

Research-Based Innovations in Wraparound: Resource Sheet 1 Workforce Development

Wraparound is a complex intervention that is focused on improving the well-being of children and youth with the highest levels of mental health and related needs, and their families. Wraparound engages the young people and their family members—together with friends, extended family, other supporters and service providers—in a collaborative planning process aimed at improving outcomes. In order to be successful in this complex work, Wraparound practitioners need to acquire a variety of skills and competencies, including those for working in a strengths-based and empowerment-oriented manner with the young people and their families; building collaborative relationships between and among family members and their service and support providers; and guiding their collaborative efforts to create, monitor and carry out a Wraparound team plan.

A well-functioning Wraparound program draws on specially trained staff in a variety of roles. Key staff roles for Wraparound include practitioners—Wraparound facilitators/care coordinators, and family and youth peer partners—as well as staff who provide training, coaching and supervision for Wraparound practitioners. A successful workforce development approach includes strategies to ensure that the Wraparound program has sustainable capacity to:

- 1. Provide initial training to practitioners so that they are oriented to Wraparound theory, principles and practice, introduced to the skills and competencies required for high quality practice, and given the opportunity to observe and practice the skills.
- Provide ongoing coaching, training and supervision to ensure that practitioners are progressing toward or maintaining a high level of competence in their roles and that they are providing high-fidelity Wraparound. Assessment of practitioners' competence should be based on reliable feedback from validated measures.
- 3. Provide specialized training and ongoing support and assessment to ensure that supervisors and coaches/trainers are also progressing toward or maintaining a high level of competence in their roles.

A robust workforce development strategy also includes specialized training for other people whose roles intersect with or support Wraparound, for example, administrators in Wraparound programs, administrators in collaborating child- and family-serving systems, clinicians who work with Wraparound teams, and people who provide mentoring, behavior support or skills training to youth in Wraparound.

Core Resources Related to Workforce Development

The National Wraparound Initiative (<u>NWI</u>) and the National Wraparound Implementation Center (<u>NWIC</u>), as well as the partners in the Technical Assistance Network for Children's Behavioral Health, have produced a number of resources that provide information and guidance around workforce development for Wraparound. The "core" resources are primarily overviews, key considerations, and information about planning for workforce development.

- <u>Phases and Activities of the Wraparound Process</u> and <u>Ten Principles of Wraparound</u>—The NWI's consensus documents on the elements that are required for high-fidelity Wraparound
- The NWI's overview of human resources development and support
- <u>The Wraparound Implementation Guide</u>, particularly <u>Theme 5: Human Resources Development and</u> <u>Support</u>
- The consensus document created by the NWI and its advisors: <u>Training, Coaching and Supervision for</u> <u>Wraparound Facilitators: Guidelines from the National Wraparound Initiative</u>
- Information from the NWI on assessing Wraparound practice fidelity
- <u>Supporting Workforce Development: Lessons Learned from Wraparound Milwaukee</u>—from the <u>NWI</u> <u>Resource Guide for Wraparound</u>
- <u>National Wraparound Local Coaching Candidate Certification Guide</u>, NWIC
- <u>Staff Training and Coaching Process Flowchart</u>, NWIC
 - Additional information on <u>NWIC's approach to workforce development</u>.

Webinars

- Webinars from NWI/NWIC are available in the <u>NWI's archive</u> (to locate these webinar recordings and other resources, access the <u>archive</u> and scroll down to find the webinar by date – more recent webinars will appear at the top of the list):
 - Staff Recruitment and Retention or Replacement 05/19/2015
 - Slides
 - New Directions in Wraparound Accountability and Quality Assurance 11/18/2014
 - Slides
 - Guidelines for Training, Coaching, and Supervision of Wraparound Facilitators 02/11/2014
 - <u>Slides</u>
 - Improving Practice through Directive Supervision 04/13/2011
 - Slides

Other Resources

- Other, more focused resources related to specific roles for Wraparound can be found in the Implementation Guide To Wraparound in Chapter 4 and Chapter 5 (scroll down to part C)
- <u>A brief overview of the National Wraparound Implementation Center (NWIC)</u>
- Numerous additional resources can be accessed through the National Wraparound Initiative (NWI)
 <u>Publications and Tools Search</u>
 - \circ $\;$ Search using the expanding menus under "Human Resources Development", or
 - Use the box to enter search terms. Be sure to press the "clear" button between searches.



Research-Based Innovations in Wraparound: Resource Sheet 2 Care Management Entities

Children and adolescents with complex behavioral health conditions often receive fragmented care through multiple service systems, resulting in poor outcomes and unnecessarily high costs. Improved care coordination and increased access to home- and community-based services and peer supports offer substantial opportunities to improve health outcomes, increase resiliency among youth and their families/caregivers, and, ultimately, decrease spending for this population. Reduced costs result from decreased use of emergency room care; decreased use of inappropriate out-of-home placements; and reduced duplication of effort across agencies and providers.

A number of states and regions have begun to demonstrate significant cost savings and improved clinical and functional outcomes for children and youth with behavioral health issues through the use of the **Care Management Entity (CME)** Model. CMEs offer a centralized vehicle for coordinating the full array of needs for children and adolescents with complex behavioral health issues. A CME is an organizational entity that serves as a centralized accountable hub to coordinate all care for youth with complex behavioral health challenges who are involved in multiple systems, and their families. A CME provides:

- 1. A youth guided and family-family driven, strengths-based approach that is coordinated across agencies and providers;
- 2. Intensive care coordination, often via the wraparound process; and
- 3. Access and coordination of home- and community-based services and peer supports that, along with intensive care coordination, serve as alternatives to costly residential and hospital care.

Resources Related to Care Management Entities:

The National Wraparound Initiative (NWI), Center for Health Care Strategies (CHCS), and their partners in the Technical Assistance Network have produced a number of resources that provide information about the core characteristics of CMEs and practical guidance around how they can be used by states, jurisdictions, and systems to improve outcomes and reduce costs for high-utilizing children and youth with serious behavioral health challenges.

Core Resources

- Care Management Entities: A Primer [CHCS, March, 2011]
- <u>Utilization Management Considerations for Care Management Entities [CHCS, June 2013]</u>
- Designing Care Management Entities for Youth with Complex Behavioral Health Needs: An Implementation Guide [AHRQ, 2013]

Technical Assistance Tools

- Case Rate Scan for Care Management Entities [CHCS, October 2012]
- <u>Provider Network Options for Care Management Entities, and Peer Supports and Natural Helpers [CHCS,</u> July 2010]

Webinars (To locate NWI webinar recordings and other resources, access the <u>archive</u> and scroll down to find the webinar by date – more recent webinars will appear at the top of the list.)

- Operational Components of Intensive Care Coordination Using Wraparound for Youth with Complex Needs: State and Local Examples [NWI, September 2014]
 - o <u>Slides</u>
- Using Medicaid Health Homes with Wraparound to Serve Youth Populations with Complex Behavioral Health Needs [NWI, January 2013]
 - o <u>Slides</u>
- CME Considerations for Serving Youth in Transition [CHCS, June 2012]*
 - o <u>Slides</u>
- Family and Youth Peer Support in Care Management Entities [CHCS, September 2011]*
 - o <u>Slides</u>
- Utilization, Quality, and Information Management in Care Management Entities [CHCS, August 2011]*

 Slides
- Critical Planning Steps to Implement a Care Management Entity Approach [CHCS, June 2010]
 - o <u>Slides</u>
- Options for Financing Care Management Entities: Wraparound Milwaukee's Pooled Funding Model [Wraparound Milwaukee, June 2010]

o <u>Slides</u>

- Financing Options for Care Management Entities: The Massachusetts Experience [Technical Assistance Collaborative, June 2010]
 - o <u>Slides</u>
- Care Management Entities: A Primer [CHCS, May 2010]*
 - o <u>Slides</u>

* not located in NWI archive

State Profiles and Case Studies

- Intensive Care Coordination Using High-Quality Wraparound for Children with Serious Behavioral Health Needs: State and Community Profiles [CHCS, July 2014]
- <u>Strategies to Support Youth with Serious Behavioral Health Needs Through a Care Management Entity</u> <u>Approach [TA Network, January 2015]</u>



Research-Based Innovations in Wraparound: Resource Sheet 3 Coordinating Wraparound with Evidence-Based Clinical Care

A central principle of both Wraparound and systems of care is that children and families "have access to a broad array of effective community-based services and supports that address their physical, emotional, social, and educational needs." Building and managing such a service array is also a core function of <u>care management</u> <u>entities</u> that are increasingly being used by states and large jurisdictions as a way to reform systems and provide effective, coordinated care for youth with complex needs.

Evidence continues to grow regarding the efficacy of home-and community-based clinical interventions – and the lack of efficacy of institutional treatment approaches. In addition, while research shows consistent positive effects for Wraparound regarding placements and costs, smaller effect sizes have been found for clinical and functional outcomes. In short, systems of care and Wraparound cannot achieve desired outcomes without attending to the quality of clinical interventions with children and families. As a result, system builders have increasingly focused on building evidence-based practice (EBP) into systems of care, and ensuring that Wraparound- enrolled youth have access to EBP.

The quest to effectively coordinate EBP with Wraparound has led to a wealth of new research, development, and case studies on how to achieve this outcome. Some **system-level strategies** that have been increasingly pursued include the following:

- Systems leaders and community teams analyze availability of EBPs in the service array capable of meeting specific clinical needs experienced by Wraparound-enrolled youth (such as internalizing, externalizing, and trauma-related disorders), and invest strategically to fill gaps in that service array.
- Systems leaders and community teams invest in intensive, community-based EBPs for youth with complex needs that can co-exist in a Wraparound-based system of care. Examples of such intensive, multi-modal EBPs include <u>Multisystemic Therapy (MST)</u>, <u>Functional Family Therapy (FFT)</u>, and <u>Triple-P</u> <u>Positive Parenting Program</u>.
- Systems and provider organizations invest in specific office-based EBPs to which Wraparound teams can refer youth and families and be a core strategy in a Wraparound plan of care.
- Systems leaders and community teams regularly review data on needs and outcomes of youth and families to inform strategic investment in services.

Some practice- and provider-level strategies to consider include the following:

- Train clinicians in the system of care on manualized EBPs that can meet youth/family needs.
- Train clinicians in the system of care on modularized EBP approaches, such as PracticeWise's <u>Managing</u> <u>and Adapting Practice</u>, which can be used to flexibly provide care that is both individualized and adaptive as well as based on research for "what works."
- Train and supervise care coordinators to understand how to build plans of care that include EBPs while maintaining adherence to the strength-based, family driven Wraparound philosophy.
- Train and supervise family and youth peer support partners to understand how to be effective "care extenders" for EBP elements that are in Wraparound plans of care.

Resources Related to Evidence-Based Practices and Wraparound:

The National Wraparound Initiative (<u>NWI</u>) and its partners in the Technical Assistance Network have produced a number of resources that provide information about how to coordinate evidence-based clinical practice into Wraparound care management to improve outcomes for children and youth with complex behavioral health and other needs.

Core Resources

- Access to Supports and Services, in the Wraparound Implementation Guide [NWI, 2011]
- Evidence Based Practice (Chapter 1.5) and Benefit Design/Service Array (Chapter 1.4) in <u>Systems of Care:</u> <u>A Primer</u> [Georgetown TA Center, 2002]
- <u>Wraparound is Worth Doing Well: An Evidence-Based Statement</u> [NWI, 2015]
- <u>CLC HUB Resource: Cultural Adaptation</u> [TA Network, 2015]
- Evidence-Informed Practice in Systems of Care: Misconceptions and Facts TA Tool and infographic

Webinars (To locate webinar recordings and other resources, access the <u>archive</u> and scroll down to find the webinar by date – more recent webinars will appear at the top of the list.)

- Implementing Evidence Based Practice within Wraparound and Systems of Care [NWI, January 2015]
 <u>Slides</u>
- Coordinating Evidence Based Practices with Wraparound Using the Managing and Adapting Practice (MAP) System [NWI, May 2013]
 - o <u>Slides</u>

Technical Assistance Tools

- <u>Family Driven, Individualized, and Outcomes Based: Improving Wraparound Teamwork and Outcomes</u> Using the Managing and Adapting Practice (MAP) System [NWI, 2012]
- <u>Managing and Adapting Practice (MAP) website</u>

State Profiles and Case Studies

- <u>Using Evidence-Based Programs to Meet the Mental Health Needs of California Children and Youth</u> [California Institute for Mental Health, 2012]
- Evidence-Based Practices, Systems of Care, & Individualized Care [Friedman & Drews, 2005]

Peer Reviewed Articles

- <u>Family Voice with Informed Choice: Coordinating Wraparound with Research-Based Treatment for</u> <u>Children and Adolescents</u> [Bruns et al., Journal of Clinical Child and Adolescent Psychology, 2014]
- <u>Changing Organization Culture: Data-Driven Participatory Evaluation and Revision of Wraparound</u> <u>Implementation</u> [Bertram, Schaeffer, & Charnin, 2014]

EBP Inventories

- Blueprints for Healthy Youth Development
- <u>SAMHSA's National Registry of Effective Programs and Practices</u>
- <u>California Evidence Based Clearinghouse for Child Welfare</u>
- Institute for Education Sciences "What Works Clearinghouse" for Education



Research-Based Innovations in Wraparound: Resource Sheet 4 Quality Improvement and Accountability in Wraparound

Accountability is a core component of Wraparound at all levels: practice, program, and system. Wraparound initiatives must measure family and youth satisfaction with the help they receive; ensure services and supports are of high quality; and collect and use outcomes data to inform both program and family-level decisions. As described in the <u>Implementation Guide to Wraparound</u>, "when a Wraparound initiative is fully supported in the area of accountability, the community has implemented mechanisms to monitor Wraparound fidelity, service quality, and outcomes, and to assess the quality and development of the overall wraparound effort" (Miles, Brown, & The National Wraparound Initiative Implementation Work Group, 2011, 61).

True accountability in Wraparound requires asking what the goals of the project are and how it will be known those goals have been achieved, and then creating measurement strategies and choosing instruments and information technology systems accordingly. To achieve this kind of accountability, it is important to start early in the implementation process, with Wraparound stakeholders working together to establish indicators of success and failure. Areas to consider in building accountability include:

- **Establishing clear outcomes**. Stakeholders in the Wraparound initiative should have an opportunity to collectively establish what outcomes are most important to them. If you don't know the desired result then you run the risk of practicing for the sake of process rather than practicing with a purpose to get a desired outcome.
- **Defining process elements**. Is your Wraparound initiative following a defined practice model? Similar to establishing outcomes, a challenge for any project is identifying what key process elements must be reliably practiced by frontline staff. This means that your Wraparound project has to first decide what practices staff and managers should implement reliably and then monitor to make sure those practices are followed. Some sites will use research tools such as the <u>Wraparound Fidelity Assessment System</u> (<u>WFAS</u>) to get information about whether the activities and principles of Wraparound are being operationalized. Sites may also use supervisory and program checklists that assess how Wraparound is being implemented by the frontline staff. And, there are now Wraparound-specific Electronic Health Record (EHR) systems that can capture such data in real-time and produce reports at multiple levels.
- Gathering satisfaction and other data directly from young people and families. Simply following the process or steps of Wraparound implementation does not guarantee that youth and families will be satisfied with the process or that they are getting their needs met. Getting feedback from youth and families who are most affected by the project is imperative. Such information may focus on their satisfaction with the Wraparound process, satisfaction with services that are being received, and perceptions of whether needs are being met, whether progress is being made, and what barriers are getting in the way. Such information can be gathered through Wraparound teams, written surveys or direct interviews and should occur regularly from the onset of the project. Some sites will contract with family organizations or train family members to gather this information.
- *Monitoring costs.* This area answers the question of whether your investment of time, money, personnel, space and other resources is worth it. There is no national standard for pricing Wraparound;

wide regional variances exist throughout the country. Costs related to Wraparound include care coordination costs associated with the necessary services, supports and strategies that are outlined in a Wraparound plan of care. Having this information is critical to making decisions as well as informing stakeholders and funders.

Resources Related to Quality Improvement and Accountability in Wraparound:

The National Wraparound Initiative (<u>NWI</u>) and its partners in the Technical Assistance Network have produced a number of resources that provide information about how to assess quality and infuse accountability into Wraparound care management to improve outcomes for children and youth with complex behavioral health and other needs.

Core Resources (To locate NWI webinar recordings and other resources, access the <u>archive</u> and scroll down to find the webinar by date – more recent webinars will appear at the top of the list.)

- Accountability and Quality Assurance in Wraparound [NWI Webinar, June 2010]
 - o <u>Slides</u>
- New Directions in Wraparound Accountability and CQI [NWI Webinar, November 2014]
 - o <u>Slides</u>
- <u>Wraparound is Worth Doing Well: An Evidence-Based Statement</u> [NWI, 2015].
- Assessment and Fidelity, summary of the Wraparound Fidelity Assessment System [NWI, 2014]
- Consultation & Training related to Wraparound Implementation, <u>National Wraparound Implementation</u> <u>Center</u> (NWIC)
- Accountability Across Systems, in the Wraparound Implementation Guide [NWI, 2011]

Other Webinars

- An Overview of TMS-WrapLogic Behavioral Health Record [NWI, June 2015]
 - o <u>Slides</u>
- Operational Components of Intensive Care Coordination Using Wraparound for Youth with Complex Needs: State and Local Examples [NWI, September 2014]
 - o <u>Slides</u>
- Costs and Cost-Effectiveness in Wraparound Programs [NWI, April 2014]
 - o <u>Slides</u>
- Guidelines for Training, Coaching, and Supervision of Wraparound Facilitators [NWI, February 2014]
 - o <u>Slides</u>
- Necessary Conditions: Assessing Community Support for Wraparound [NWI, December 2013]
 - o <u>Slides</u>
- Strengthening Practice Through Directive Supervision [NWI, April 2011]
 - o <u>Slides</u>

Technical Assistance Tools

• <u>Complete Wraparound Implementation Guide, A Handbook for Administrators and Managers</u> [NWI, 2011]

Peer Reviewed Articles

- Bruns, E.J., Pullman, M.D., Sather, A., Brinson, R.D., & Ramey, M. (2014). <u>Effectiveness of Wraparound</u> <u>versus case management for children and adolescents: Results of a randomized study</u>. *Administration and Policy in Mental Health and Mental Health Services Research*, *42*(3), 309-322.
- Bertram, R.M., Schaeffer, P., Charmin, L. (2014). <u>Changing Organization Culture: Data-driven</u> <u>Participatory Evaluation and Revision of Wraparound Implementation</u>. *Journal of Evidence-Based Social Work*, 11(1-2), 18-29.
- Bruns, E.J., Walker, J.S. (2011). <u>Research on the Wraparound Process: Intervention Components and</u> <u>Implementation Supports</u>. *Journal of Child and Family Studies, 20*(6), 709-712.
- Bruns, E.J., Suter, J.C., & Leverentz-Brady, K.M. (2008). <u>Is it wraparound yet? Setting fidelity standards</u> for the wraparound process. *Journal of Behavioral Health Services and Research*, *35*(3), 240-252.
- Bruns, E.J., Suter, J.S., Force, M.D., & Burchard, J.D. (2005). <u>Adherence to wraparound principles and</u> <u>association with outcomes</u>. *Journal of Child and Family Studies*, *14*(4), 521-534.
- Bruns, E.J., Burchard, J.D., Suter, J.C., Leverentz-Brady, K. & Force, M. (2004). <u>Assessing fidelity to a</u> <u>community-based treatment for youth: the Wraparound Fidelity Index</u>. *Journal of Emotional and Behavioral Disorders*, 12(2), 79-89.
- Suter, J.C. & Bruns, E.J. (2009). <u>Effectiveness of the wraparound process for children with emotional and behavioral disorders: A meta-analysis</u>. *Clinical Child and Family Psychology Review*, *12*(4), 336-351.
- Pullmann, M. D., Bruns, E. J., & Sather, A. K. (2013). <u>Evaluating fidelity to the wraparound service model</u> <u>for youth: Application of item response theory to the Wraparound Fidelity Index</u>. *Psychological Assessment, 25*(2), 583-598.
- Bruns, E.J., Hyde, K.L., Sather, A., Hook, A., Hensley, S., & Lyon, A.R. (2015). <u>Applying user input to the</u> <u>design and testing of an electronic behavioral health information system for wraparound care</u> <u>coordination</u>. *Administration and Policy in Mental Health and Mental Health Services Research*. Online first: doi: 10.1007/s10488-015-0658-5.
- Bruns, E. J., Weathers, E. S., Suter, J. C., Hensley, S., Pullmann, M. D., & Sather, A. (2014). <u>Psychometrics,</u> <u>reliability, and validity of a wraparound team observation measure</u>. *Journal of Child and Family Studies,* 24, 979-991. doi:10.1007/s10826-014-9908-5.

Reference

Miles, P., Brown, N., & The National Wraparound Initiative Implementation Work Group. (2011). <u>The</u> <u>Wraparound Implementation Guide: A Handbook for Administrators and Managers</u>. Portland, OR: National Wraparound Initiative.



Research-Based Innovations in Wraparound: Resource Sheet 5 Peer Support and Other Strategies for Engaging and Supporting Families and Youth in Wraparound

There is no question that families who participate in Wraparound typically feel more engaged and more satisfied when they also receive peer support from a family partner. Emerging research suggests that this is also true for youth and young adults in Wraparound. Peer work in wraparound is challenging work, as it requires the peer support provider to use a variety of skills. Peer providers need to be able not only to work in a strengths-based and empowerment-oriented manner with family members and/or young people, but they also need to actively promote youth- and family-driven collaboration in all aspects of Wraparound teamwork. Peer providers thus need training, coaching and supervision of the same quality and intensity as that provided for other key providers in Wraparound. Details about what this entails can be found in the NWI's <u>consensus statement on</u> <u>training, coaching and supervision</u>, and in the resources described in Resource Sheet 1 earlier in this packet. At the same time, the peer support role is qualitatively different from other provider roles, and requires training, supervision and organizational support that is role specific.

Of course, engaging families and youth in Wraparound should not be solely the responsibility of the peer support providers. (And regrettably, many Wraparound programs do not have family and youth/young adult peer support available to all—or even any—participants.) Engaging youth and young adults in a meaningful way in Wraparound has proven to be a particular challenge, even when peer support is available. Skillful Wraparound practice involves the intentional and ongoing use of tools and strategies to promote engagement.

Resources Related to Engagement and Peer Support for Families and Youth

The National Wraparound Initiative (<u>NWI</u>) and its members and member organizations, the Center for Health Care Strategies (CHCS), the Research and Training Center for Pathways to Positive Futures (<u>Pathways RTC</u>), and their partners in the Technical Assistance Network have produced a number of resources that provide information that focus on various aspects of implementation of family and youth peer support in Wraparound. These organizations have also developed information about strategies to increase youth engagement and participation in Wraparound.

Implementing Peer Support in Wraparound—Core Resources

Family Peer Support

- Qualifications for Wraparound Family Partners: A Statement from the National Wraparound Initiative [NWI 2013]
- Application of the Ten Principles of the Wraparound Process to the Role of Family Support Partners on Wraparound Teams [NWI 2007]
- How Family Partners Contribute to the Phases and Activities of the Wraparound Process [NWI 2010]
- <u>Strategies to Assist Parent Peer Support Implementation in the Wraparound Workforce [NWIC/TA</u> <u>Network, 2015]</u>
- <u>A Dozen Mistakes in Using Family Partners in Wraparound [NWI 2008]</u>

Youth Peer Support

- Implementing the Peer Support Specialist Role: Youth Peer Support in Wraparound [Pathways RTC 2013]
- Defining, Supporting and Sustaining the Youth Peer Support Specialist Role [Pathways RTC 2013]
- Youth Advocates: What They Do and Why Your Wraparound Program Should Hire One [NWI 2008]

Webinars (to locate these webinar recordings and other resources, access the <u>archive</u> and scroll down to find the webinar by date – more recent webinars will appear at the top of the list):

- Engaging and Involving Youth in Wraparound [NWI 2011]
 - o <u>Slides</u>
- Family Partners in Wraparound: Who are they and what do they do? [NWI 2010]
 - o <u>Slides</u>

Summaries of Evidence—Peer Support

- Youth and Young Adult Peer Support: What Research Tells Us About its Effectiveness in Mental Health Services [Pathways RTC 2015]
- Family and Youth Peer Support Literature Review [CHCS 2013]

Financial Considerations—Peer Support

- <u>Becoming a Medicaid Provider of Family and Youth Peer Support: Considerations for Family Run</u> <u>Organizations [CHCS, 2014]</u>
- Medicaid Financing for Family and Youth Peer Support: A Scan of State Programs [CHCS 2012]

Supporting youth and young adult engagement in Wraparound

- Youth Participation in Wraparound Team Planning: Why and How [NWI 2008]
- <u>The Wraparound Process User's Guide: A Handbook for Families [NWI 2009]</u> (Guide in Spanish [NWI 2010])
- <u>Tips for Team Meetings: A Guide for Youth [Pathways RTC 2013]</u>
- <u>"During Meetings I Can't Stand It When": A Guide for Facilitators and Team Members [Pathways RTC 2013]</u>
- <u>Best Practices for Increasing Meaningful Youth Participation in Collaborative Team Planning [Pathways</u> RTC 2007]
- Numerous additional resources can be accessed through the <u>NWI's resource library by searching for</u> <u>"engagement."</u>