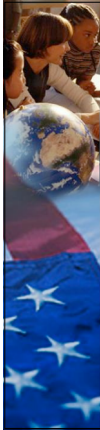




## High Fidelity Wraparound Issues for Research and Implementation

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Greg Dalder, MSW, Executive Vice President  
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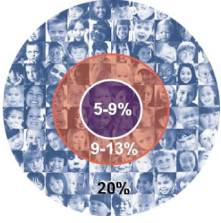


## Seriousness of the Problem

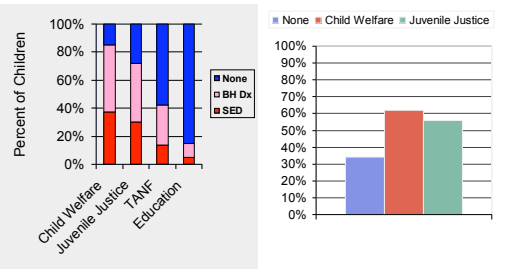
### Prevalence of Serious Emotional Disturbance (SED)

**Population Proportions  
(9 to 17 year-olds)**

- 5-9% Youth with SED & extreme functional impairment
- 9-13% Youth with SED, with substantial functional impairment
- 20% Youth with any diagnosable disorder




## Children with Behavioral Health Disorders Across Systems



**Percent of Children**

■ None ■ BH Dx ■ SED

■ None ■ Child Welfare ■ Juvenile Justice



## Fragmented System

Yet, for too many Americans with mental illnesses, the mental health services and supports they need remain fragmented, disconnected and often inadequate, frustrating the opportunity for recovery. Today's mental health care system is a patchwork relic—the result of disjointed reforms and policies. Instead of ready access to quality care, the system presents barriers that all too often add to the burden of mental illnesses for individuals, their families, and our communities.

Michael F. Hogan, Ph.D. 2003 Chairman  
President's New Freedom Commission on Mental Health

## Collaboration versus Integrated Planning

<p><b>Community Context</b></p> <ul style="list-style-type: none"> <li>• Community leaders know each other and work together well</li> <li>• Developed common visions and values</li> <li>• Have 8 collaborative teams to do joint projects</li> <li>• Agency administration focuses on social mandates and goals of each agency</li> </ul>	<p><b>Tyler Family</b></p> <p>Son Billy:</p> <ul style="list-style-type: none"> <li>• Breaking and entering and theft</li> <li>• Two years behind in school</li> </ul> <p>Twins (Sam and Sally):</p> <ul style="list-style-type: none"> <li>• Bi-polar, extreme mood swings.</li> <li>• Specialized foster home</li> <li>• Problem behaviors at school</li> </ul> <p>Father Evan:</p> <ul style="list-style-type: none"> <li>• Verbal and physical abuse</li> <li>• Unemployed</li> <li>• Recovering severe alcoholism</li> </ul> <p>Mother Marge:</p> <ul style="list-style-type: none"> <li>• Family history of major depression</li> <li>• Suicidal ideation</li> </ul>
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## 25 Helpers and 12 Plans

<ul style="list-style-type: none"> <li>School (5)</li> <li>Technical School (2)</li> <li>Child Welfare (1)</li> <li>Juvenile Justice (1)</li> <li>Children's Mental Health (4)</li> <li>Adult Mental Health (4)</li> <li>Employment Services (2)</li> <li>AA (1)</li> <li>Housing Department (1)</li> <li>Bailey Agency (local NFP) (2)</li> <li>Specialized Foster Care (2)</li> </ul>	<ul style="list-style-type: none"> <li>2 IEPs (Sally and Sam)</li> <li>Tech Center Plan</li> <li>Permanency Plan</li> <li>Probation Plan</li> <li>3 Children's MH Tx Plans</li> <li>2 Adult MH Tx Plans</li> <li>Employment Services</li> <li>Bailey Agency Tx Plan</li> <li>33 Treatment Goals or Objectives</li> </ul>
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### Monthly Appointments for the Tyler Family

Child Welfare Worker	1
Marge's Psychologist	2
Marge's Psychiatrist	?
Billy's therapist	4
Billy's restitution services	4
Appointments with Probation and School	2
Twin's therapy appointments, total	8
Evan's anger management	4
Children's Psychiatrist	1
Other misc. meetings:., Housing, Medical	5
AA Meetings	16

*Also, consider daily schedule (School, tech center, and vocational training) and the dozen or more calls from the schools each month.*



### Collaboration and Integration

**Collaboration:** Agencies are familiar with each other's missions and roles, key staff work with each other at the child/family level, but retain single system decision making power and planning.

**Integration:** Agencies are familiar with each other's missions and roles, key staff work with each other at the child/family level, sharing decision making in a team format that includes the family, producing a single plan that meets all system mandates and that is owned by the entire team.



### Wraparound

Wraparound is a facilitated team based practice model designed to *integrate* natural and professional supports, with the family in the driver's seat.

A wraparound team is formed to help define and refine family strengths, culture, vision and needs; prioritize needs and create the plan; and then carry out the plan one prioritized need at a time until the formal team is no longer needed because the vision of the family has been achieved.



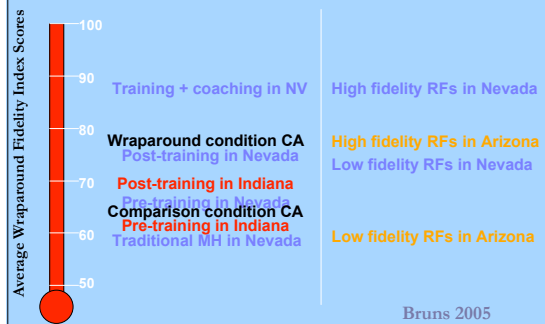
### What Does the Research Say?

High Fidelity Wraparound can produce significantly better outcomes for children and families with significant needs than traditional approaches:

- Increased permanency and stability for children
- Decreased restrictiveness of residential environments
- Improved behavior and mental health symptoms
- Improved school and early care outcomes
- Decreased family and child safety issues and risk factors
- Increased family and child protective factors
- Increased family engagement and satisfaction with services
- Increased family resources to support their own children

### Impact of Wraparound Fidelity

### What is "high fidelity" wraparound?



Our understanding of evidence-based programs is much better than our understanding of successful implementation.

Implementation is how we take a science based practice and implement it in communities or statewide in "real world" settings that are provided with fidelity and produce good outcomes.

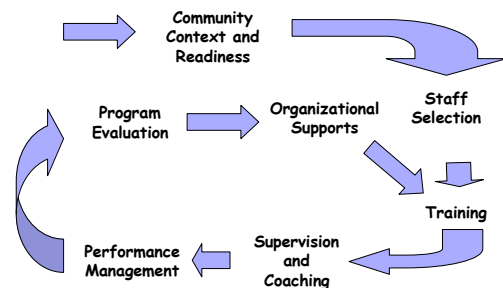
## Implementation Research

- Determining the core components of the intervention
- Determining the elements and relative impact of implementation intervention elements
- Determining more effective ways to support successful implementation
- Determining how these things work together

## Successful Implementation

- Improved outcomes for children and families
- Improved fidelity to treatment model
- Decreased time to reach fidelity
- Decreased external supports to reach fidelity

## Implementation of High Fidelity Wraparound



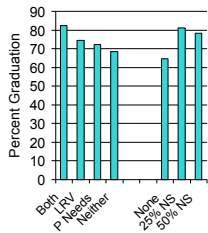
## Community Context and Readiness

- ⇒ Engaging key stakeholders
- ⇒ Defining core components of the intervention
- ⇒ Feasibility assessment
- ⇒ Staffing and supervision ratios / assignments
- ⇒ Policies, procedures and documentation processes
- ⇒ Implementation plan

## Therapeutic Goals of Wraparound

- Development of a Family Story and Vision
- Focusing plans to meet primary needs to support achievement of family long range vision
- Strengthening Natural Support Network
- Supporting Families to Independence in the Process

## Core Components Impact Project Graduation Rates



- Two core components of wraparound are:
  - Development of a Family Story and Vision
  - Focusing plans on needs for long range vision
- They are inconsistently implemented
- Each of these core components impacts graduation rates

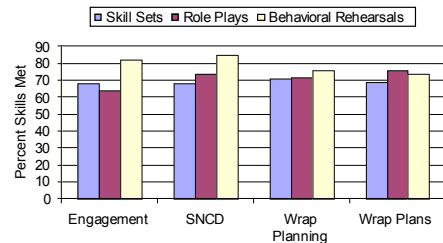
## Staff Selection

- Required and preferred qualifications
  - Facilitators, family support partners
  - Supervisors, coaches, purveyors
- Process for selection
  - Info on position – match
  - Interview
  - Vignettes – role play
  - Demonstration

## Training

- Train and Hope does not work
- About behavior and system change
- Not satisfaction with training
- Research on information provision and training
- Factors that influence
  - Initial motivation and engagement
  - System and organizational support
  - Organizational climate and control
  - Methods of training

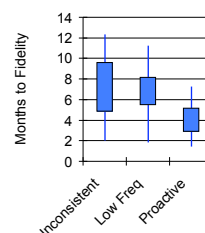
## Impact of Training on Initial Skills



## Supervision and Coaching

- Types of coaching
  - Live coaching (modeling and feedback)
  - Videotaped
  - Group sessions
  - Individual sessions and individual sessions
- Who should be coaching
  - Peer to peer
  - Expert
- Coaching frequency
- Supervision Process
  - Assessment
  - Individual and group
  - Live coaching
  - Records review
  - Performance plans
- Characteristics
  - Strengths-based
  - Reflective
  - Proactive
  - Frequency and duration
  - Change over time

## Supervision Impacts Time to Fidelity



- Inconsistent supervision is more crisis and reactive
- Low frequency supervision meets less than weekly and rarely does in-vivo supervision
- Proactive supervision implements plans for professional development

## Fidelity Assessment / Improvement

- ⇒ Two leveled certification competency based certification process
- ⇒ Measures of compliance to the wraparound phases and activities
- ⇒ Measures of fidelity to the wraparound process
- ⇒ Use of the measures to guide ongoing professional development



## Six Types of Certification

- Wraparound Novice
- Wraparound Practitioner
- Family Support Partner
- Mentor for Wraparound Process
- Coach/Supervisor for Wraparound Process
- Trainer for Wraparound Process



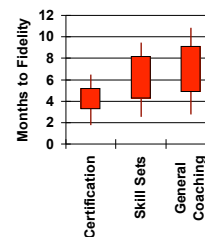
## Certification – Wraparound Practitioner

Goal: to define the basic skill sets that must be demonstrated to be considered a competent entry level wraparound facilitator

### Requirements include:

- Has received 3 hours of supervision/coaching per week
- Has a professional development plan
- Has demonstrated competency on wraparound process tools
- Has demonstrated competency on each of nine practitioner tools by completing two (for observation) or three (for documentation) at a 90% or above level

## Use of Skills Sets and Certification



- General coaching focuses more on the priorities of the mentor or staff
- Skill set coaching focuses on skill sets but does not consistently measure progress
- Certification coaching does both

## Staff Program Evaluation

- Evaluation Impacts
  - Organizational climate and sets context
  - Use for system development
  - Supports sustainability
- Evaluation Parts
  - Compliance to process
  - Competence of staff
  - Outcomes and impacts of wraparound
  - Organizational context

## Organizational Supports

- Commitment of leadership
- Implementation plan and refinement
- Well defined (manualized) process
- Case load size
- Job requirements
- Time for supervision and coaching
- Barrier busting
- Flexible financial support