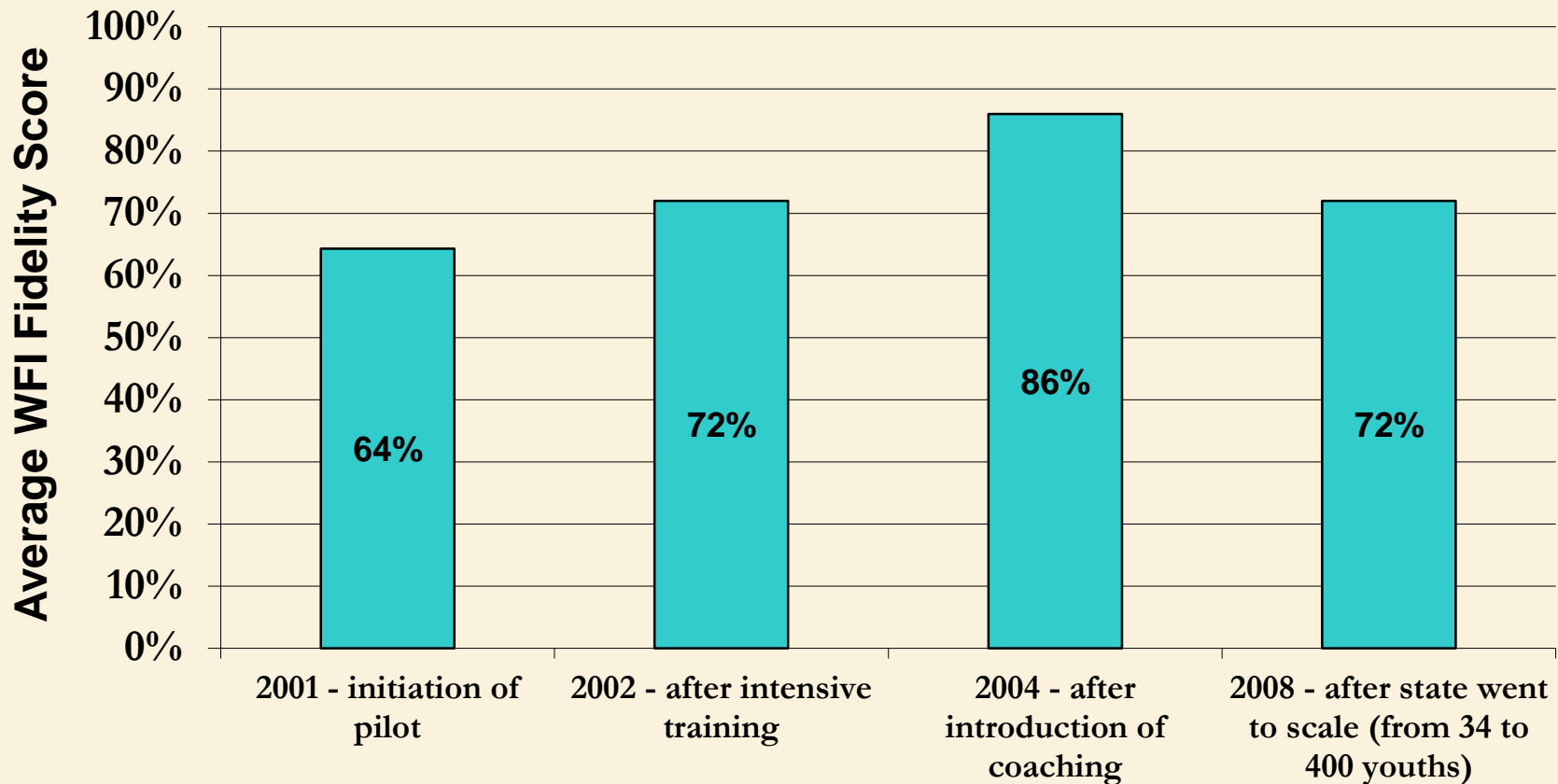
- Engage key individuals in the Wraparound team
- Connect youth in community activities and things they do well; activities to help develop friendships
- Use family/community strengths
- Incorporate natural supports, such as extended family members and community members
- Use evidence-based clinical strategies to meet needs
- Continuously assess progress, satisfaction, and outcomes

# Outcomes Depend on Implementation

At a **system and program level**, Wraparound initiatives often fail to:

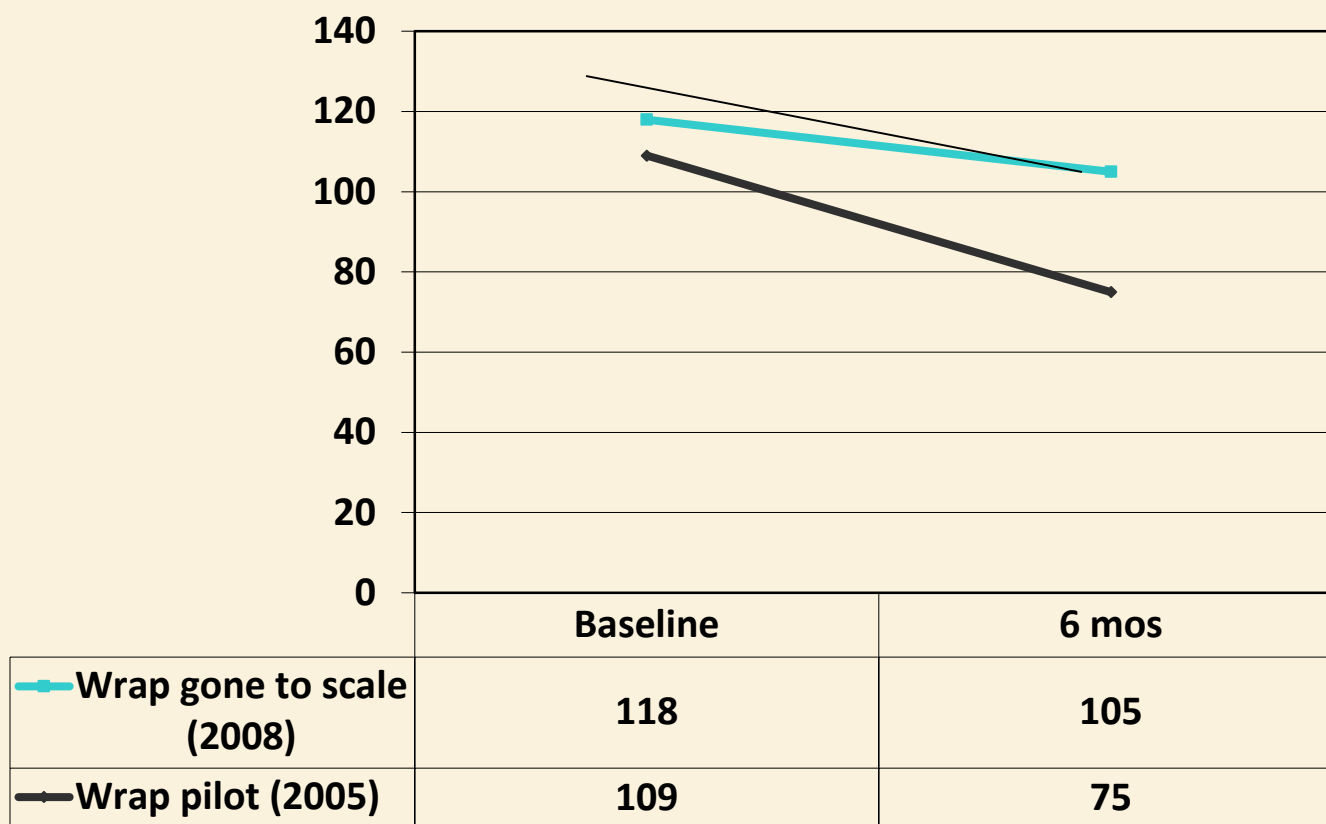
- Build broad, diverse community coalitions to support and oversee the program and its implementation
- Invest in ongoing skill development for workers in key Wraparound roles
- Invest in and organize a comprehensive array of community-based services and supports
- Ensure services are based on research for “what works”
- Provide effective data-informed supervision
- Build and use data systems that can provide needed information and continual quality improvement

# Caregiver WFI Fidelity Over Time



# What Happened to the Outcomes?

Significantly less improvement in functioning:



# What Leads To Positive Outcomes?





Making Progress

# DEVELOPING STANDARDS FOR WRAPAROUND





# Poll



Does your Wraparound organization currently have written implementation or practice standards?

- Yes
- No
- I don't know

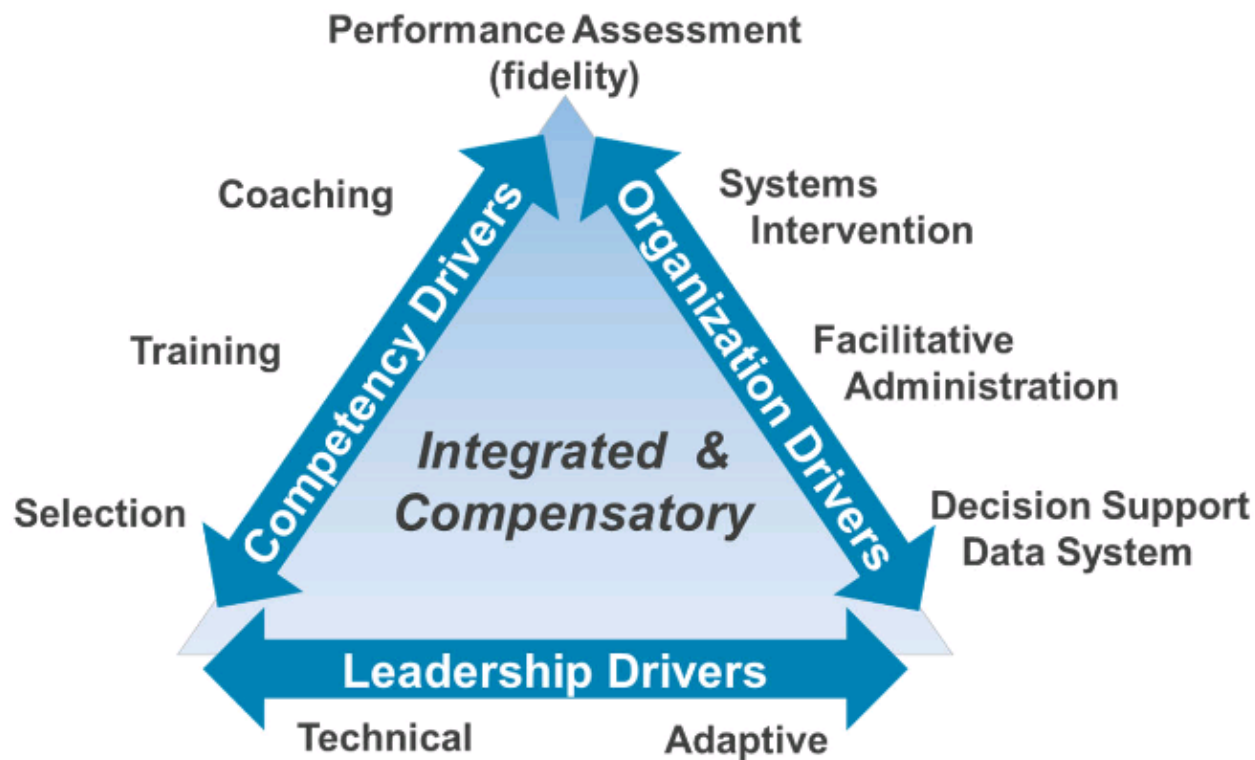


# Standards Synthesized Best-Available Evidence and Information

- Reviewed existing Wraparound practice and implementation guidance and support materials
- Reviewed implementation science and workforce development literature
- Reviewed existing Wraparound effectiveness research
- Reviewed existing Wraparound fidelity measurement tools and common outcome measures
- Consulted with leaders of NWI, NWIC, and NTTAC
  - National Wraparound trainers, system developers, evaluators, and researchers

# NIRN's Implementation Framework

## Implementation Drivers





# NWI's Necessary Support Conditions Also Used



- **Community partnership**
  - Among key stakeholder groups to plan, implement and oversee Wraparound as a community process
- **Collaborative action**
  - To take steps to translate the Wraparound philosophy into concrete policies, practices and achievements that work across systems
- **Fiscal policies and sustainability**
- **Access to needed supports and services**
  - That Wraparound teams need to fully implement their plans
- **Human resource development and support**
  - To fully implement the Wraparound model
- **Accountability**



# Fidelity and Outcomes Areas an Outgrowth of WFAS and Research



## Five key elements of Wraparound practice:

1. Effective Teamwork
2. Use of Natural and Community Supports
3. Driven by Strengths and Families
4. Based on Needs
5. Outcomes-based Process

## Common outcome domains:

- Satisfaction
- School and Community Functioning
- Interpersonal Functioning
- Caregiver confidence
- Residential Stability and Restrictiveness



# Standards Organized into Seven Areas



## Five Wraparound Implementation Standards Areas

- Hospitable System Conditions
- Competent Staff
- Effective Leadership
- Facilitative Organizational Support
- Utility-focused Accountability Mechanisms

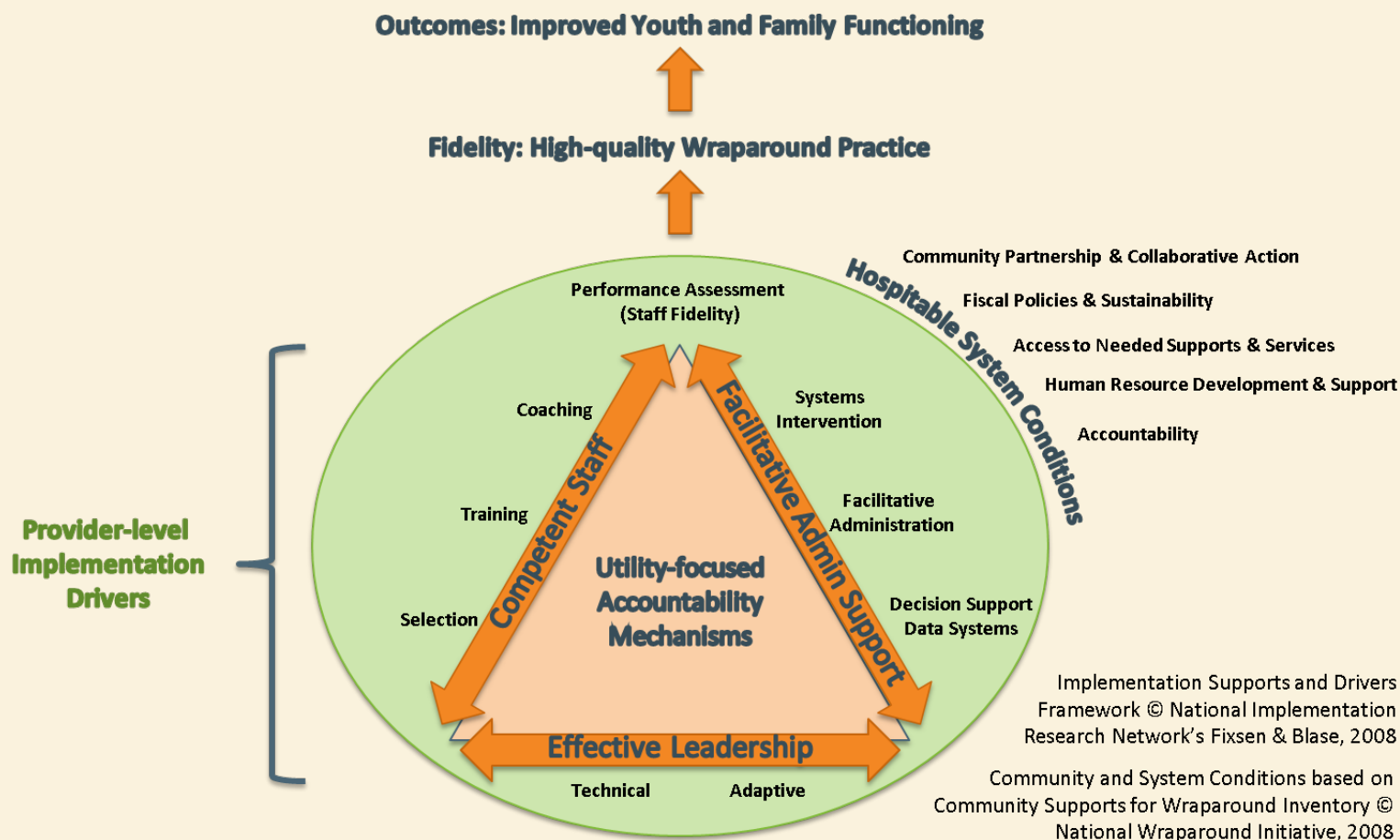
Wraparound  
provider-level

## Two Output-Related Standards Areas

- Fidelity: High Quality Wraparound Practice
- Outcomes: Improved Youth and Family Functioning



# Integrated Standards Framework





The Final Product

# INTRODUCTION TO THE STANDARDS



# Your Input is Welcome



You should have received a DRAFT copy of the standards document.  
If you did not receive the document, you can access it here:

<http://tinyurl.com/wrapstand>

We welcome your input or questions using the chat box.



# Terminology Used in the Standards



- **Facilitator:**

The professional primarily in charge of facilitating team meetings, coordinating the family's service plan, and generally moving the Wraparound process forward

- **Wraparound provider organization:**

The entity responsible for hiring and overseeing Wraparound facilitators

- **Wraparound Initiative:**

The collective momentum and activities undertaken by a wide variety of stakeholders to develop, strengthen, and oversee a System of Care and the implementation of the Wraparound model within their community



# Implementation Area 1: Competent Staff

## Competent Staff Indicators

<b>1A</b>	Stable Workforce
<b>1B</b>	Qualified Personnel
<b>1C</b>	Rigorous Hiring Processes
<b>1D</b>	Effective Training
<b>1E</b>	Initial Apprenticeship
<b>1F</b>	Ongoing Skills-based Coaching
<b>1G</b>	Meaningful Performance Assessments

# 1C: Rigorous Hiring Processes

The Wraparound provider organization has ***high-quality written job descriptions*** and ***interviewing and hiring protocols*** for each of the relevant positions. Job descriptions ***reflect best practices and state of the art knowledge*** about Wraparound skills and expertise, and have ***clear expectations for performance***. Interview and selection protocols include ***behavioral questions or direct observation of tasks***, and require a ***writing exercise or sample***.





# 1F: Ongoing Skills-based Coaching



Facilitators have at least ***bi-weekly contact with a coach*** or a supervisor who serves as a coach. Coaching activities are ***integrated into practice*** and ***aimed at improving the staff's skills*** in working with youth and caregivers. Coaching includes ***at least quarterly formal assessment*** of practice in multiple settings via observations, recordings, and/or review of documentation.

# Implementation Area 2: Effective Leadership

## Effective Leadership Indicators

2A	High-quality Leadership
2B	Transparent Organizational Practices
2C	Strong Wraparound Implementation Leadership



**2C:** Supervisors and the wider organizational leadership ***plan for and support the high-quality implementation of Wraparound.*** They are seen as ***reliable thought leaders,*** and effectively ***address barriers and find solutions*** as they come up during Wraparound implementation.



# Implementation Area 3: Facilitative Organizational Support

## Facilitative Organizational Support Indicators

<b>3A</b>	Manageable Workloads
<b>3B</b>	Adequate Compensation and Resources
<b>3C</b>	High Morale and Positive Climate
<b>3D</b>	Fiscally Sustainable
<b>3E</b>	Routine Oversight of Key Organizational Operations

# 3A: Manageable Workloads

Facilitators have ***manageable caseloads*** (e.g., 8-12 families or less, depending on the complexity of their needs). Supervisors ***supervise 6 or fewer facilitators*** and/or other individuals. There is adequate staffing for staff to successfully do their jobs.

# 3D: Fiscally Sustainable

The Wraparound provider organization has a ***sustainable funding plan for the next 3-5 years.*** Data demonstrating ***costs and cost-effectiveness*** are available and disseminated.

# Implementation Area 4: Utility-Focused Accountability Mechanisms

## Utility-focused Accountability Mechanisms Indicators

4A	Effective Data Management
4B	Purposeful Training & Coaching Evaluation
4C	Routine Fidelity Monitoring
4D	Routine Outcomes Monitoring

# 4C: Routine Fidelity Monitoring

The Wraparound provider organization ***routinely and reliably measures fidelity*** to the Wraparound model. This information is ***analyzed and shared with relevant stakeholders*** (staff, administrators, families, payers, etc.). Even if collected by an external party, fidelity data are clearly ***built into internal practice routines*** within the Wraparound provider organization, and there are strong feedback loops that are ***used to enact program improvements***.



# Implementation Area 5: Hospitable System Conditions

## Hospitable System Conditions Indicators

5A	Appropriate Wraparound Population
5B	Empowered Community Leadership and Support
5C	Active Caregiver and Youth Leadership
5D	Implementing a Single Plan of Care
5E	Collaborative Action
5F	Sustainable Fiscal Policies
5G	Adequate and Appropriate Wraparound Access
5H	Robust Array of Supports and Services
5I	System Accountability



# 5A: Appropriate Wraparound Population

Youth eligible for and enrolled in Wraparound are ***at risk for out-of-home placement*** or are ***among those with the most complex needs*** in the community. For example: 75% of more of the youth engaged in Wraparound were transitioning home from or at imminent risk of an ***out-of-home placement*** at the time of referral; 90% of more of the youth engaged in Wraparound have ***two or more Axis 1 diagnoses, multi-system/agency involvement, multiple actionable items*** on an assessment such as the CANS, and/or three or more ***adverse life events or traumas***.

# 5H: Robust Array of Supports and Services

Wraparound-enrolled youth and families have access to a ***full array of services and supports that Wraparound teams need to fully implement their plans*** and meet the youth's and families' needs, including, but not limited to, intensive in-home services, mentoring, respite, family and youth peer support, and mobile crisis response and stabilization. ***Evidence-based clinical treatments and therapies for major clinical needs are readily available.***



# Fidelity: High-Quality Wraparound Practice

## High-Quality Wraparound Practice Indicators

F1	Timely Engagement and Planning
F2	Outcomes-based Process
F3	Effective Teamwork
F4	Use of Natural/ Community Supports
F5	Based on Needs
F6	Driven by Strengths
F7	Determined by Families
F8	Planned for Transitions and Follow-Up

# F1: Timely Engagement and Planning

Youth and families are ***engaged in Wraparound services within 10 days of a referral*** and develop their initial ***Wraparound plan within 30 days*** of being engaged. Then, ***teams meet regularly*** (at least every 30-45 days) to review and modify the Plan of Care as needed.

# F2: Outcomes-based Process

Success of the Wraparound plan—including progress toward meeting needs, strategy implementation, and task completion—is ***measured objectively, reviewed routinely, and used to inform changes to the plan as needed***. Needs statements are linked to measurable outcomes and data from standardized instruments are integrated into the planning process where possible.

A Facilitator's Guide to  
Outcomes-based Process will  
be available later this fall!



# Outcomes: Improved Youth and Family Functioning

## Improved Youth and Family Functioning Indicators

O1	Satisfied Youth and Families
O2	Improved School Functioning
O3	Improved Functioning in the Community
O4	Improved Interpersonal Functioning
O5	Increased Caregiver Confidence
O6	Stable and Least Restrictive Living Environment
O7	Positive Exit from Wraparound

# O3: Improved Functioning in the Community

Youth experience improved functioning in the community as a result of their involvement in Wraparound. Youth have ***not experienced or have reduced*** the frequency of ***ER visits*** and ***police contact***, and they are ***participating in community activities***.

# O6: Stable and Least Restrictive Living Environment

Youth are stably cared for in the community. Youth have ***not had a new placement in an institution*** (such as detention, psychiatric hospital, treatment center, or group home) and/or ***have not moved between residential settings.***





# Poll



What is your overall reaction to the idea of NWI disseminating these standards?

- Positive: Will aid Wraparound sites greatly
- Neutral: Won't be used or make much difference
- Negative: These could cause problems
- Not sure



Continuous Quality Improvement

# USING THE STANDARDS

# Potential Uses of the Standards in the Field

- Guiding a **self-assessment** of Wraparound program quality
- Providing structure to a Wraparound **program planning** process
- Assisting in choosing data elements to incorporate into a **continuous quality improvement** program
- Informing performance-based **contracting**

# In the Coming Year...

- Widely disseminate the Standards
- Develop a self-assessment protocol for Wraparound provider organizations
  - Will have options for review at various levels
- Create an online assessment tool to facilitate process
  - Will have data analysis and reporting capabilities
  - May connect users to additional resources for quality improvement

# Poll

How interested would you be in doing a Standards self-assessment with your Wraparound program or initiative?

- Not very interested – we aren't ready for this yet
- Not very interested – I think we know how well we are doing
- I'd be interested but not sure about the initiative as a whole
- I'd be interested and I think our initiative would be as well
- Not sure

# Other resources

- Intensive Care Coordination Using High-Quality Wraparound for Children with Serious Behavioral Health Needs: State and Community Profiles

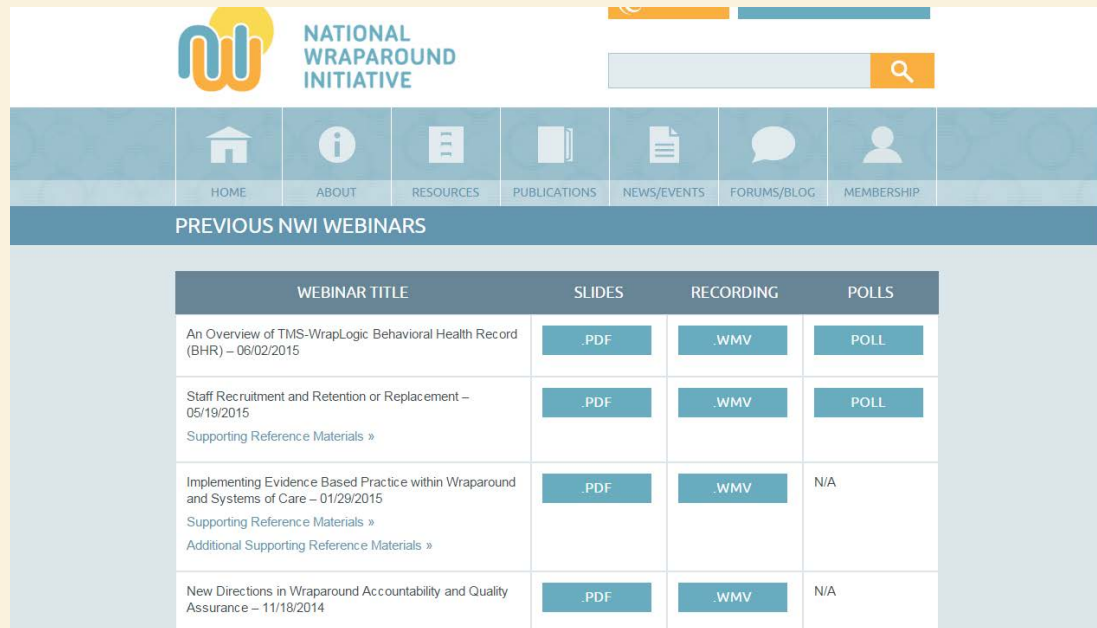
<http://www.chcs.org/resource/intensive-care-coordination-using-highquality-Wraparound-children-serious-behavioral-health-needs-statecommunity-profiles/>

- Care Management Entities: A Primer

<http://www.chcs.org/resource/care-management-entities-a-primer/>

# Q & A / Thank you!

Today's slides and resources will be available from:  
<http://nwi.pdx.edu/previous-nwi-webinars/>



The screenshot shows the National Wraparound Initiative website. At the top is the logo and a search bar. Below is a navigation menu with icons for Home, About, Resources, Publications, News/Events, Forums/Blog, and Membership. The main content area is titled "PREVIOUS NWI WEBINARS" and contains a table with four columns: Webinar Title, Slides, Recording, and Polls. The table lists four webinars with links to their respective slides, recordings, and polls.

WEBINAR TITLE	SLIDES	RECORDING	POLLS
An Overview of TMS-WrapLogic Behavioral Health Record (BHR) – 06/02/2015	<a href="#">.PDF</a>	<a href="#">.WMV</a>	<a href="#">POLL</a>
Staff Recruitment and Retention or Replacement – 05/19/2015 <a href="#">Supporting Reference Materials »</a>	<a href="#">.PDF</a>	<a href="#">.WMV</a>	<a href="#">POLL</a>
Implementing Evidence Based Practice within Wraparound and Systems of Care – 01/29/2015 <a href="#">Supporting Reference Materials »</a> <a href="#">Additional Supporting Reference Materials »</a>	<a href="#">.PDF</a>	<a href="#">.WMV</a>	N/A
New Directions in Wraparound Accountability and Quality Assurance – 11/18/2014	<a href="#">.PDF</a>	<a href="#">.WMV</a>	N/A