

Wraparound Fidelity Monitoring in the Massachusetts Children's Behavioral Health Initiative (CBHI)

Summary of 2012 Results

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Eric Bruns and April Sather

University of Washington

Wraparound Evaluation and Research Team

ebruns@uw.edu / sathea@uw.edu

With thanks to Andrea Gewirtz and Melissa King



Purpose for this Meeting

1. Review of wraparound fidelity assessment and (new) research
2. Review data from Massachusetts fidelity monitoring
3. Discuss what has been found and what it means

Wraparound Competence: What do we want to measure?

Wraparound Principles

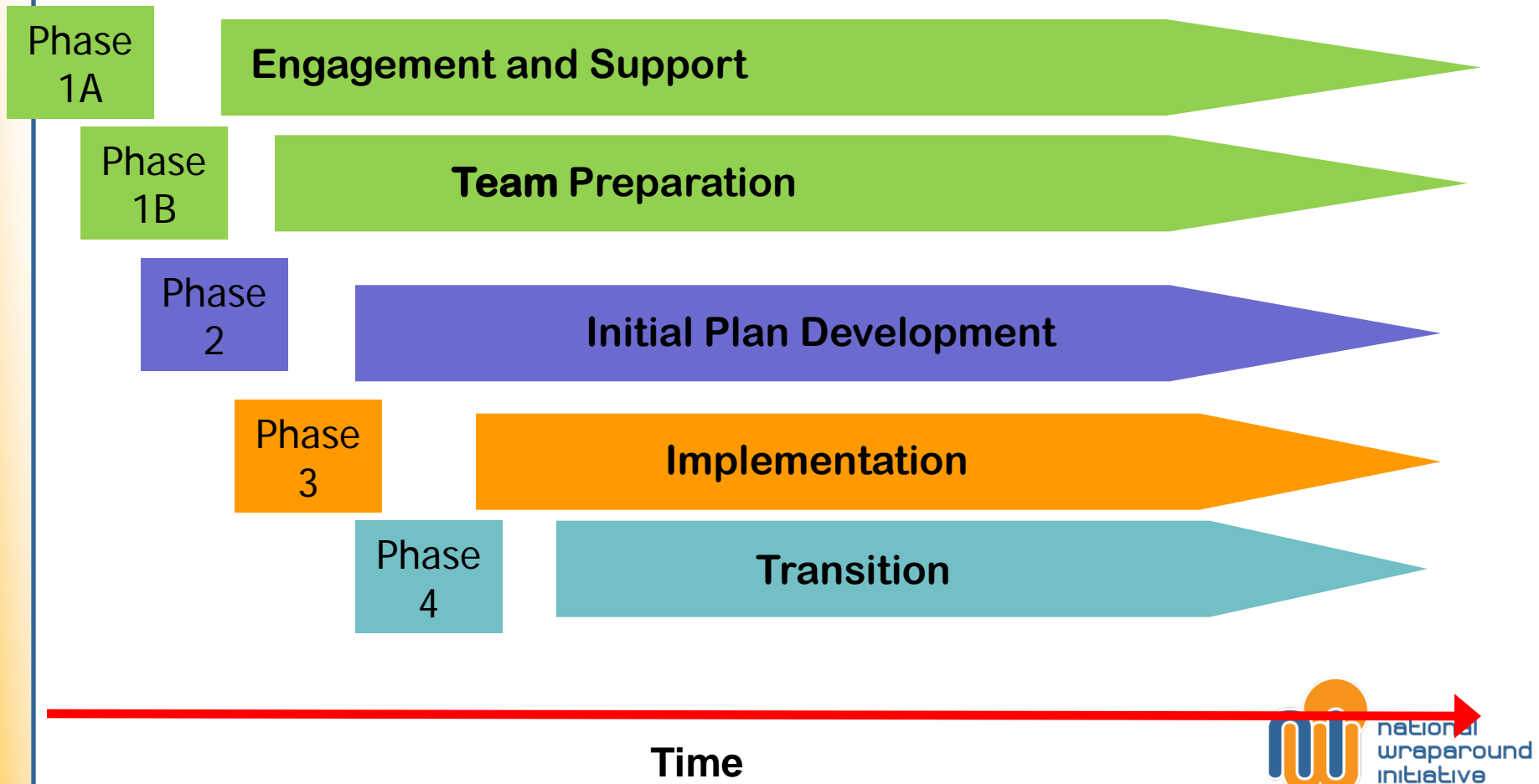
1. Family voice and choice
2. Team-based
3. Natural supports
4. Collaboration
5. Community-based
6. Culturally competent
7. Individualized
8. Strengths based
9. Persistence
10. Outcome-based

Walker, Bruns, Adams, Miles, Osher et al., 2004

Wraparound Competence

Implementing the practice model:

The Four Phases of Wraparound



Phase 1 : Engagement and Team Preparation

- Care Coordinator & Family Partner meets with the family to discuss the wraparound process and listen to the family's story.
- Discuss concerns, needs, hopes, dreams, and strengths.
- Listen to the family's vision for the future.
- Assess for safety and make a provisional safety plan if needed in collaboration with the family
- Identify people who care about the family as well as people the family have found helpful for each family member.
- Reach agreement about who will come to a meeting to develop a plan and where we should have that meeting.

Phase 2: Initial Plan Development

- Conduct first Care Planning Team (CPT) meeting with people who are providing services to the family as well as people who are connected to the family in a supportive role.
- The team will:
 - Review the family vision
 - Develop a Mission Statement about what the team will be working on together
 - Review the family's needs
 - Come up with several different ways to meet those needs that match up with the family's strengths
- Different team members will take on different tasks that have been agreed to.

Phase 3: Plan Implementation

- Based on the CPT meetings, the team has created a written plan of care.
- Action steps have been created, team members are committed to do the work, and our team comes together regularly.
- When the team meets, it:
 - Reviews Accomplishments (what has been done and what's been going well);
 - Assesses whether the plan has been working to achieve the family's goals;
 - Adjusts things that aren't working within the plan;
 - Assigns new tasks to team members.

Phase 4: Transition

- There is a point when the team will no longer need to meet regularly.
- Transition out of Wraparound may involve a final meeting of the whole team, a small celebration, or simply the family deciding they are ready to move on.
- The family will get a record of what work was completed as well as list of what was accomplished.
- The team will also make a plan for the future, including who the family can call on if they need help or if they need to re-convene their team.
- Sometimes transition steps include the family and their supports practicing responses to crises or problems that may arise

Wraparound Fidelity Index, v.4

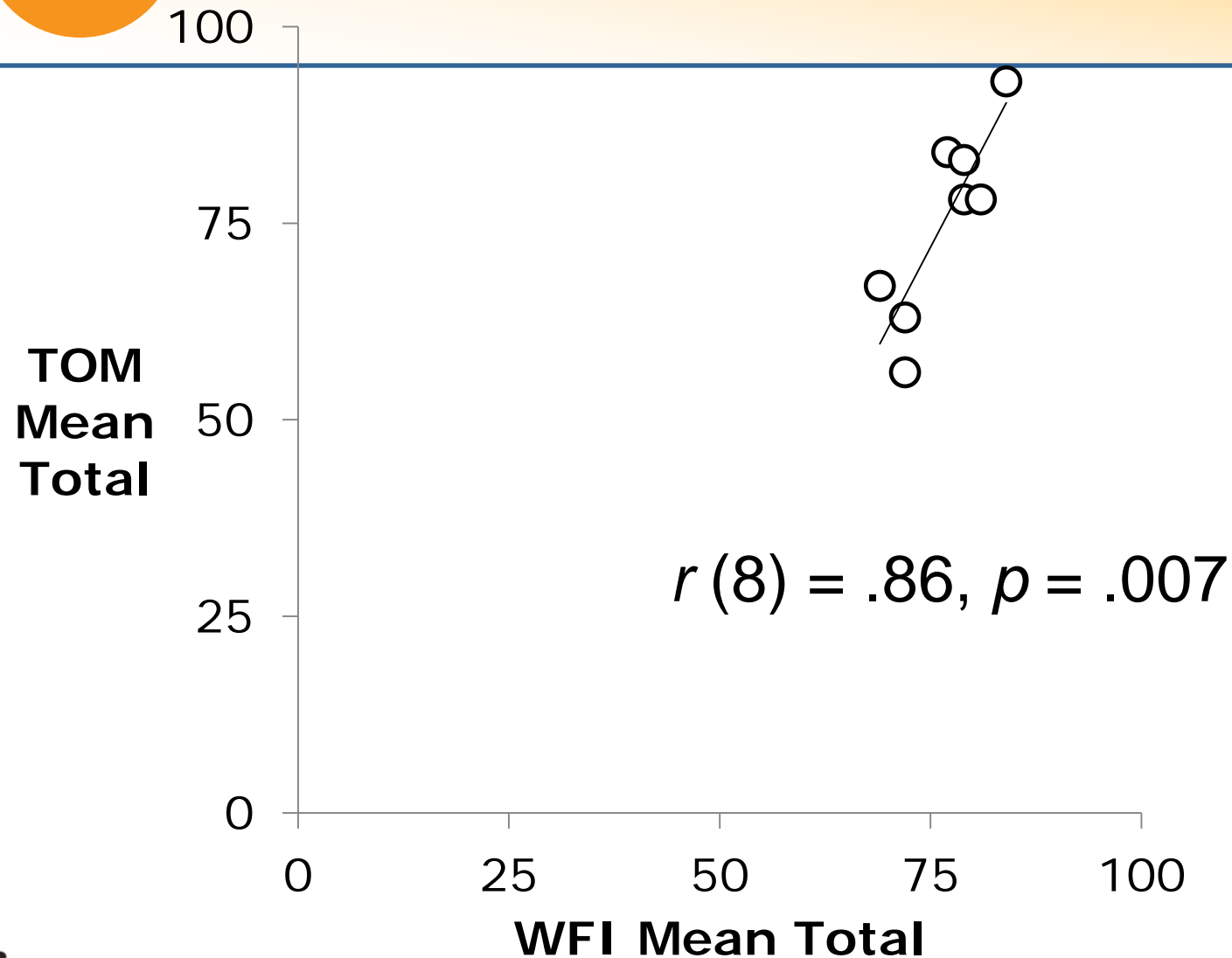
- Items on the principles and core activities, organized by the 4 phases of wraparound
 - **Engagement:** Did you select the people who would be on your youth and family team?
 - Principle = Team based
 - **Planning:** Does the plan include strategies for helping your child get involved with activities in the community?
 - Principle = Community based
 - **Implementation:** Does the team evaluate progress toward the goals of the plan at every team meeting?
 - Principle = Outcome based
 - **Transition:** Will some members of your team be there to support you when formal wraparound is complete?
 - Principle = Persistence



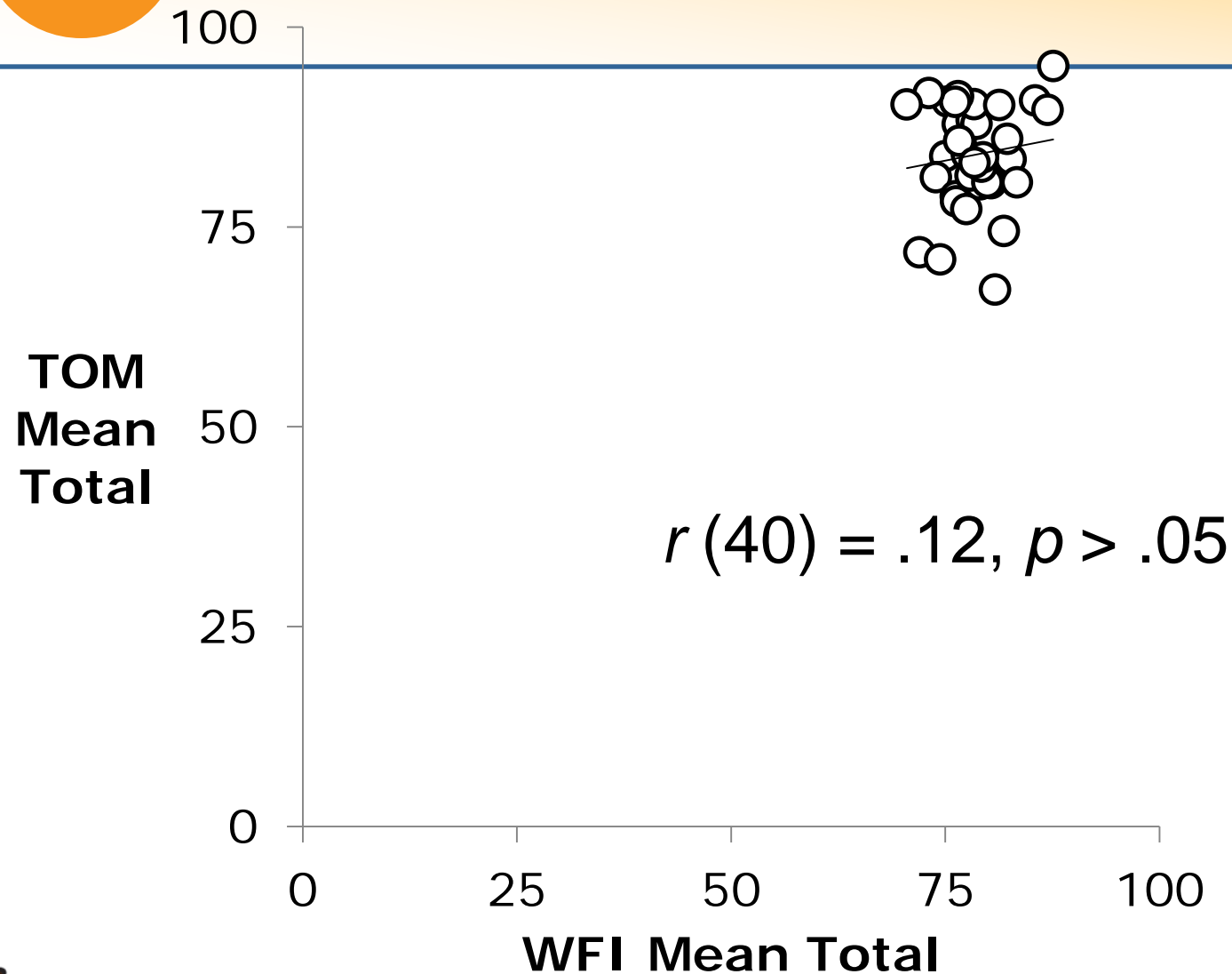
Team Observation Measure

- Consists of 20 items, with two items dedicated to each of the 10 principles of wraparound.
- Each item consists of 3-5 indicators of high-quality wraparound practice as expressed during a care planning team meeting.
- Internal consistency very good
- Inter-rater reliability found to be adequate (Average 79% agreement for all indicators)
- Correlates with WFI scores at project and site level (though not individual team level)
 - In previous studies and evaluations...

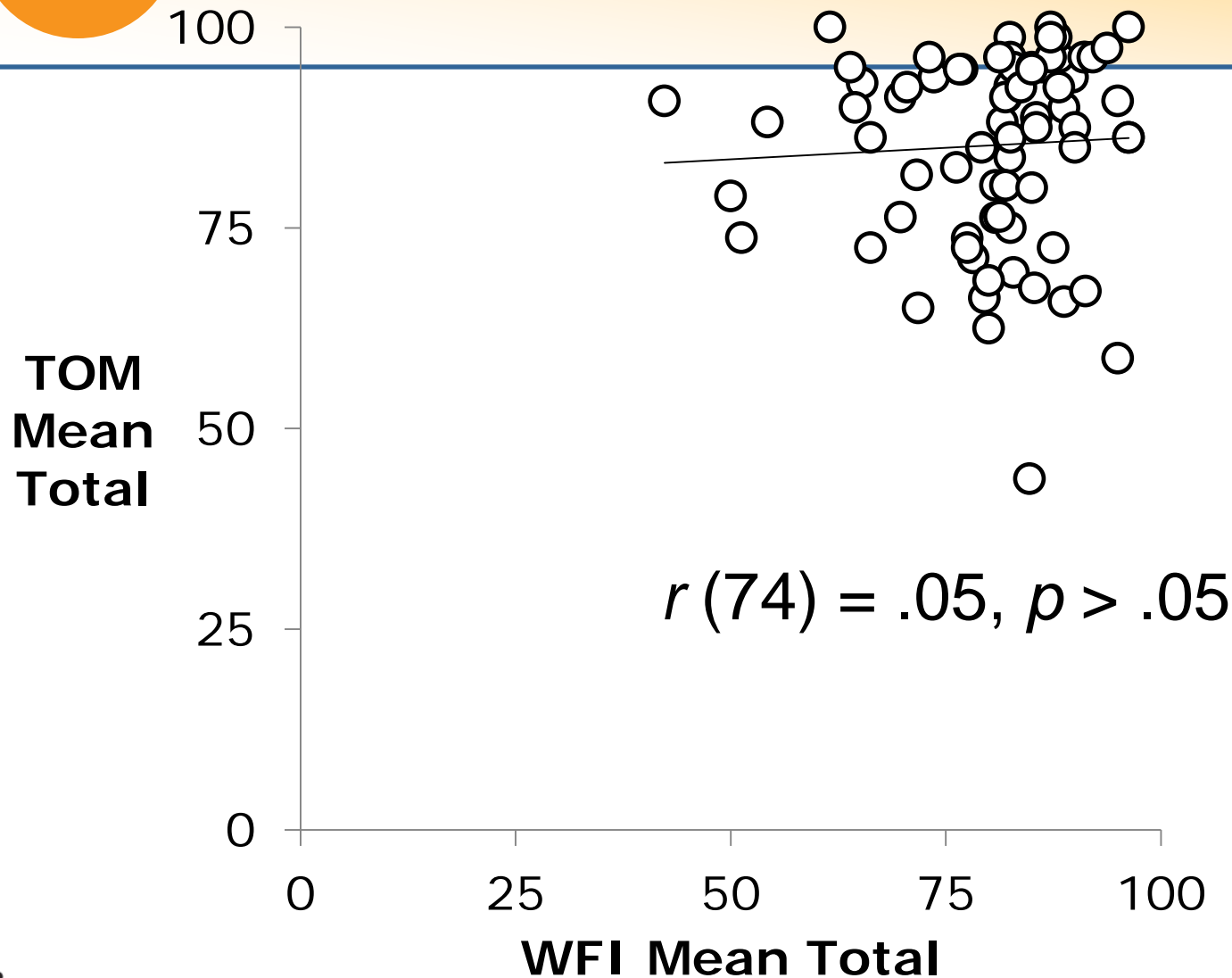
Nationwide Project Level Correlation



Nationwide Site Level Correlation



Nationwide Team Level Correlation



WFAS Measures seem to be related to what we would expect

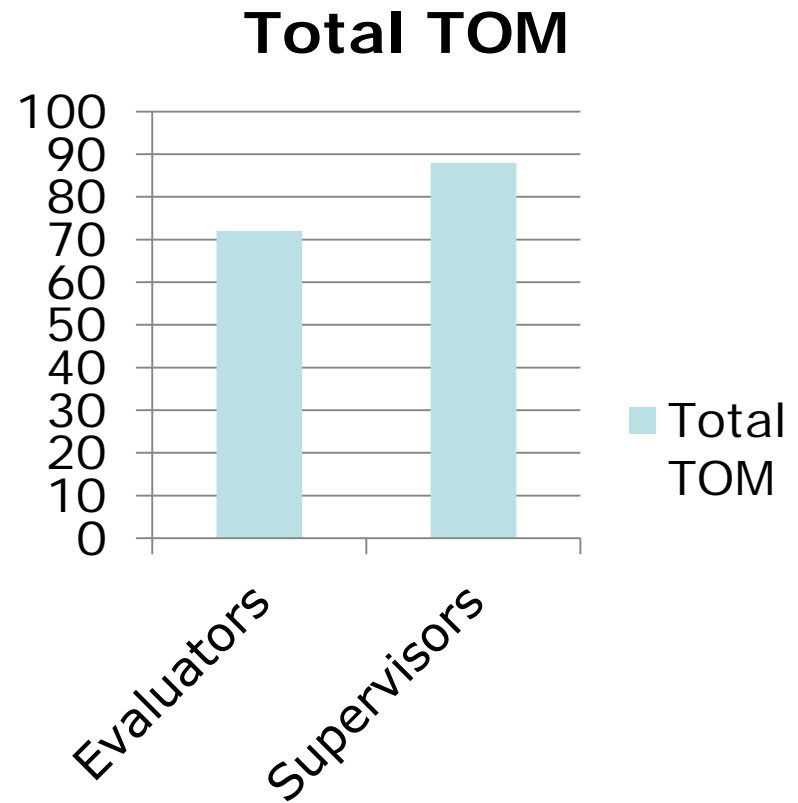
- Wraparound initiatives with positive fidelity assessments demonstrate more positive outcomes (Bruns, Leverentz-Brady, & Suter, 2008)
- Wraparound initiatives with better support to implementation have higher fidelity scores

New studies validate the TOM

- New study of TOM (Snyder et al, 2012): Sites receiving Systems of Care (SOC) support in child welfare associated with higher scores across many TOM domains and items
 - “SOC support leads to a more collaborative and individualized decision-making process with families. Meeting facilitators in SOC counties were better prepared for Child and Family Teams (CFTs), and had greater ability to lead a more robust and creative brainstorming process to develop a family-driven case plan.”

Ongoing study provides some concern

- Current inter-rater reliability study in King County shows supervisors and external evaluators show less agreement than pairs of evaluators





What can we do with the data?

- Measurement as communication
 - What are we attempting to do for families?
 - How well are we stacking up against benchmarks? What is holding us back?
 - How well are we doing over time?
 - What is associated with positive outcomes in Massachusetts?



Part 2: Results from Massachusetts

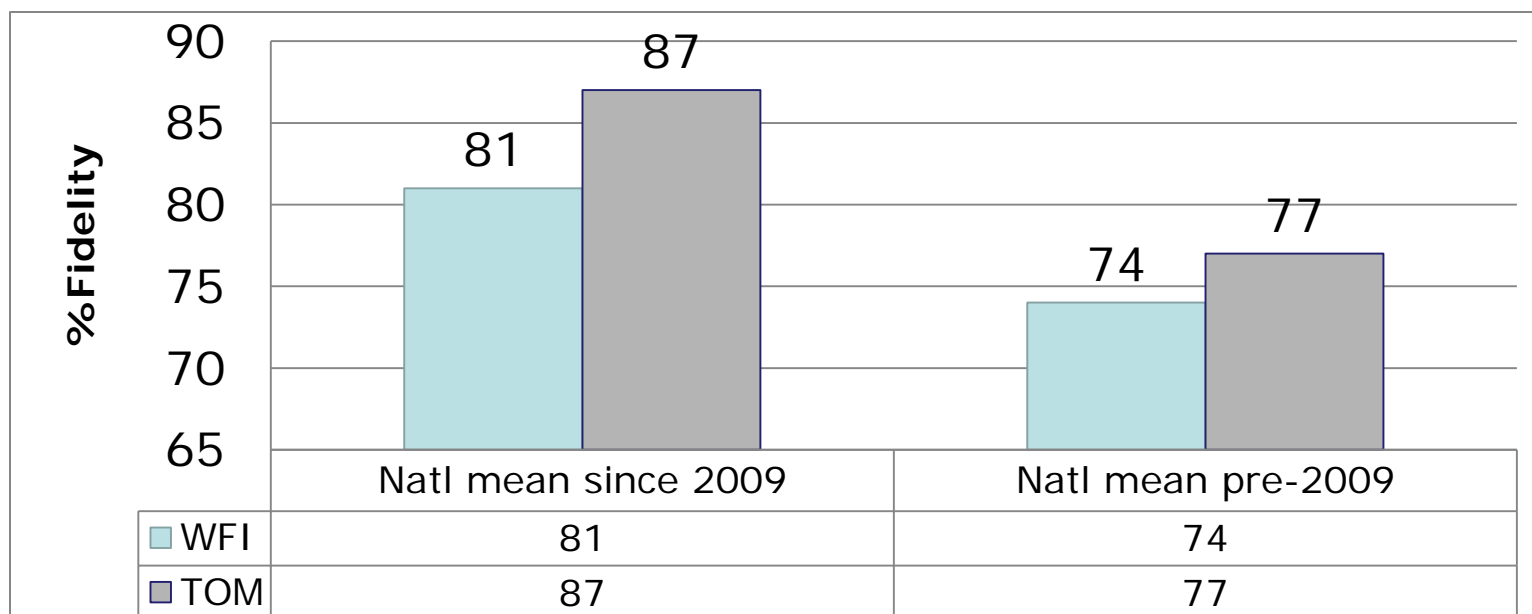
Scores on the WFI & TOM

We have updated the national means for WFI-4 and TOM

- This presentation represents updated national means for both the WFI-CG and TOM forms. WERT decided to update the means to accurately represent the gradual increase in scores over the last 3 years.
- Massachusetts data has been removed from the National Mean scores.
- National Means for WFI and TOM represent data collected since July 2009.
 - This corresponds with trends in improvement nationally AND the period of the Massachusetts CBHI



National means have increased substantially from 2006-09 to 2009-12



TOM* N = 326

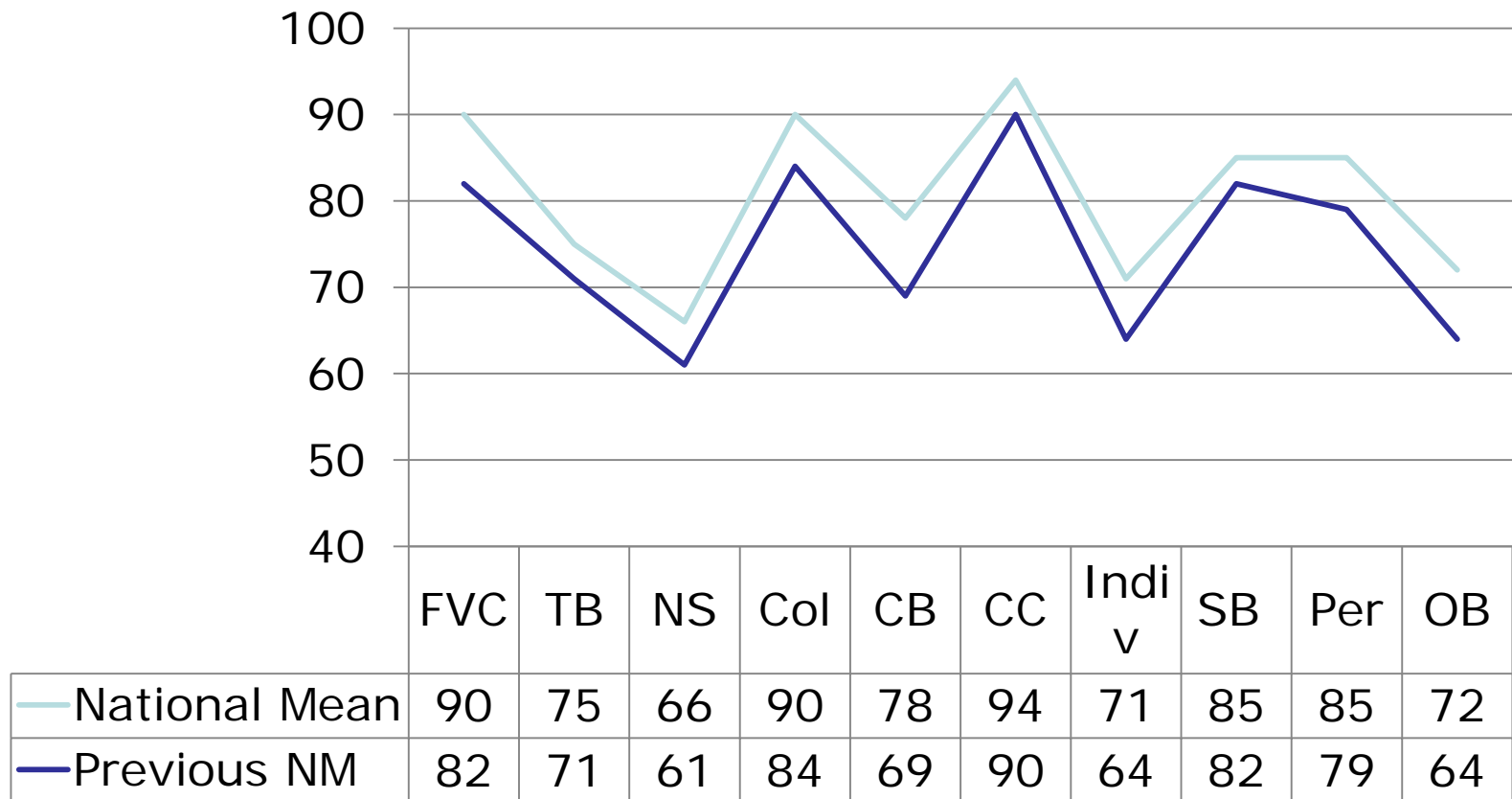
WFI** N = 1608

*These scores represent N=325 TOM forms collected at 9 sites nationally, not including Massachusetts (July 2009-Aug 2011)

**These scores represent N=1608 WFI CG forms collected at 46 sites nationally, not including Massachusetts (July 2009-March 2012)

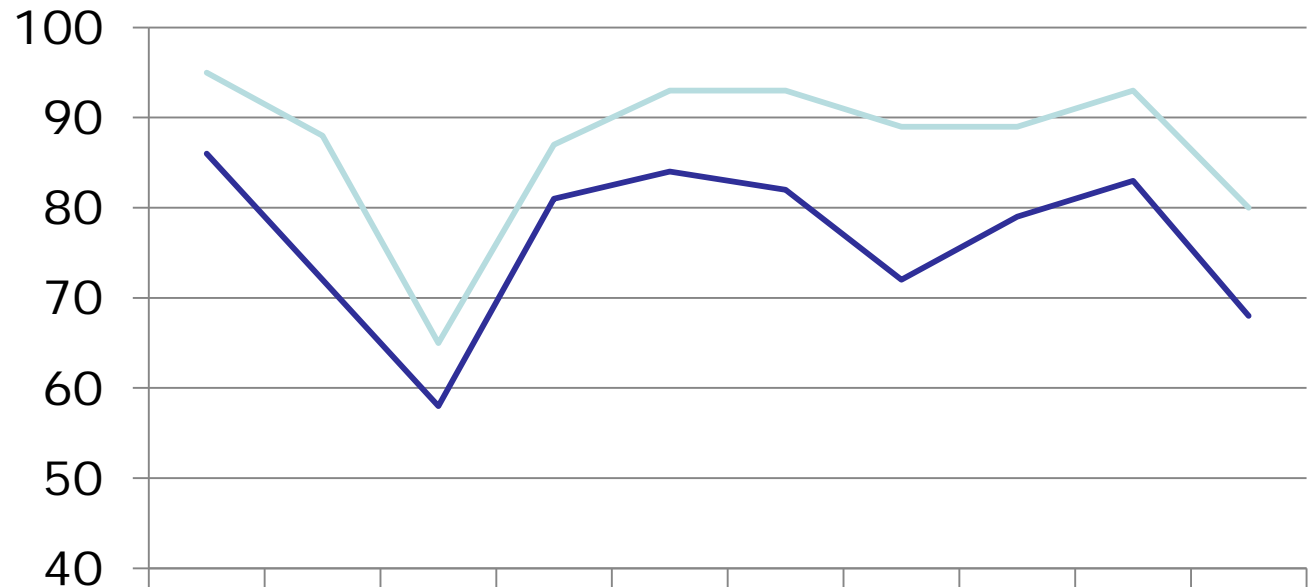


WFI National Means Comparison by Principle





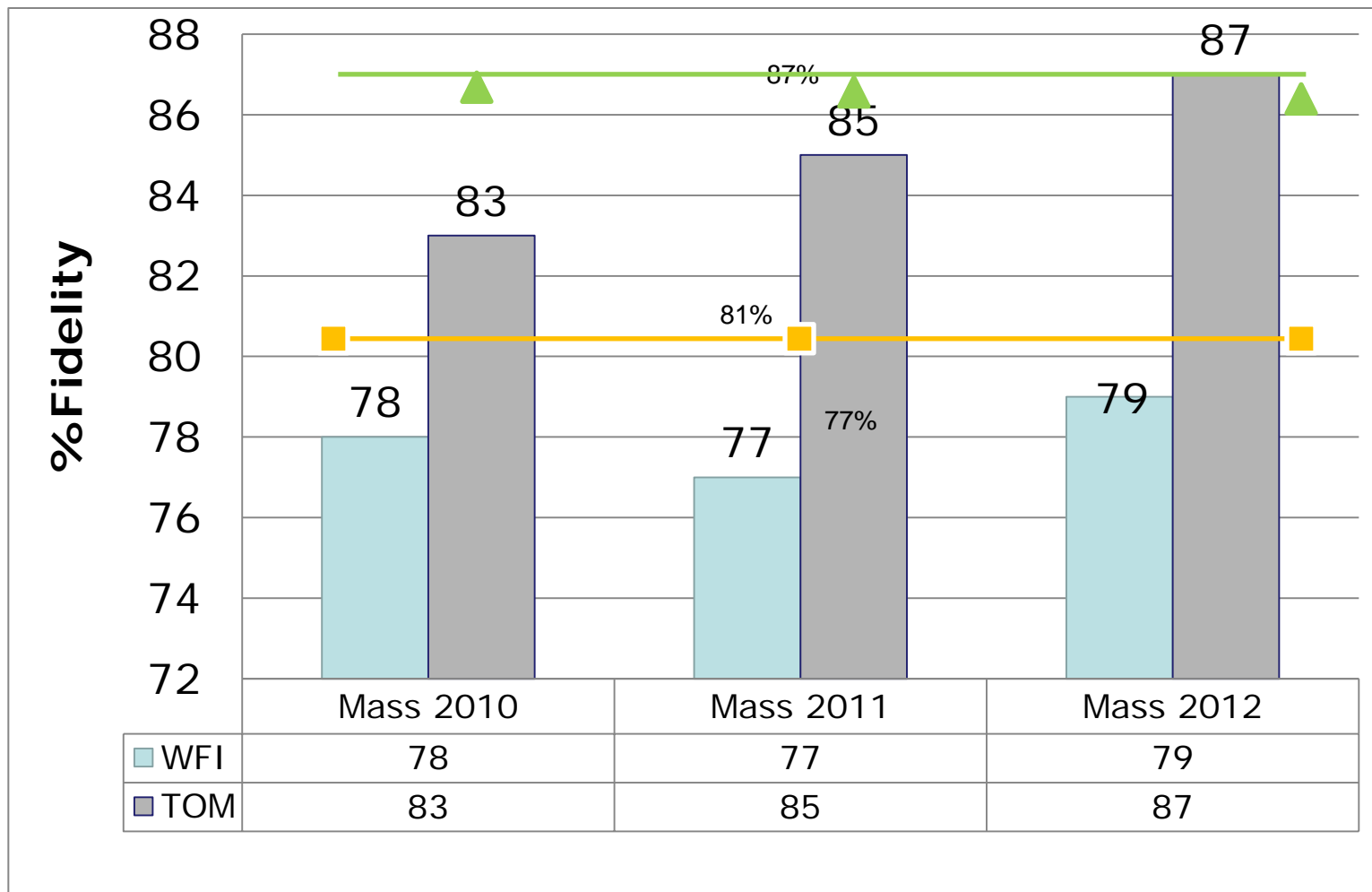
TOM National Means Comparison by Principle



	FVC	TB	NS	Col	CB	CC	Indi v	SB	Per	OB
— National Mean	95	88	65	87	93	93	89	89	93	80
— Previous NM	86	72	58	81	84	82	72	79	83	68



Mass total scores approach national WFI and TOM means



—■— WFI NM

—▲— TOM NM



TOM: Total and 2 principle scores show significant improvement

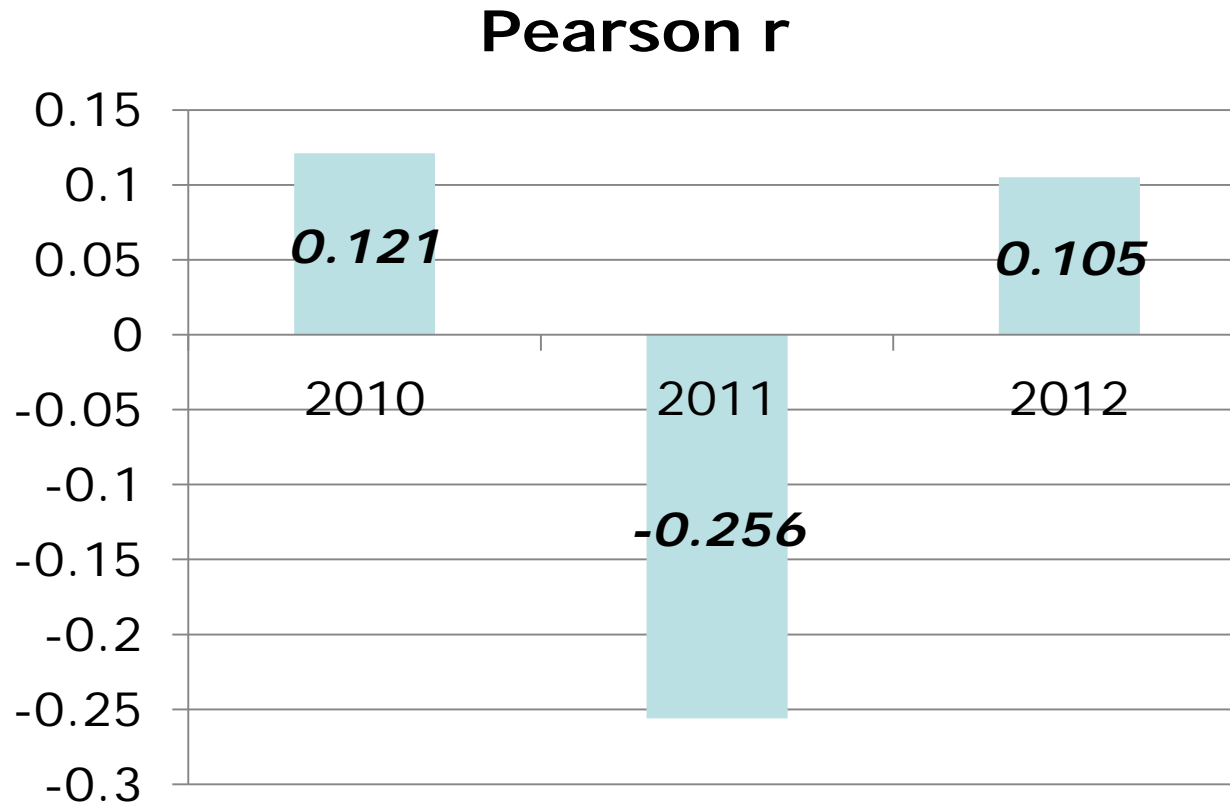
Team
Observation
Measure

	Total Score	FVC	TB	NS	Col	CB	CC	Indiv	SB	Per	OB
MA 2010	83%	95%	84%	43%	88%	91%	92%	83%	88%	89%	73%
MA 2011	85%	94%	85%	51%	92%	91%	93%	86%	90%	92%	78%
MA 2012	87%	97%	84%	51%	93%	93%	95%	90%	93%	93%	85%
2011 - '12 Change	↑	—	—	—	—	—	—	—	↑	—	↑
National Average	87%	95%	88%	65%	87%	93%	93%	89%	89%	93%	80%

↑	Significant increase
—	No significant change
↓	Significant decrease

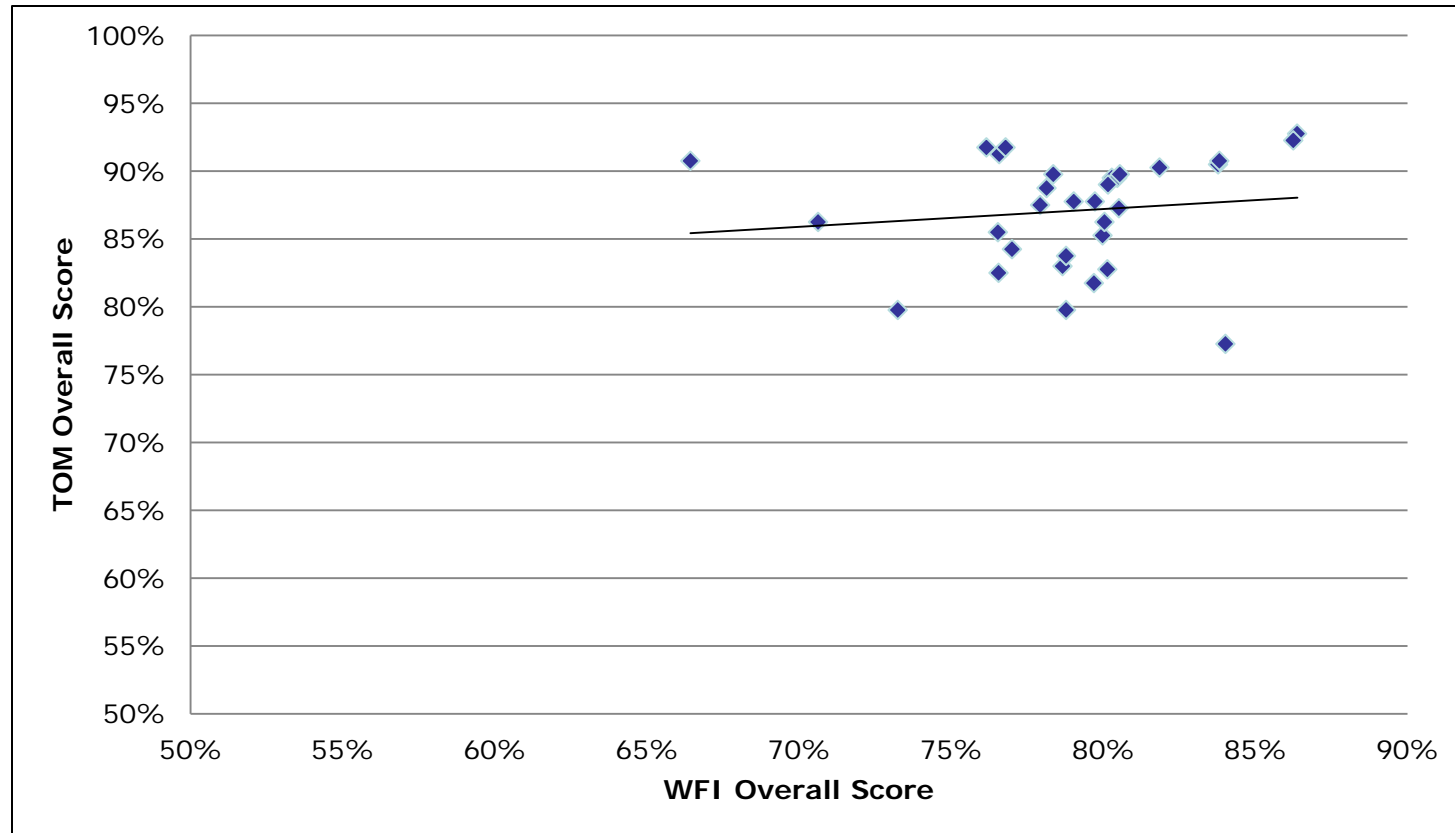
Paired T-test for difference of means calculated for each Principle to check whether changes in overall Principle scores for the Community Service Agencies were ≠ zero, using a significance level of $\alpha = .05$

Correlations between WFI & TOM by CSA is back in positive territory





CSA WFI and TOM Score Association 2012



Pearson Correlation Coefficient: 0.105



Wraparound Fidelity Index

Massachusetts Overall



WFI-4 Fidelity Scores by Phase

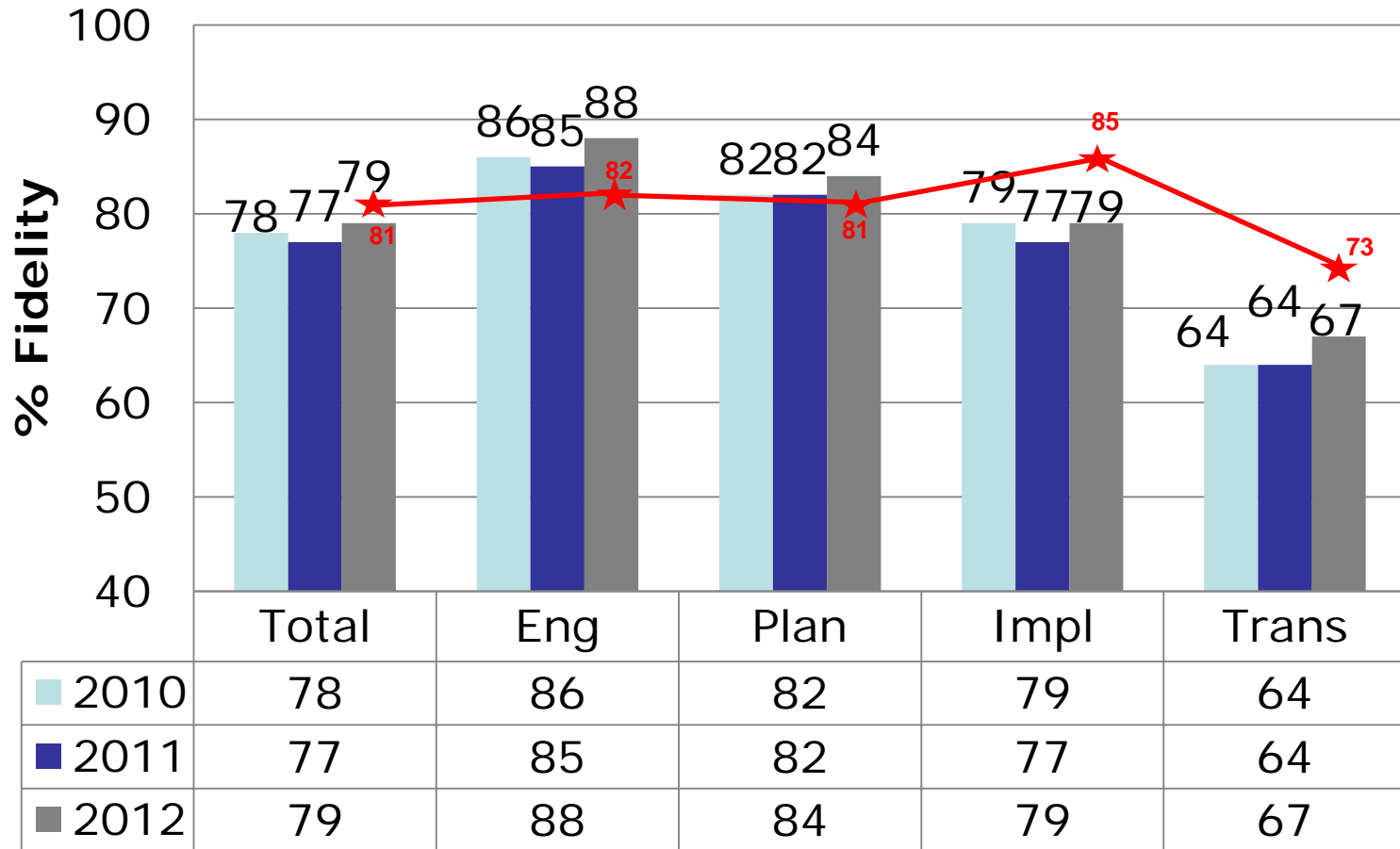
	Total	Phase			
	Mean Over-all	Eng	Pln	Imp	Tr
Mass 2010	78	86	82	79	64
Mass 2011	77	85	82	77	64
Mass 2012	79	88	84	79	67
Nat mean (CG only)	81	82	81	85	73

- Strong for Engagement and Planning
- Poorer for Implementation and Transition
- *Improving across the board, including Transition*



WFI Fidelity improving for all phases

2010 N=637 / 2011 N = 587 / 2012 N = 595



★ WFI NATIONAL MEAN



WFI: 3 of 10 principles show significant improvement since 2011

Wraparound Fidelity Index

	Total Score	FVC	TB	NS	Col	CB	CC	Indiv	SB	Per	OB
MA 2010	78%	88%	84%	53%	89%	74%	95%	70%	83%	83%	63%
MA 2011	77%	85%	82%	52%	89%	74%	93%	73%	79%	78%	65%
MA 2012	79%	89%	86%	55%	91%	72%	94%	75%	81%	82%	66%
2011 - '12 Change	—	↑	↑	—	—	—	—	—	—	↑	—
National Average	81%	90%	75%	66%	90%	78%	94%	71%	85%	85%	72%

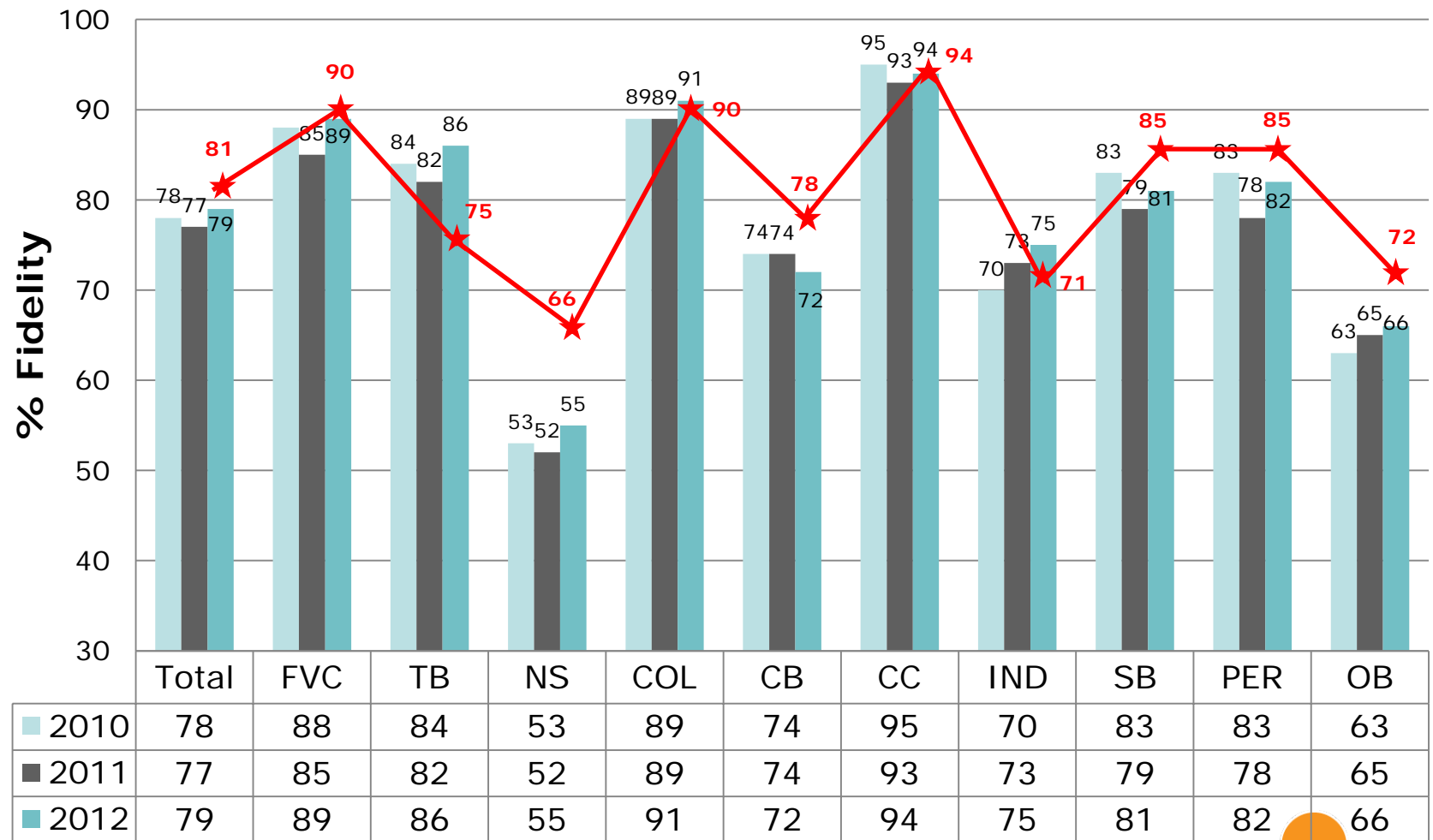
↑	Significant increase
—	No significant change
↓	Significant decrease

Paired T-test for difference of means calculated for each Principle to check whether changes in overall Principle scores for the Community Service Agencies were ≠ zero, using a significance level of $\alpha = .05$

WFI Fidelity by Principle

All CSAs

2010 N=637 / 2011 N = 587 /2012 N = 595



★ WFI National Mean

Item level results are keyed to indicate strengths, weaknesses and trends

- Strength: green box



- Weakness: red box



- Positive trend: green shading

1.78	1.89
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- Negative trend: orange shading

1.58	1.51	1.74
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Item Scores: Engagement

All CSAs

ITEMS	2010	2011	2012	NAT MEAN
CG1.1 - When you first met ICC, were you given time to talk about strengths *and* Did this process help you appreciate?	1.78	1.74	1.80	1.82
CG1.2 - Before your 1st team meeting, did your ICC fully explain the WA process and the choices you could make?	1.78	1.82	1.89	1.83
CG1.3 - At beginning of wrap process, did you have a chance to tell ICC what things have worked in the past?	1.83	1.78	1.89	1.81
CG1.4 - Did you select the people who would be on your WA team?	1.41	1.34	1.40	.93
CG1.5 - Is it difficult to get team members to attend team meetings when they are needed?	1.66	1.65	1.75	1.64
CG1.6 - Before your 1st wrap team meeting, did you go through a process of i.d.'ing what leads to crises for child and family?	1.81	1.90	1.89	1.76



Item Scores: Planning

All CSAs

ITEMS	2010	2011	2012	NM
CG2.1 - Did you and your team create a written plan that describes how the team will meet your child's needs? *and* Do you have a copy?	1.83	1.87	1.92	1.78
CG2.2 - Did the team develop any kind of written statement about what it is working on with your child and family? *and* Can you describe what your team mission says?	1.76	1.76	1.88	1.63
CG2.3 - Does your wrap plan include mostly professional services?	.99	1.10	1.23	.74
CG2.4 - Are the supports and services in your WA plan connected to the strengths and abilities of your child and family?	1.80	1.72	1.73	1.85
CG2.5 - Does the wrap plan include strategies for helping your child get involved w/ activities in his/her community?	1.31	1.26	1.21	1.27
CG2.6 - Are there members of your wrap team who do not have a role in implementing your plan?	1.73	1.73	1.77	1.78



Item Scores: Planning

All CSAs

ITEMS	2010	2011	2012	NM
CG2.7 - Does your team brainstorm many strategies to address your family's needs before selecting one?	1.79	1.79	1.84	1.84
CG2.8 - Is there a crisis plan? *and* does this plan specify how to prevent crisis?	1.48	1.57	1.63	1.67
CG2.9 - Do you feel confident that, in crisis your team can keep your child in the community?	1.57	1.58	1.51	1.74
CG2.10 - Do you feel like other people on your team have higher priority than you in designing your wrap plan?	1.83	1.73	1.83	1.71
CG2.11 - During planning process, did team make enough time to understand values? *and* Is your wrap plan in tune w/ family's values?	1.89	1.84	1.88	1.85



Item Scores: Implementation

All CSAs

ITEMS	2010	2011	2012	NM
CG3.1 - Are important decisions made about your child or family when you are not there?	1.90	1.86	1.89	1.77
CG3.2 - When your wrap team has a good idea for support, can they find resources or make it happen?	1.58	1.54	1.51	1.82
CG3.3 - Does your wrap team get your child involved w/ activities they like and do well?	1.05	0.95	.93	1.18
CG3.4 - Does the team find ways to increase the support you get from friends & family?	1.09	1.13	1.31	1.43
CG3.5 - Do the members of your team hold each another responsible for doing their part?	1.73	1.73	1.77	1.84
CG3.6 - Is there a friend or advocate of your child or family who actively participates in wrap team?	.68	.66	.62	.96
CG3.7 - Does your team come up w/ new ideas? *and* Does your team come w/ ideas when something's not working?	1.75	1.70	1.78	1.85



Item Scores: Implementation

All CSAs

ITEMS	2010	2011	2012	NM
CG3.8 - Are the services and supports in your wrap difficult for you family to access?	1.61	1.66	1.63	1.72
CG3.9 - Does the team assign specific tasks to all team members at end of mtng? *and* Does team review team member's follow-through at next mtng?	1.67	1.63	1.69	1.73
CG3.10 - Do members of your team always use language you can understand?	1.96	1.94	1.97	1.93
CG3.11 - Does your team create a positive atmosphere around successes and accomplishments at each team meeting?	1.88	1.91	1.92	1.92
CG3.12 - Does your team go out of its way to make sure all members present ideas and participate in decisions?	1.82	1.84	1.89	1.85
CG3.13 - Do you think your wrap process could be discontinued before you're ready?	1.48	1.32	1.42	1.54
CG3.14 - Do all the members of your team demonstrate respect for you and your family?	1.96	1.91	1.92	1.94
CG3.15 - Does your child have the opportunity to communicate their own ideas when it comes to decisions?	1.49	1.39	1.48	1.91



Item Scores: Transition

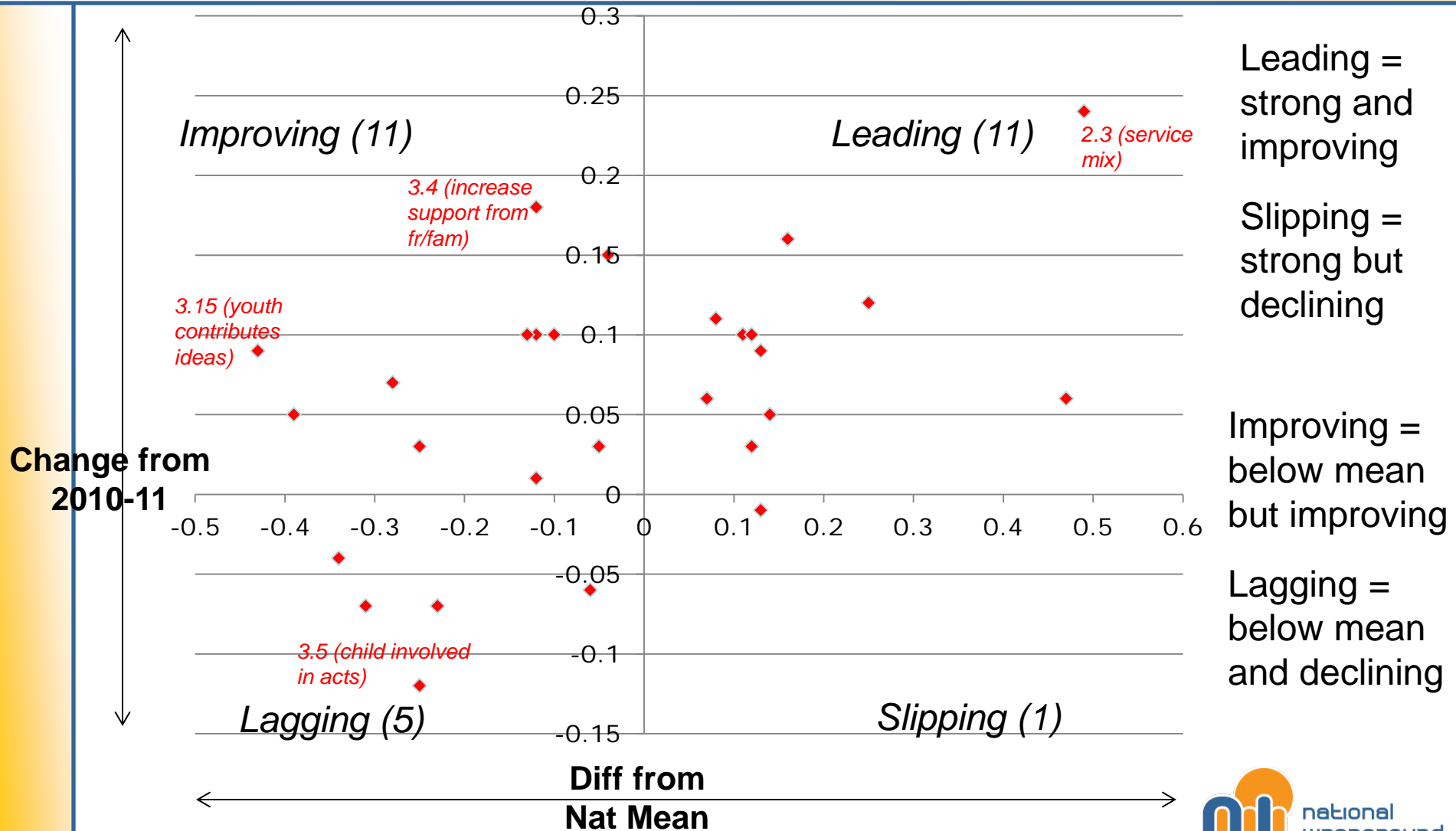
All CSAs

ITEMS	2010	2011	2012	NM
CG4.1 - Has your team discussed a plan for how wrap will end *and* Does your team have a plan for when?	.46	0.70	.70	.80
CG4.2 - Has the wrap process helped your child develop friendships w/ other youth	.94	.92	.99	1.27
CG4.3 - Has the wrap process helped your child to solve their own problems?	1.09	1.02	1.07	1.46
CG4.4 - Has your team helped you and your child prepare for major transitions?	1.50	1.64	1.66	1.5
CG4.5 - After formal wrap ends, do you think the process will be able to be 're-started' if you need it?	1.82	1.80	1.89	1.76
CG4.6 - Has the wrap process helped your family to develop or strengthen relationships that will support you when WA is finished?	1.45	1.42	1.52	1.65
CG4.7 - Do you feel like you and your family will be able to succeed on its own?	1.33	1.41	1.44	1.49
CG4.8 - Will some members of your team be there to support you when formal wrap is finished?	1.60	1.40	1.43	1.68

WFI Summary

- Notable but non-significant improvement in scores overall from 2011
- Significant improvement in principles of family voice and choice, team based, and persistence
- No significant decreases in any principle
- Small improvement in all Phases
- Higher than national mean (3-6 points) for Engagement and Planning
- Lower than national mean (5-6 points) for Implementation and Transition

Interpreting the Mass WFI item scores: Characterizing by mean score and trend



Many enduring strengths

- Engagement:
 - Explain process, tell story
 - CG select team, team members attend
 - Initial crisis response
- Planning:
 - Plan, team preparation (e.g., mission statements)
 - MIX OF INFORMAL AND FORMAL SUPPORTS
- Implementation: Family voice and choice
- Transition:
 - Planning for transitions, re-starting wrap

Multiple areas improving

- Planning: Crisis plans
- Implementation:
 - Finding ways to increase support from friends and family
 - Confidence the wrap process will not end before ready
 - Child communicates ideas when the time comes
- Transition:
 - WA helps develop or strengthen relationships

Needs for improvement

- Planning:
 - Connecting strengths to strategies
 - Confidence child can be maintained in community
- Implementation:
 - Natural supports involved,
 - Finding resources for ideas,
 - Getting child involved in activities
- Transition:
 - Transition plan,
 - Youth develops friendships
 - Youth learns to solve own problems,
 - Team members endure as supports after process ends



Team Observation Measure

Mass CBHI overall

TOM Total Fidelity Scores

All CSAs

2010 N=285 / 2011 N=658 / N = 752

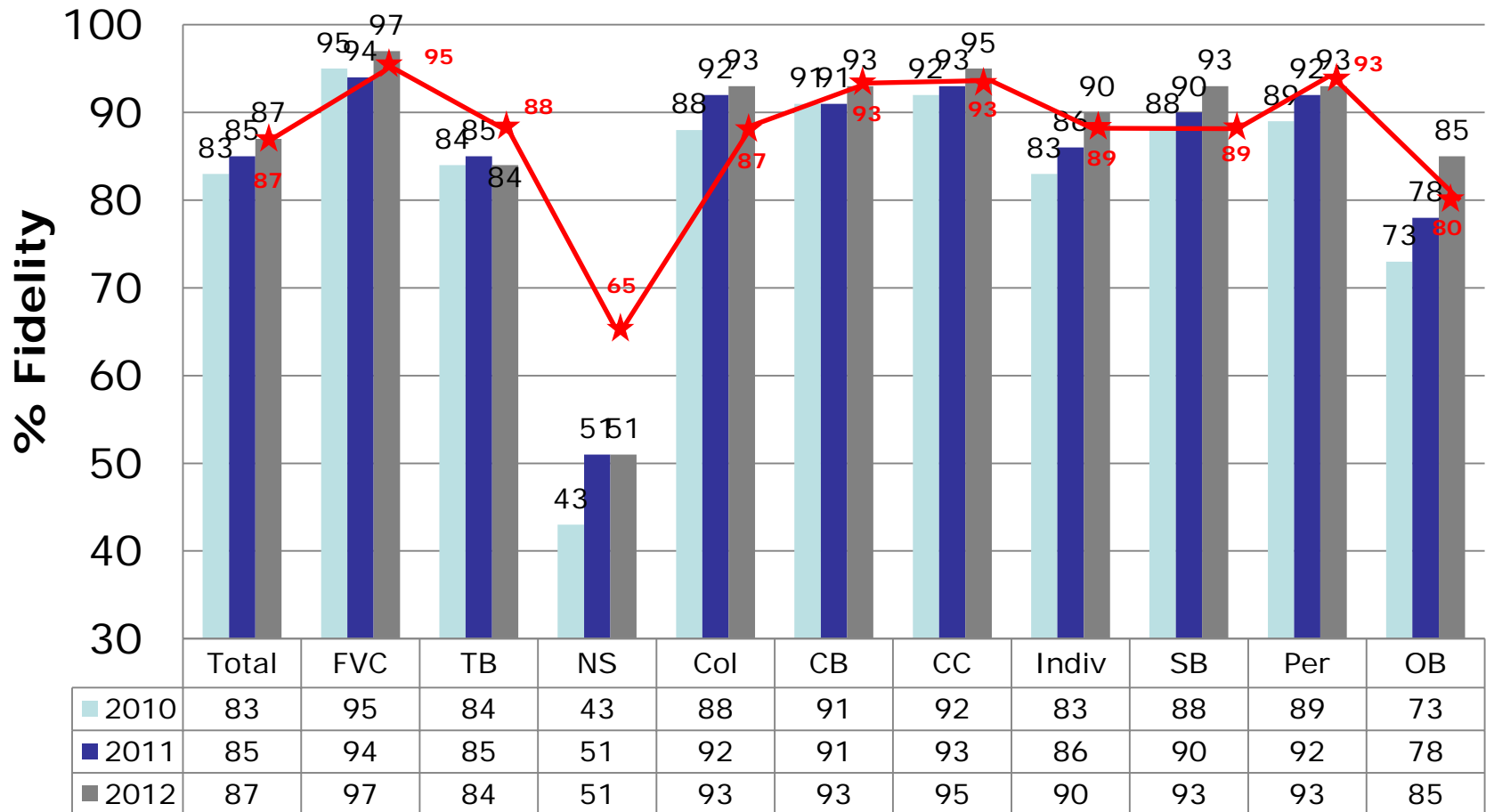
	Total	Principle									
	Overall Mean	FVC	TB	NS	Col	CB	CC	Ind	SB	Per	OB
Mass CBHI Mean 2010	83	95	84	43	88	91	92	83	88	89	73
Mass CBHI Mean 2011	85	94	85	51	92	91	93	86	90	92	78
Mass CBHI Mean 2012	87	97	84	51	93	93	95	90	93	93	85
National Mean	87	95	88	65	87	93	93	89	89	93	80



TOM Fidelity by Principle

All CSAs

2010 N=285 / 2011 N=658 / 2012 N = 752





TOM Item & Indicator Scores

All CSAs

TEAM BASED	2010	2011	2012	NM
Item 1: Team Membership and Attendance	3.10	3.09	3.04	3.42
a. Parent/caregiver is a team member and present at the meeting.	.99	.99	1.00	.98
b. Youth (over age 9) is a team member and present at the meeting.	.61	.61	.61	.86
c. Key school or other public stakeholder agency representatives are present.	.61	.60	.52	.52
Item 2: Effective Team Process	3.61	3.71	3.70	3.65
a. Team meeting attendees are oriented to the wraparound process and understand the purpose of the meeting.	.88	.91	.89	.82
b. The facilitator assists the team to review and prioritize family and youth needs.	.95	.95	.95	.95
c. Tasks and strategies are explicitly linked to goals.*	.91	.95	.93	.94
d. Potential barriers to the nominated strategy or option are discussed and problem-solved.	.86	.91	.93	.93

TOM Item & Indicator Scores

All CSAs

COLLABORATIVE	2010	2011	2012	NM
Item 3: Facilitator Preparation	3.50	3.68	3.66	3.27
a. There is a clear agenda or outline for the meeting, which provides an understanding of the overall purpose of the meeting and the major sections of the meeting.	.86	.91	0.92	.84
b. The meeting follows an agenda or outline such that team members know the purpose of their activities at a given time.	.84	.91	0.88	.84
c. The facilitator has prepared needed documents and materials prior to the meeting.	.90	.96	0.96	.92
d. A plan for the next meeting is presented, including time & date.	.89	.91	0.90	.68
Item 4: Effective decision making	3.50	3.69	3.74	3.68
a. Team members demonstrate consistent willingness to compromise or explore further options when there is disagreement.	.96	.97	0.96	.91
b. Team members reach shared agreement after having solicited information from several members or having generated several ideas.	.87	.95	0.96	.92
c. The plan of care is agreed upon by all present at the meeting.	.94	.98	0.97	.95
d. The facilitator summarizes the content of the meeting at the end of the meeting, including next steps and responsibilities.	.76	.82	0.85	.88

TOM Item & Indicator Scores

All CSAs

INDIVIDUALIZED	2010	2011	2012	NM
Item 5: Creative Brainstorming and Options	3.11	3.16	3.41	3.34
a. The team considers several different strategies for meeting each need and achieving each goal that is discussed.	.83	.87	0.91	.88
b. The team considers multiple options for tasks or action steps.	.81	.86	0.89	.87
c. The facilitator leads a robust brainstorming process to develop multiple options to meet priority needs.	.67	.69	0.72	.72
Item 6: Individualized process	3.53	3.70	3.76	3.75
a. Planning includes action steps or goals for other family members, not just identified youth.	.85	.92	0.93	.96
b. Facilitator and team members draw from knowledge about the community to generate strategies and action steps based on unique community supports.	.85	.91	0.90	.88
c. Team facilitates the creation of individualized supports or services to meet the unique needs of child and/or family.*	.89	.96	0.96	.94
d. Youth, caregiver, & family members give their opinions about potential services, supports, or strategies; including describing what has or has not worked in the past.	.93	.95	0.96	.97

TOM Item & Indicator Scores

All CSAs

NATURAL SUPPORTS	2010	2011	2012	NM
Item 7: Natural and community supports	1.54	1.61	1.64	1.89
a. Natural supports for the family are team members and are present.	.27	.27	0.28	.41
b. Team provides multiple opportunities for natural supports to participate in significant areas of discussion.	.75	.80	0.70	.83
c. Community team members and natural supports participate in decision-making.	.72	.79	0.77	.79
d. Community team members and natural supports have a clear role on the team.*	.72	.81	0.79	.76
Item 8: Natural support plans	1.94	2.47	2.42	3.31
a. Brainstorming of options and strategies include strategies to be implemented by natural and community supports.	.70	.77	0.74	.83
b. The plan of care represents a balance between formal services and informal supports.	.45	.58	0.56	.71
c. There are flexible resources available to the team to allow for creative services, supports, and strategies.	.21	.58	0.49	.97

TOM Item & Indicator Scores

All CSAs

UNCONDITIONAL/ PERSISTANCE	2010	2011	2012	NM
Item 9: Team mission and plans	3.44	3.61	3.68	3.66
a. The team discusses or has produced a mission/vision statement.	.84	.90	0.93	.94
b. The team creates or references a plan that guides its work.	.91	.96	0.97	.96
c. The team has confirmed or is creating a crisis plan.	.78	.90	0.84	.80
d. The team plan contains specific goals that are linked to strategies and action steps.	.92	.96	0.95	.96
Item 10: Shared Responsibility	3.66	3.72	3.76	3.79
a. The team explicitly assigns responsibility for action steps that define who will do what, when, and how often.*	.87	.91	0.91	.93
b. There is a clear understanding of who is responsible for action steps and follow up on strategies in the plan.	.92	.92	0.93	.95
c. Providers and agency representatives at the meeting demonstrate that they are working for the family and not there to represent a different agenda or set of interests.	.96	.98	0.98	.97

TOM Item & Indicator Scores

All CSAs

CULTURAL COMPETENCE	2010	2011	2012	NM
Item 11: Facilitation skills	3.55	3.62	3.69	3.58
a. Facilitator is able to impart understanding about what the wraparound process is, how it will work for this family, and how individual team members will participate.	.83	.88	0.87	.80
b. Facilitator reflects, summarizes, and makes process-oriented comments.	.89	.92	0.93	.91
c. Facilitator is able to manage disagreement & conflict and elicit underlying interests, needs, and motivations of team members.	.92	.92	0.93	.90
d. Talk is well distributed across team members and each team member makes an extended or important contribution.	.93	.92	0.95	.95
Item 12: Cultural and Linguistic Competence	3.76	3.86	3.92	3.85
a. The youth, caregiver, and family members are given time to talk about the family's values, beliefs, and traditions.	.87	.95	0.97	.92
b. The team demonstrates a clear and strong sense of respect for the family's values, beliefs, and traditions.	.95	.97	0.98	.94
c. Meetings and meeting materials are provided in the language the family is most comfortable with.	.97	.98	0.99	.98
d. Members of the team use language the family can understand (i.e. no professional jargon/acronyms)	.97	.98	0.99	.99

TOM Item & Indicator Scores

All CSAs

OUTCOMES BASED	2010	2011	2012	NM
Item 13: Outcomes Based Process	2.88	3.06	3.35	3.21
a. The team uses objective measurement strategies.	.67	.76	0.81	.77
b. The team assesses goals/strategies using measures of progress.	.72	.77	0.81	.75
c. The team revises the plan if progress toward goals is not evident.	.84	.88	0.93	.89
Item 14: Evaluating Progress and Success	2.99	3.15	3.43	3.24
a. The team conducts a systematic review of members' progress on assigned action steps.	.78	.84	0.90	.88
b. The facilitator checks in with the team members about their comfort and satisfaction with the team process.	.74	.79	0.82	.79
c. Objective or verifiable data is used as evidence of success, progress, or lack thereof.	.72	.78	0.84	.76

TOM Item & Indicator Scores

All CSAs

VOICE AND CHOICE	2010	2011	2012	NM
Item 15: Youth and Family Voice	3.89	3.86	3.89	3.92
a. The team provides extra opportunity for caregivers to speak and offer opinions, especially during decision making.	.98	.98	0.99	.99
b. The team provides extra opportunity for the youth to speak and offer opinions, especially during decision making.	.93	.93	0.91	.97
c. Caregivers, parents, and family members are afforded opportunities to speak in an open-ended way about current and past experiences and/or about hopes for the future.	.98	.98	0.99	.99
d. The youth is invited to speak in an open-ended way about current and past experiences and/or about hopes for the future.	.96	.93	0.94	.96
Item 16: Youth and Family Choice	3.72	3.69	3.82	3.70
a. The youth prioritizes life domains, goals, or needs on which he or she would like the team to work.	.78	.79	0.81	.80
b. The caregiver or parent prioritizes life domains goals, or needs on which he or she would like the team to work.	.93	.96	0.97	.94
c. The family and youth have highest priority in decision making	.97	.95	0.99	.97

TOM Item & Indicator Scores

All CSAs

STRENGTH BASED	2010	2011	2012	NM
Item 17: Focus on Strengths	3.31	3.47	3.64	3.50
a. Team members acknowledge or list caregiver/youth strengths.	.92	.95	0.96	.94
b. Team builds an understanding of how youth strengths contribute to the success of team mission or goals.	.78	.85	0.87	.84
c. In designing strategies, team members consider and build on strengths of the youth and family.	.82	.89	0.93	.89
d. Facilitator and team members analyze youth & family member perspectives and stories to identify functional strengths.	.78	.87	0.89	.84
Item 18: Positive Team Culture	3.7	3.69	3.80	3.62
a. The team focuses on improvements or accomplishments throughout the meeting.	.91	.92	0.94	.92
b. The facilitator directs a process that prevents blame or excessive focus on or discussion of negative events.	.97	.95	0.96	.91
c. The facilitator encourages team culture by celebrating successes since the last meeting	.88	.93	0.93	.90
d. There is a sense of openness and trust among team members.	.94	.93	0.96	.89

TOM Item & Indicator Scores

All CSAs

COMMUNITY BASED	2010	2011	2012	NM
Item 19: Community Focus	3.41	3.45	3.62	3.57
a. The team is actively brainstorming and facilitating community activities for the youth and family.*	.82	.85	0.88	.84
b. The team prioritizes services that are community-based.	.82	.86	0.88	.89
c. The team prioritizes access to services that are easily accessible to the youth and family.	.93	.94	0.96	.94
Item 20: Least Restrictive Environment	3.92	3.86	3.93	3.93
a. The team's mission and/or identified needs support the youth's integration into the least restrictive residential and educational environments possible.*	.99	.97	0.99	.99
b. When residential placements are discussed, team chooses community placements for the child or youth rather than out-of-community placements, wherever possible.	.87	.88	0.94	.97
c. Serious challenges are discussed in terms of finding solutions, not placement in more restrictive residential or educational environments.	.95	.94	0.96	.97

TOM Scores are at the national mean and continue to improve

- Overall: Has reached the “new” national mean
- Meaningful improvement from 2010
 - ***However – need to ask whether supervisor ratings provide valid information***
- Big strengths:
 - Facilitator preparation – agenda and needed documents
 - Team mission and plans
 - Shared responsibility among team members
 - Focus on strengths
 - Positive team culture
 - Community focus and least restrictive care options

Areas of need that are improving

- Effective team process
- Effective decision making and summarizing content
- Creative brainstorming and options
- Individualized process – planning for other family members
- Plans have a balance between formal and informal supports* *
- Facilitation skills
- Outcomes based process and evaluating progress and success

• * * Contradicts WFI

Needs for improvement: Lagging or slipping

- Key stakeholders are present
- Youth is present
 - Youth contribute
 - Youth are asked their priorities
- Natural supports are present and contribute
- Flexible resources are available to the team



Summary of Findings

Summary of findings

- Continued strong fidelity results, especially for a large statewide initiative
 - Right at the “new” national mean
- WFI scores stay stable, TOM shows small improvement,
- Improvements noted for:
 - Planning: Crisis plans
 - Implementation:
 - Finding ways to increase support from friends and family,
 - Confidence the wrap process will not end before ready,
 - Child communicates ideas when the time comes
 - Transition:
 - WA helps develop or strengthen relationships

Summary of findings

- Areas of strength still continue to be:
 - Managing the details of the wrap process BUT ALSO
 - Family voice and choice
 - Collaborative teaming
 - Individualized plans with balance of formal svcs and informal supports

Looking deeper: Relative weaknesses

- Certain bigger ideas of wraparound not yet happening consistently
 - **Natural supports** and natural support plans
 - Connection to community activities and informal supports
 - **Full youth engagement**
 - Youth and family self-reliance and self-efficacy
 - Youths present at meetings
 - Youths solving own problems
 - Using objective outcomes and process measures

Looking deeper: Relative weaknesses

- Better on some things, but still room for more improvement:
 - Robust brainstorming
 - Objective goal setting and monitoring of progress
 - Transition planning, crisis planning
- Structural barriers?*
- Flexible funds
- Local community collaboratives
- Time to develop more creative plans linked to community supports and natural supports
- Consistent understanding of how FPs and ICCs work together
 - *NOTE that these findings were from visits to Massachusetts in 2010-11

Possible strategies: System level

- Training and coaching
 - Need to decide upon a method for establishing a state Center of Excellence
 - Comprehensive workforce support model, with quality and outcomes evaluation
- Fiscal supports
 - Use of case rates, Availability of flexible funds
 - Methods to ensure less emphasis on productivity vs fidelity and outcomes?*
 - *NOTE that this finding is based on visits to Massachusetts in 2010-11

Possible strategies: System level

- Community supports, collaboration, transition planning:
 - Encouragement to taking a community-level system of care approach
 - Hire resource development specialist(s)
 - Training and support to community collaborative teams
 - Continued social marketing of CBHI and cross agency training
 - Collecting info on and reviewing barriers faced by teams and CSAs
- Youth engagement
 - Use of youth peer to peer support partners?

Possible strategies: Organizational level

- Natural supports:
 - Specific strategies (family finding?), training, time, supervision emphasis
 - Role for family partner?
- Staff turnover/attrition:
 - ***Training and guidance on staff recruitment and selection***
 - Examples from Maryland Institute for Innovation and Implementation
- Outcomes based:
 - Greater attention to consistent tracking of goal attainment and meeting needs
 - ***Use a dashboard or monitoring and feedback system?***

Training CSAs to do better staff selection – Pre-Interview

Care Coordinators:

- Starts with the position posting
 - Where you advertise
 - Job description
- Reviewing Resumes
 - Know what to look for
 - Work with people, system experience, creativity and/or excitement in a cover letter, goals/objectives, living abroad or experience with diverse cultures, organizational skills, writing abilities, sometimes the unusual on a resume

Training CSAs to do better staff selection— The Interview

Care Coordinator:

- Ask behavioral questions
- You can teach process, you may not be able to teach values and perspectives
- Mock CFT with instructions
- Writing sample (based on this example take 5 minutes and write a progress note)
- Mini-training
- Meet with other care coordinators (an honest “day in the life”)
- Interview with a parent or youth

Training CSAs to do better staff selection– Sample Interview Questions

- We believe that all bad behavior comes as a result of unmet need. I'm going to read you a brief scenario. When Johnny, a 12 year old boy, is scheduled to go to therapy sessions he and his mom get in arguments, which end with Johnny hitting his mother. What do you think his unmet need is and which strategies would help meet the unmet need?
- Tell me about a child (or parent) that you have been most frustrated with by describing what they were good at.
- I'm going to read you a brief scenario: Julie has a diagnosis of bipolar disorder. She has lived with her mother since birth. Julie recently has ended up in a residential treatment facility and Robin, her mom, wants to come by the facility everyday to see her. Line staff thinks this will interfere with the milieu of the program. What do you think should happen?

Training CSAs to do better staff selection– Sample Interview Questions

- Tell me about a child with whom you worked that demonstrated the most severe and complex behaviors. Then describe how you did or would work to maintain this child at home with their family in the community.
- It is an expectation of a care coordinator that you will work with many systems and agencies. What will you do to ensure a strong partnership with these agencies while always maintaining a family determined process?

IT support for implementation: Wraparound Team Monitoring System (Wrap-TMS)

- A web-based data collection, management and feedback system
- Designed to assist the Wraparound Process and other types of integrated, team-based service approaches.
- Provides a repository of key information on individuals in care (e.g., children, youth, and families)
- At a team/individual level: Facilitates communication and sharing of information between team members, and tracking of progress toward priority needs and goals
- At higher management levels: Supports supervision, evaluation of staff performance, and monitoring of implementation, outcomes, service use, and costs

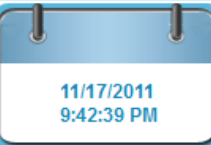
Enroll Youth



TMS
Team Monitoring Made Simple

[Admin](#)
[Change Password](#)
[User Settings](#)
[Log Out](#)

Team Monitoring Made Simple



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- [HOME](#)
- [ENROLLMENT](#)
- [ASSESSMENTS](#)
- [SERVICES](#)
- [REPORTS](#)
- [DATA](#)
- [ADMIN](#)

Youth
Family
Assessments
Services
Reports
Team

* First Name:

* Last Name:

* Gender:

* Ethnicity:

* Date of Birth:

Street1:

Street2:

City:

Middle Initial:

* Hispanic? ☒

Age:

State:

Grade:

Legal Guardian:

Primary Caregiver:

Custody Status:

Enrollment Status:

Facilitator:

* Case Number:

Entered By:

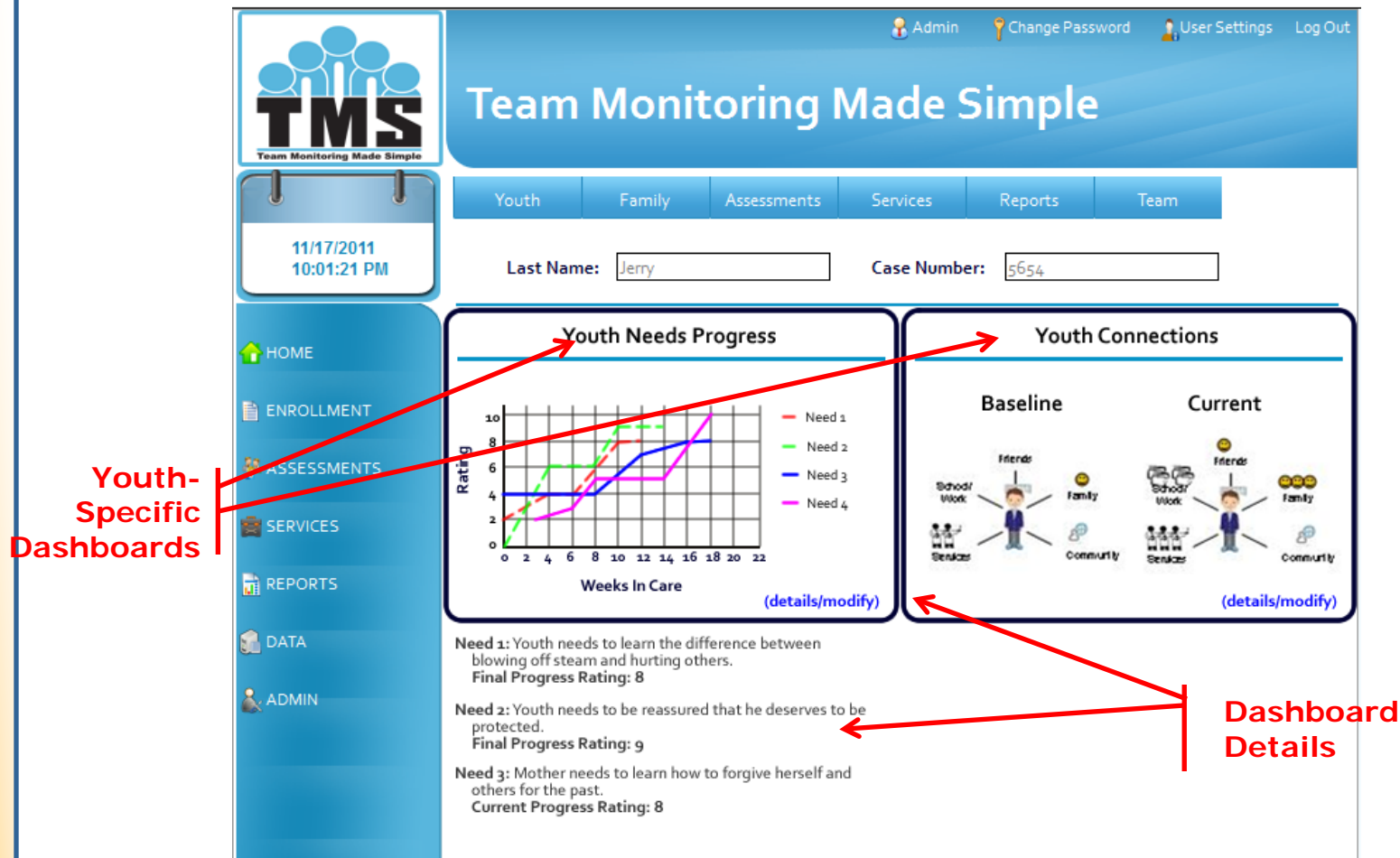
Entered on:

Last Edited On:

* Medicaid Number:

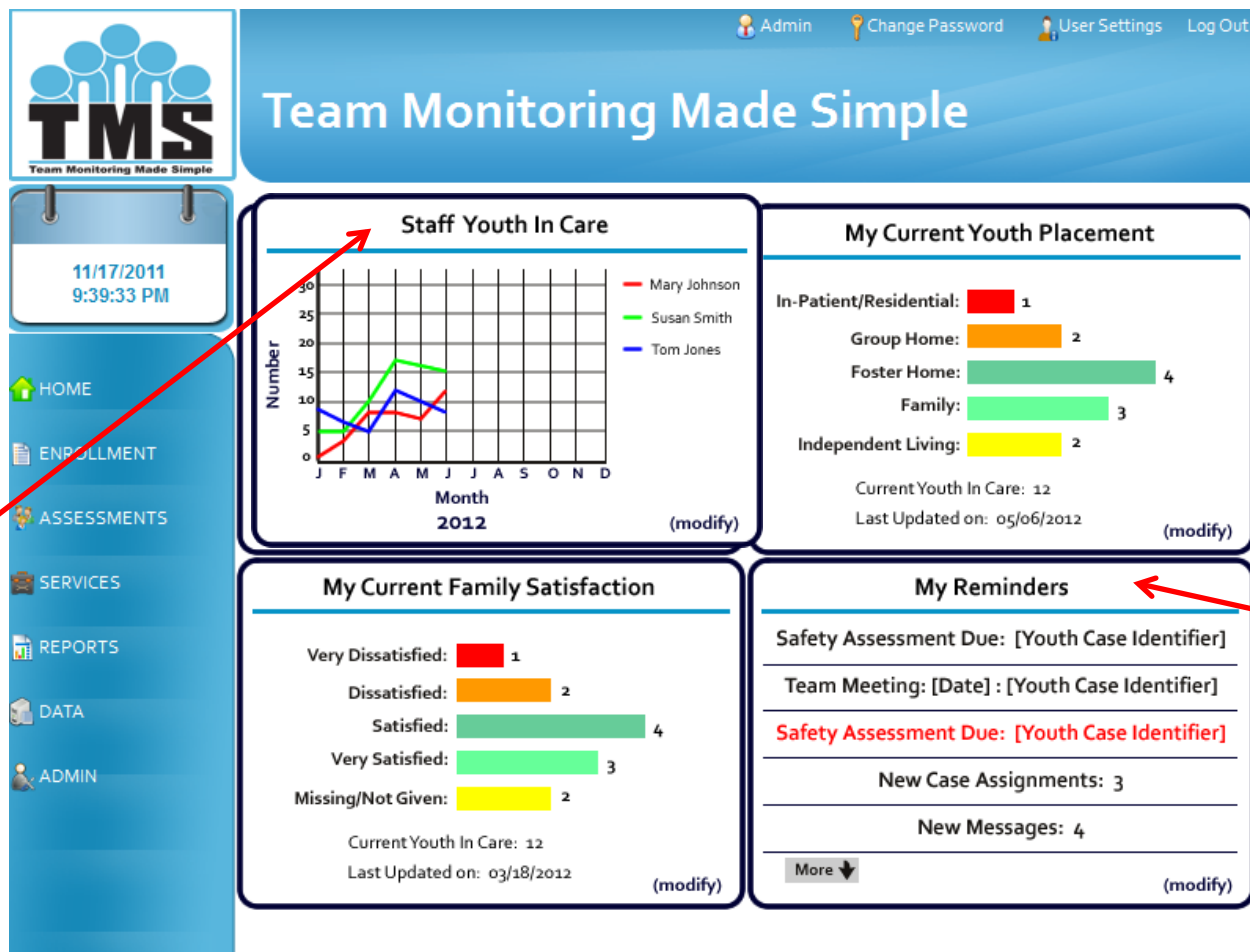
Enrolled Date:

Dashboards - Youth




Home Page – Dashboards - Supervisors

Supervisor
or
Dashboard



User-Specific
Reminders

TMS Youth Space



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- HOME
- ENROLLMENT
- ASSESSMENTS
- SERVICES
- REPORTS
- DATA
- ADMIN


Admin Change Password User Settings Log Out

Team Monitoring Made Simple

Youth Family Assessments Services Reports Team

Blick, Sarah Age: 14 Female Enrolled: 14 weeks

All About ME



[Add/Edit](#) my profile picture

My Favorite Color: Blue

My Favorite Class: Art

My Favorite Teacher: Mrs. Gunderson

In 5 years I want to be: In College

In 10 years I want to be: A Veterinarian

My Interests and Activities: I like to draw and paint. My favorite is water-color painting. I own a cat named Fluffy and she likes to sit on my lap all the time. My best friend is Elizabeth, but I call her 'Lizzie' and we like to hang-out at the mall and go window shopping.

If I could have lunch with any person, living or dead, it would be: Justin Bieber. I just think he is so cute and talented.

Possible strategies: Practice level

- Invest in specific strategies for engaging youth
 - E.g., Achieve My Plan! (AMP) from Portland State University
- Individualized care
 - More attention to developing individualized, creative plans in supervision, QI
- Emphasis on training and supervision on:
 - Transition planning
 - Individualized care plans
 - Natural support action steps
- Teaching self-efficacy
- Family self-efficacy and youth solving problems
 - ***Methods to connect youths to high quality clinical care***

Wraparound + Managing and Adapting Practice (MAP)

A method to facilitate connection to effective clinical care



Practice Wise: A web-based searchable Knowledge repository

Evidence-Based Youth Mental Health Services Literature Database - Internet Explorer provided by Dell

http://www.practicewise.com/pwebs/YouthSearch.aspx

Evidence-Based Youth Mental Health Services Lit...

PracticeWise

Summary of Youth Treatments

Your current search criteria are:
Problem Type: Anxiety Age: 12 Gender: Male Strength of Evidence: 2 Good Support or Better

Your search returned:
Number of Study Groups: 30 [View Protocols](#) Number of Papers 22 [View Papers](#)

Modify

Summary of Treatment with Good Support or Better

Age (in Years): 5-18
Grade: 1-10
Duration (Days): 1-180
Frequency: Daily-Biweekly
Race or Ethnicity: White or Caucasian, Black or African American, Hispanic or Latino, Asian or Pacific Islander, Multiethnic

TREATMENT	PERCENT OF GROUPS
Cognitive Behavior Therapy	50
Exposure	23
Cognitive Behavior Therapy with Parents	7
Modeling	7
Cognitive Behavior Therapy and Medication	3
Cognitive Behavior Therapy for Child and Parent	3
Education	3
Hypnosis	3

SETTING	PERCENT OF GROUPS
Clinic	57
School	33
Other	5

FORMAT	PERCENT OF GROUPS
Group Client	50
Individual Client	50
Group Parent	13
Individual Parent	13
Parent Child	10
Multiple Family	7
Family	3

PRACTICE ELEMENT	PERCENT OF GROUPS
Exposure	90
Relaxation	67

This tells you the treatment types that work for this problem.

Done

Internet | Protected Mode: On

100%

Practice Wise: A web-based searchable Knowledge repository

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http://www.practicewise.com/pwebs/YouthSearch.aspx

Evidence-Based Youth Mental Health Services Lit...

PracticeWise

Summary of Youth Treatments

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Your search returned:
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[Modify](#)

PRACTICE ELEMENT	PERCENT OF GROUPS	Parent Child	10
Exposure	90	Mu	7
Relaxation	67	Fa	3
Cognitive			
Psychoeducational-Child			
Psychoeducational-Parent			
Self-Monitoring	43		
Self-Reward/Self-Praise	43		
Maintenance/Relapse Prevention	40		
Modeling	33		
Tangible Rewards	33		
Therapist Praise/Rewards	33		
Problem Solving	30		
Relationship/Rapport Building	27		
Assertiveness Training	17		
Praise	17		
Behavioral Reinforcement	17		

This tells you the practice elements associated with those treatment types.

Done

Internet | Protected Mode: On

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Practitioner Guides (Another MAP Resource)

Practitioner
Guide

Attending

Use This When:

To improve the quality
of the caregiver-child
relationship.



Objectives:

- to increase the amount of positive attention provided to the child, even if the child has misbehaved at other times during the day
- to teach the caregiver to attend to positive behaviors
- to promote the child's sense of self-worth

Steps:

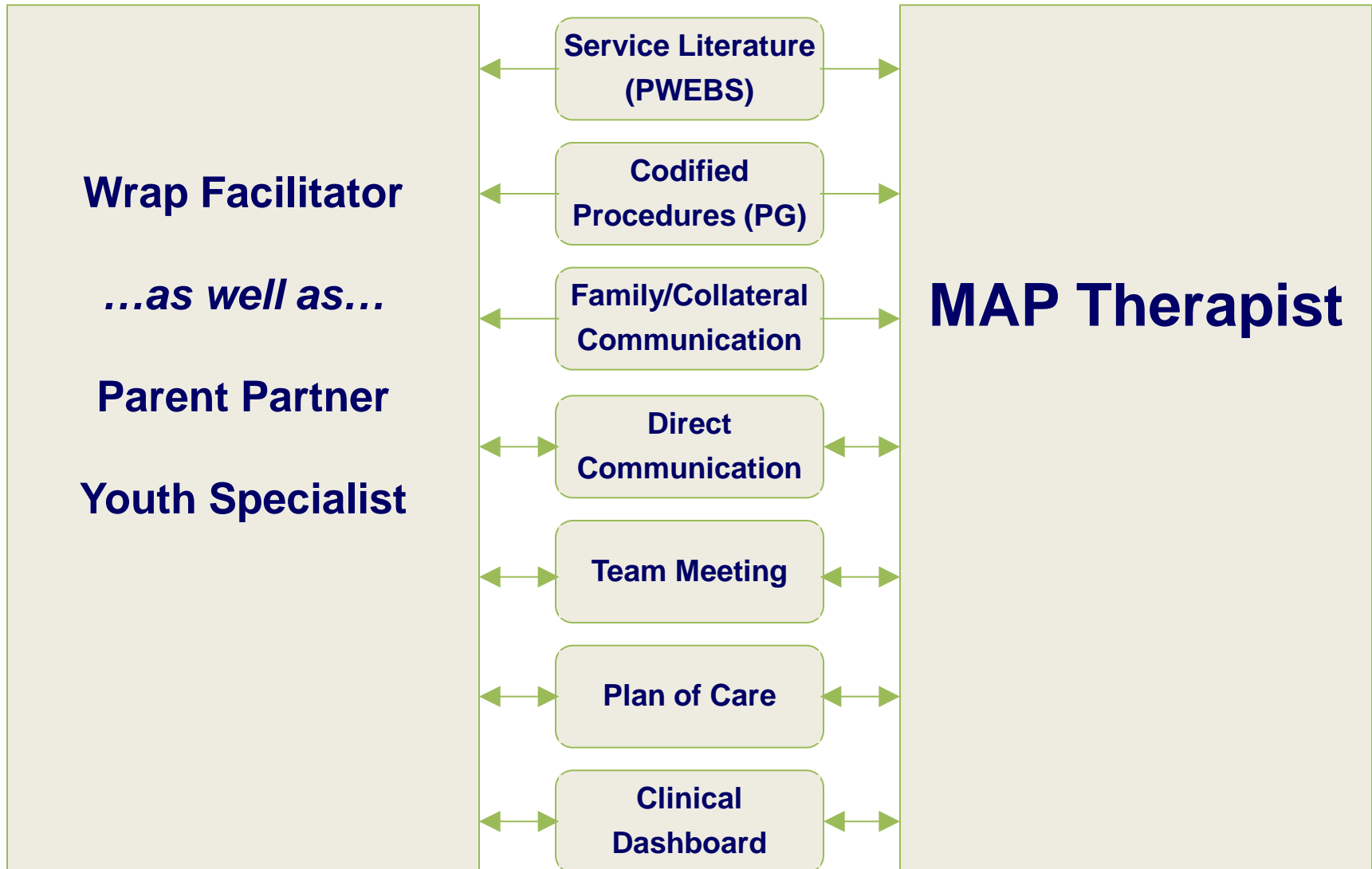
<input type="checkbox"/> Provide rationale	<ul style="list-style-type: none"> • Emphasize the importance of providing positive attention to the child. • Elicit the caregiver's opinion about how attention affects behavior and people's motivation to do a good job. • Have the caregiver describe his or her best and worst "managers" and the caregiver's motivation to work for each. • Lead the caregiver to recognize that how he or she was treated affected the caregiver's desire to work. • Discuss how the child's behavior may be affected by the caregiver's behavior towards the child and how the child's desire to behave can be increased by improving the caregiver-child relationship.
<input type="checkbox"/> Set aside one-on-one time for caregiver and child	Encourage the caregiver to set aside a block of time (e.g., 10 minutes) each day devoted to joining the child in an activity the child has chosen.
<input type="checkbox"/> Teach caregiver to provide positive and descriptive commentary	<ul style="list-style-type: none"> • Show the caregiver how to demonstrate sincere interest in the child's activities while they are playing. • Instruct the caregiver to provide enthusiastic descriptive (e.g., "You are drawing a tree") and/or positive (e.g., "I like the way you stacked the blocks") commentary and praise regarding the child's behavior.
<input type="checkbox"/> Encourage caregiver to engage in child's activity	Suggest that the caregiver become actively involved in the play activity by imitating the child's behavior in order to demonstrate approval.
<input type="checkbox"/> Restrict criticism, questions, and commands	<ul style="list-style-type: none"> • It is important that the child lead the activity; that is, the caregiver should refrain from making suggestions, asking questions, and criticizing the child. • Allow the child to use his or her imagination (e.g., coloring the green or making up new rules to a game) without caregiver input about the "correct" way to do things.
<input type="checkbox"/> Anticipate difficulties	<p>When the procedure is initially implemented, the child may engage in negative behavior that characterizes the usual caregiver-child interaction. When this occurs, the caregiver should:</p> <ul style="list-style-type: none"> • consistently ignore negative behavior by looking away; • refrain from scolding the child so as to avoid providing negative attention for misbehavior; • end one-to-one time if disruptive behavior continues or is dangerous. <p>Over time, however, it is expected that consistent positive attending will result in decreased negative behavior and increased positive caregiver-child interactions.</p>



One Idea = Ensure connection to a MAP Therapist



Option 2: Fully coordinated Wrap+MAP process



Measurement issues

- WFI: Maybe now it is time to start to interview youths?
 - As a way of modeling a new era of engagement of Youth
 - To find out what is going on from their perspective
- How to use the TOM?
 - Ceiling effect now evident
 - Doesn't correlate highly with WFI in Mass
 - Bias among raters/supervisors
 - Our research suggests sups rate items much more leniently
 - Recommend use of independent TOM raters for a subsample of selected teams
 - Supervisors could use a different tool that is more appropriate for supervision
 - This would be supported by your new Center of Excellence

WHAT ARE THE OUTCOMES???

- Medicaid expenditures/Fiscal
- CANS/Functional
- CAN WE BUILD OUTCOMES MONITORING INTO THE WRAP PROCESS, TO IMPROVE OUTCOMES AND FIDELITY???

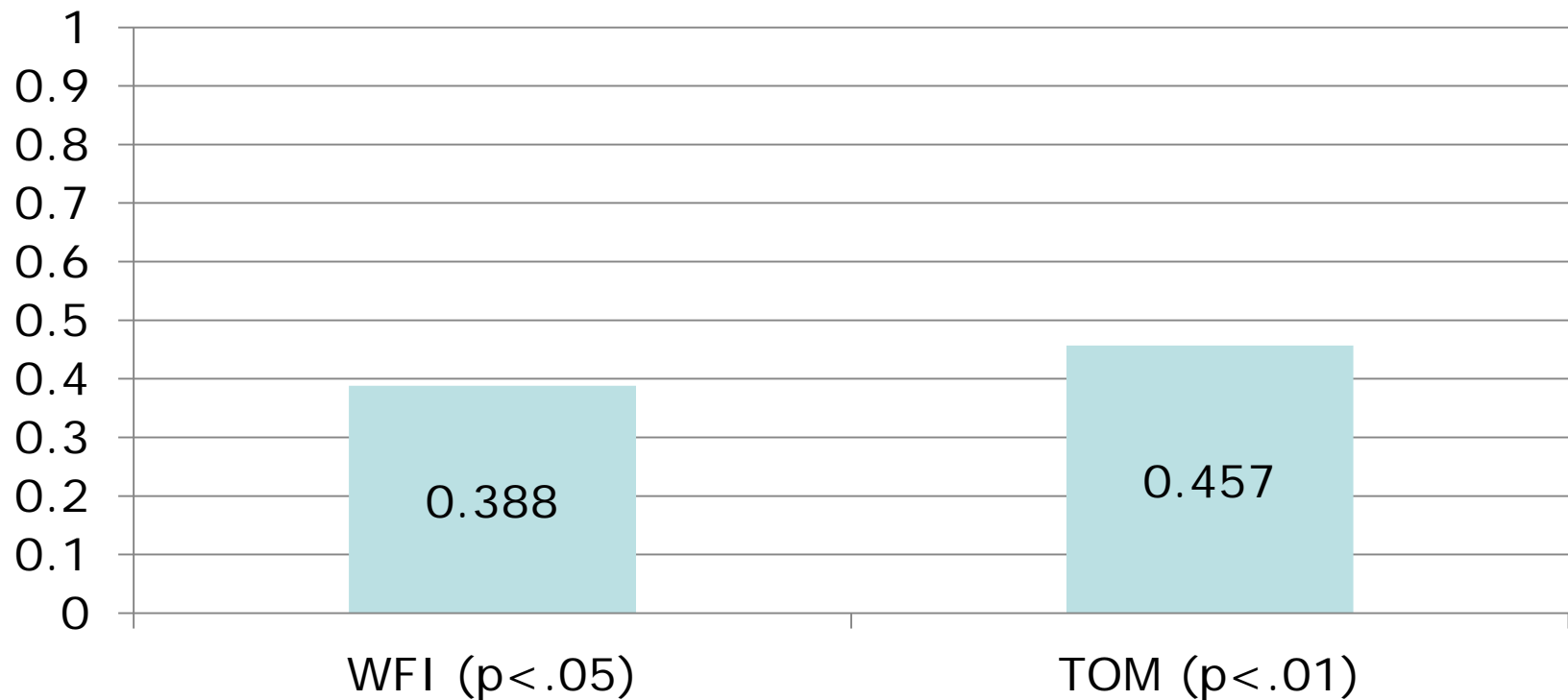


Part 4: Massachusetts Data by CSA

2011-2012 WFI and TOM

Correlations are significant

Pearson r correlations



CSA Summary 2010-2012

	WFI			TOM		
Site	2010	2011	2012	2010	2011	2012
1 Arlington	0.82	0.79	0.77	0.79	0.85	0.83
2 Attleboro	0.77	0.81	0.82	0.83	0.86	0.9
3 Brockton	0.81	0.73	0.8	0.83	0.81	0.82
4 Cambridge	0.79	0.7	0.8	0.88	0.85	0.83
5 Cape Ann	0.83	0.81	0.86	0.8	0.92	0.93
6 C and I	0.77	0.79	0.8	0.8	0.89	0.85
7 CSR	0.78	0.74	0.79	0.88	0.93	0.88
8 Coastal	0.74	0.77	0.8	0.81	0.93	0.9
9 Dimock	0.81	0.75	0.71	0.52	0.86	0.86
10 Fall River	0.77	0.8	0.78	0.9	0.93	0.9
11 Framingham	0.78	0.76	0.77	0.85	0.91	0.91
12 Gandara	0.84	0.82	0.8	0.76	0.73	0.86
13 Greenfield	0.8	0.76	0.8	0.8	0.83	0.9
14 Harbor	0.78	0.77	0.78	0.85	0.79	0.89
15 Haverhill	0.81	0.74	0.86	0.9	0.85	0.92
16 Holyoke	0.78	0.8	0.78	0.88	0.86	0.88

CSA Summary 2010-2012

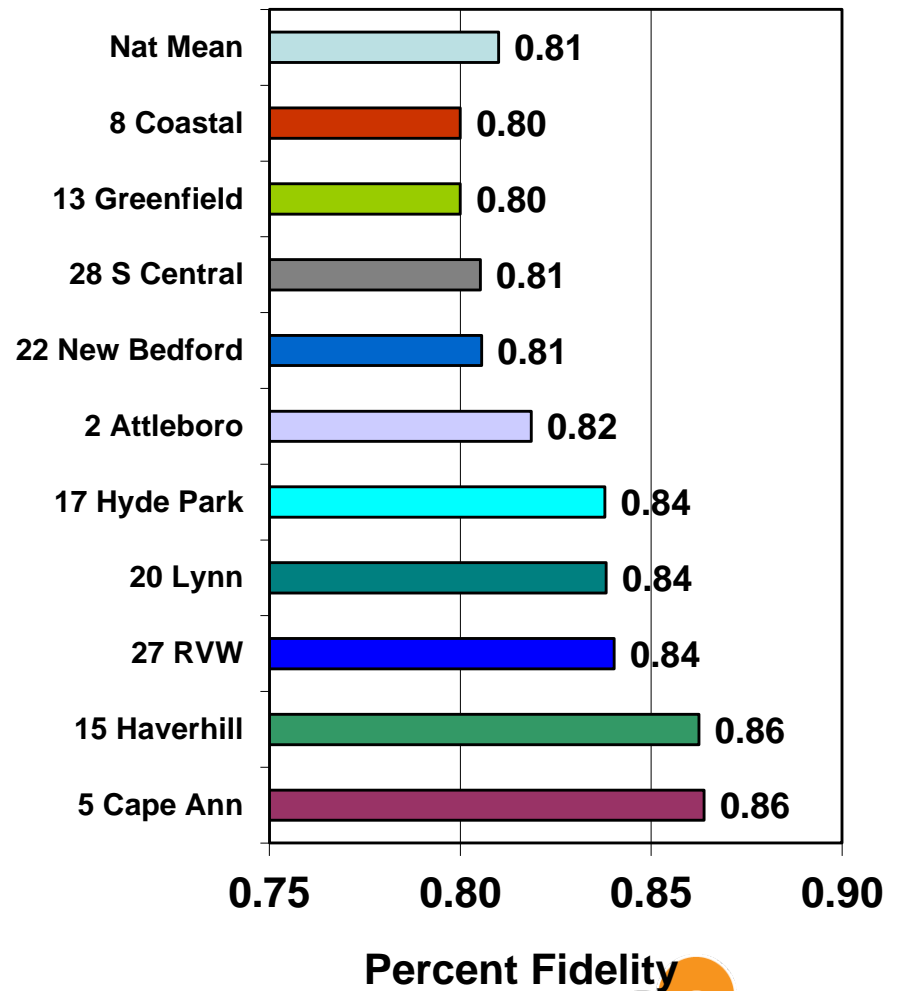
	2010	2011	2012	2010	2011	2012
17 Hyde Park	0.83	0.69	0.84	0.8	0.83	0.91
18 Lawrence	0.81	0.86	0.77	0.89	0.85	0.84
19 Lowell	0.71	0.78	0.73	0.75	0.79	0.8
20 Lynn	0.78	0.82	0.84	0.9	0.9	0.91
21 Malden	0.77	0.75	0.77	0.91	0.91	0.86
22 New Bedford	0.76	0.81	0.81	0.9	0.91	0.9
23 N Central	0.8	0.81	0.79	0.8	0.85	0.83
24 Park Street	0.78	0.82	0.79	0.86	0.75	0.8
25 Pittsfield	0.74	0.79	0.76	0.7	0.82	0.92
26 Plymouth	0.72	0.72	0.8	0.93	0.91	0.88
27 RVW	0.77	0.76	0.84	0.79	0.79	0.77
28 S Central	0.77	0.8	0.81	0.81	0.83	0.87
29 Springfield	0.79	0.82	0.79	0.87	0.77	0.84
30 Walden	0.79	0.55	0.66	0.84	0.92	0.91
31 Worcester E	0.79	0.76	0.8	0.82	0.86	0.89
32 Worcester W	0.79	0.78	0.77	0.81	0.77	0.92



WFI CSA Results: Highest scoring CSAs in 2012

CSA	N	Total Score
5 Cape Ann	17	0.86
15 Haverhill	18	0.86
27 RVW	22	0.84
20 Lynn	22	0.84
17 Hyde Park	19	0.84
2 Attleboro	23	0.82
22 New Bedford	17	0.81
28 S Central	18	0.81
13 Greenfield	17	0.80
8 Coastal	19	0.80

CSA

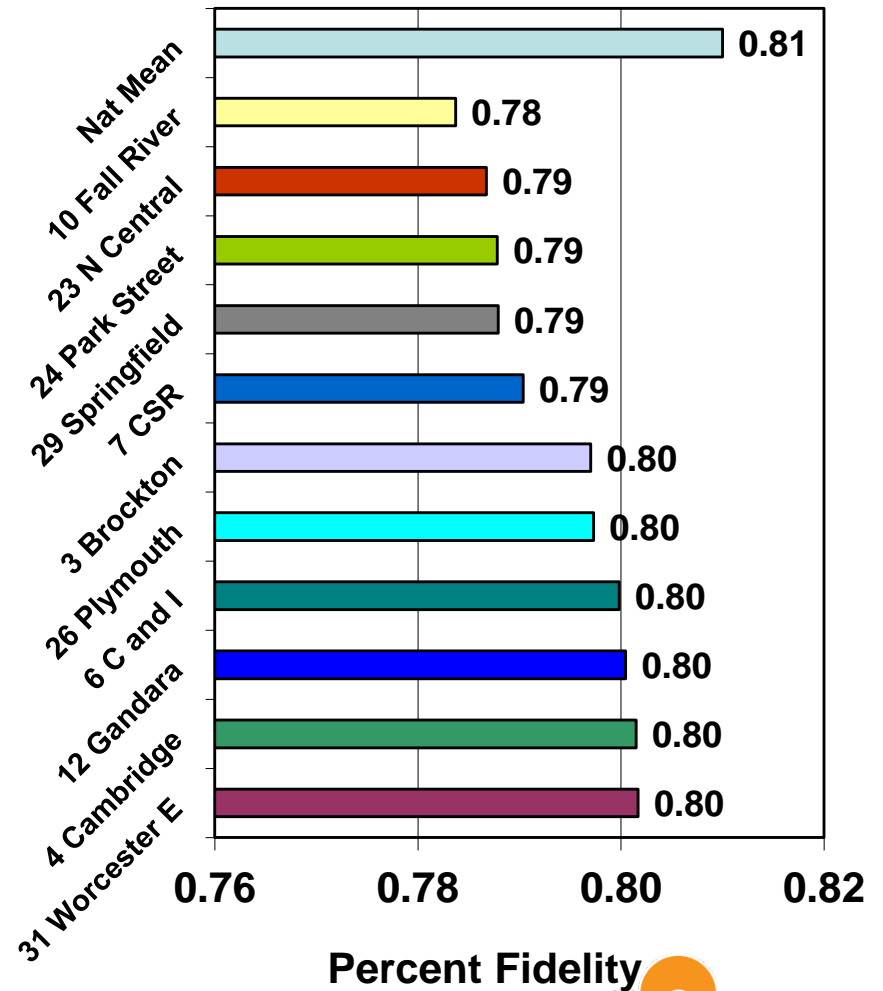




WFI CSA Results

CSA	N	Total Score
31 Worcester E	18	0.80
4 Cambridge	18	0.80
12 Gandara	16	0.80
6 C and I	20	0.80
26 Plymouth	19	0.80
3 Brockton	18	0.80
7 CSR	20	0.79
29 Springfield	20	0.79
24 Park Street	19	0.79
23 N Central	20	0.79
10 Fall River	22	0.78

CSA

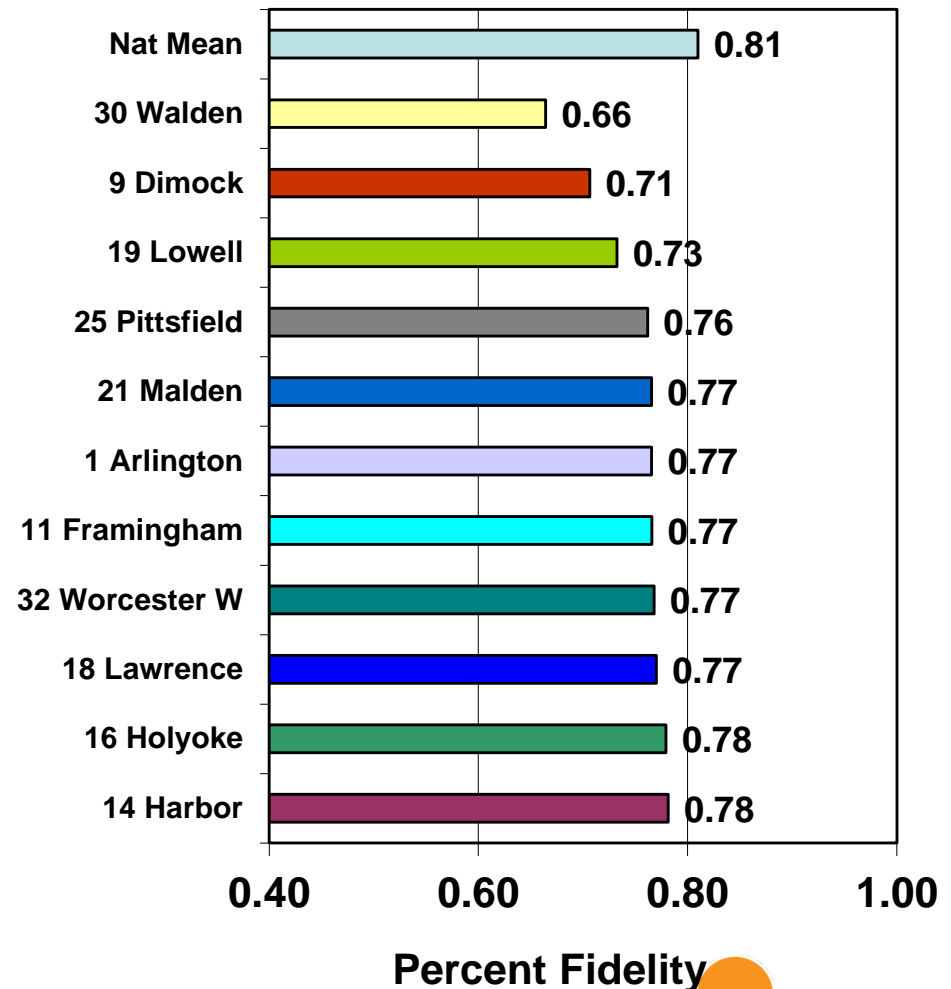




WFI CSA Results: Lowest scoring CSAs in 2012

CSA	N	Total Score
14 Harbor	17	0.78
16 Holyoke	19	0.78
18 Lawrence	19	0.77
32 Worcester W	19	0.77
11 Framingham	17	0.77
1 Arlington	20	0.77
21 Malden	20	0.77
25 Pittsfield	17	0.76
19 Lowell	21	0.73
9 Dimock	20	0.71
30 Walden	4	0.66

CSA

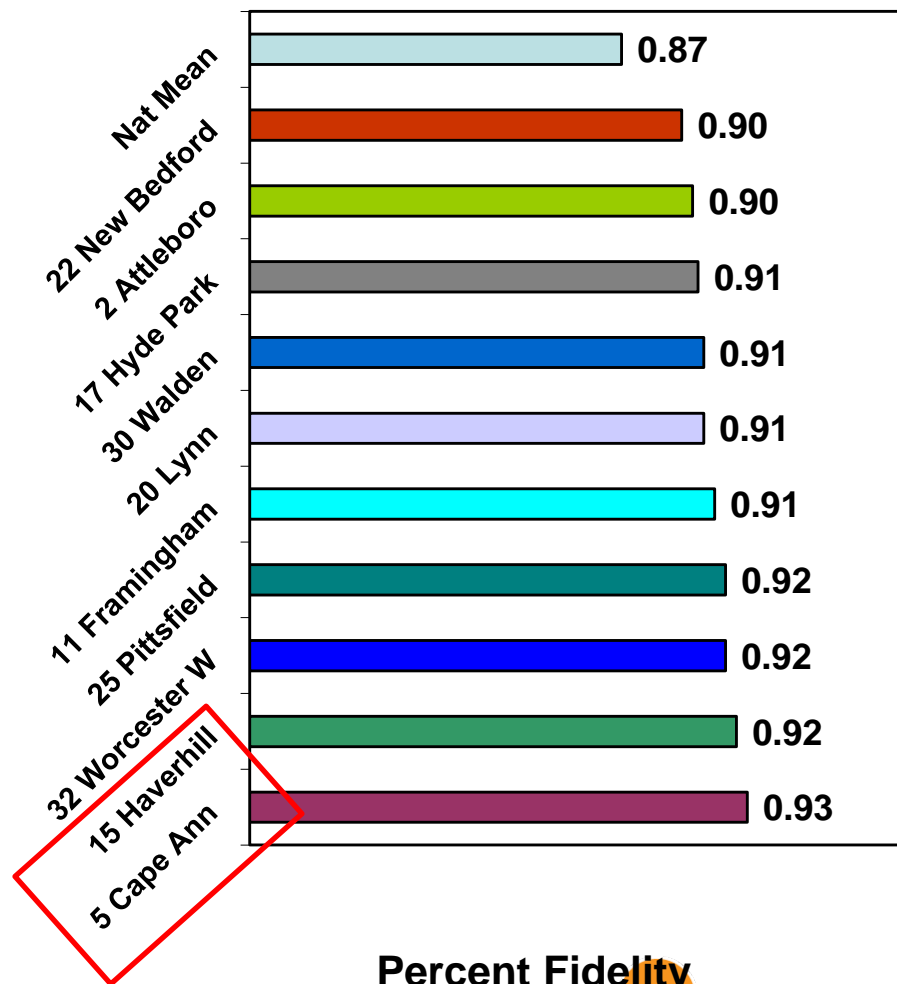




TOM CSA Results: Highest scoring CSAs

CSA	N	Total Score
5 Cape Ann	32	0.93
15 Haverhill	20	0.92
32 Worcester W	19	0.92
25 Pittsfield	47	0.92
11 Framingham	17	0.91
20 Lynn	17	0.91
30 Walden	3	0.91
17 Hyde Park	11	0.91
2 Attleboro	16	0.90
22 New Bedford	24	0.90

CSA



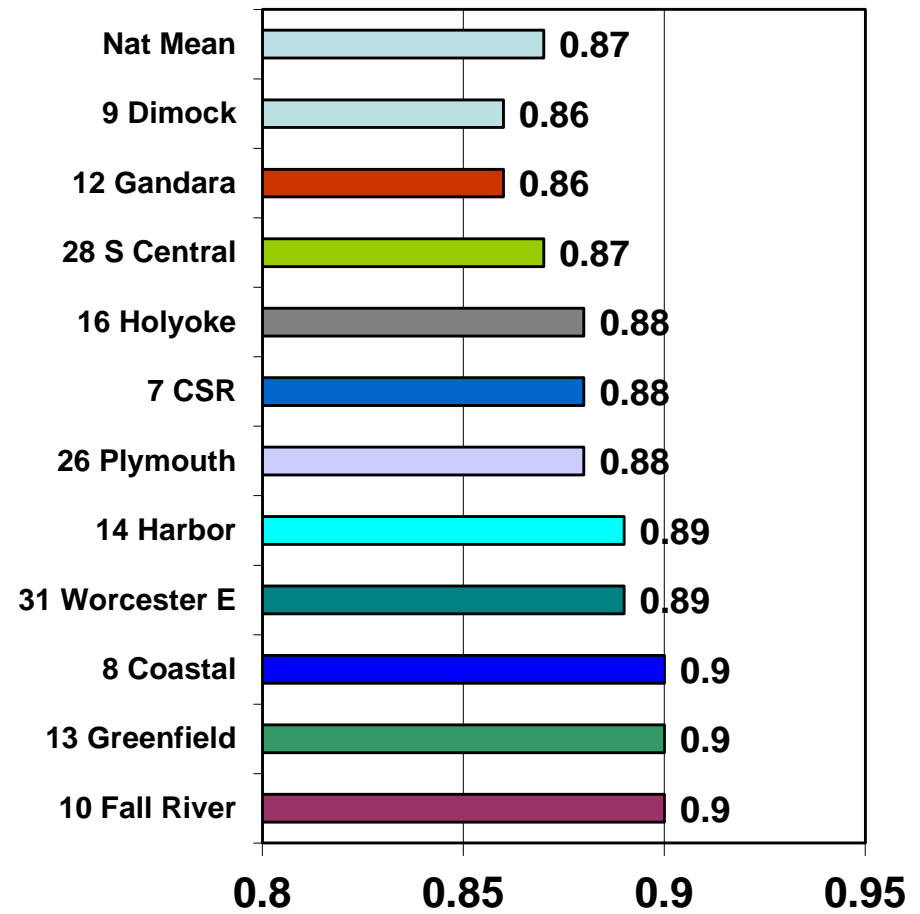
Percent Fidelity



TOM CSA Results

CSA	N	Total Score
10 Fall River	37	0.90
13 Greenfield	26	0.90
8 Coastal	11	0.90
31 Worcester E	13	0.89
14 Harbor	20	0.89
26 Plymouth	31	0.88
7 CSR	59	0.88
16 Holyoke	20	0.88
28 S Central	21	0.87
12 Gandara	24	0.86
9 Dimock	13	0.86

CSA



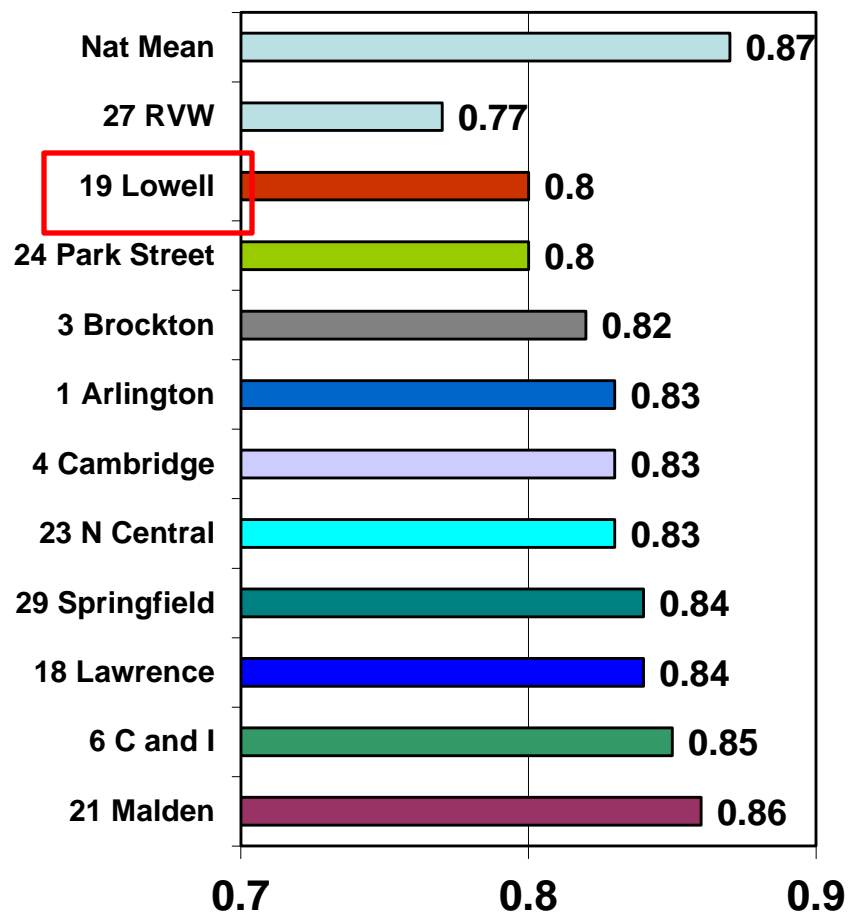
Percent Fidelity



TOM CSA Results: Lowest scoring CSAs

CSA	N	Total Score
21 Malden	57	0.86
6 C and I	40	0.85
18 Lawrence	15	0.84
29 Springfield	24	0.84
23 N Central	28	0.83
4 Cambridge	19	0.83
1 Arlington	24	0.83
3 Brockton	15	0.82
24 Park Street	17	0.80
19 Lowell	12	0.80
27 RVW	20	0.77

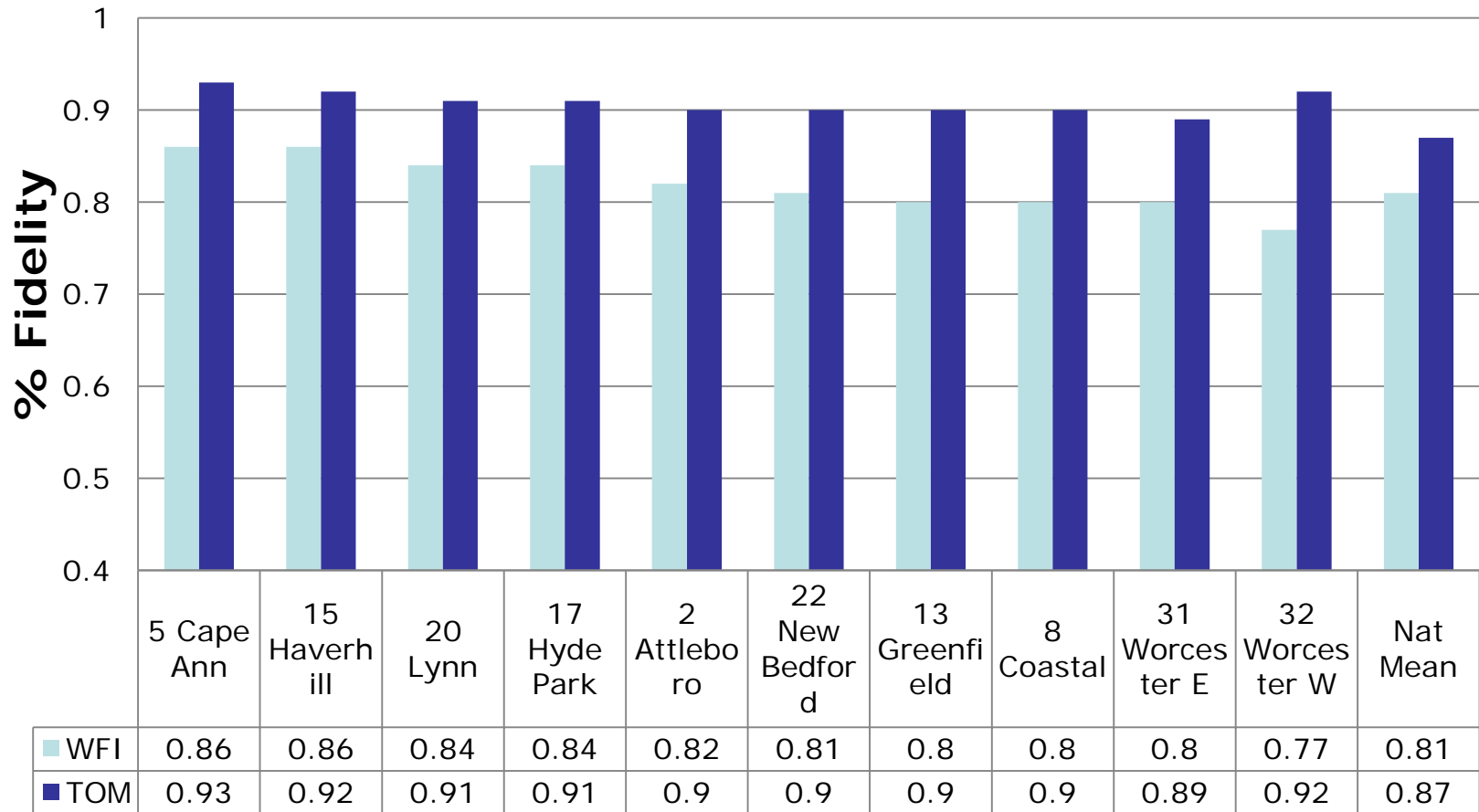
CSA



Percent Fidelity

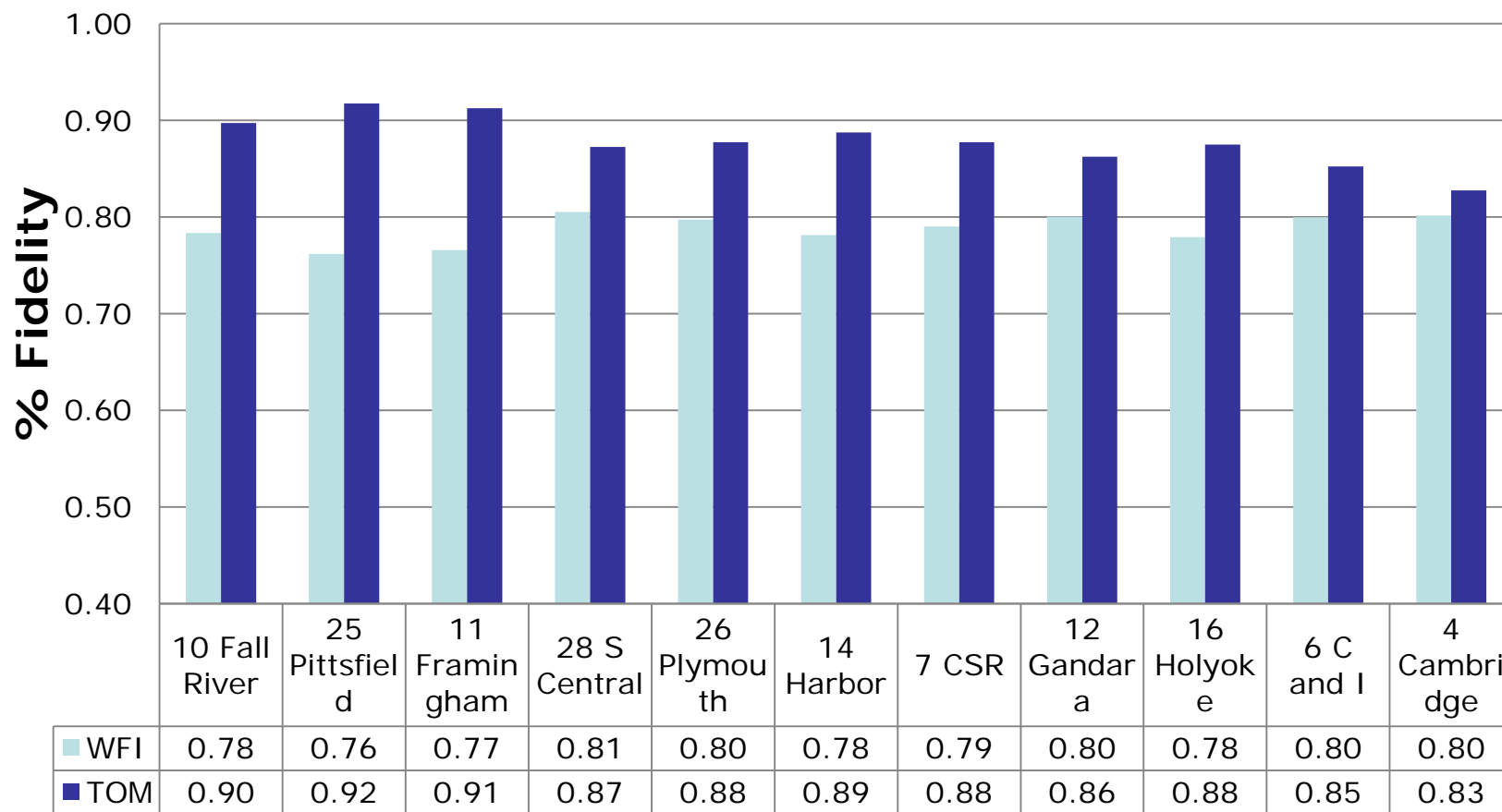


Combined Scores by CSA



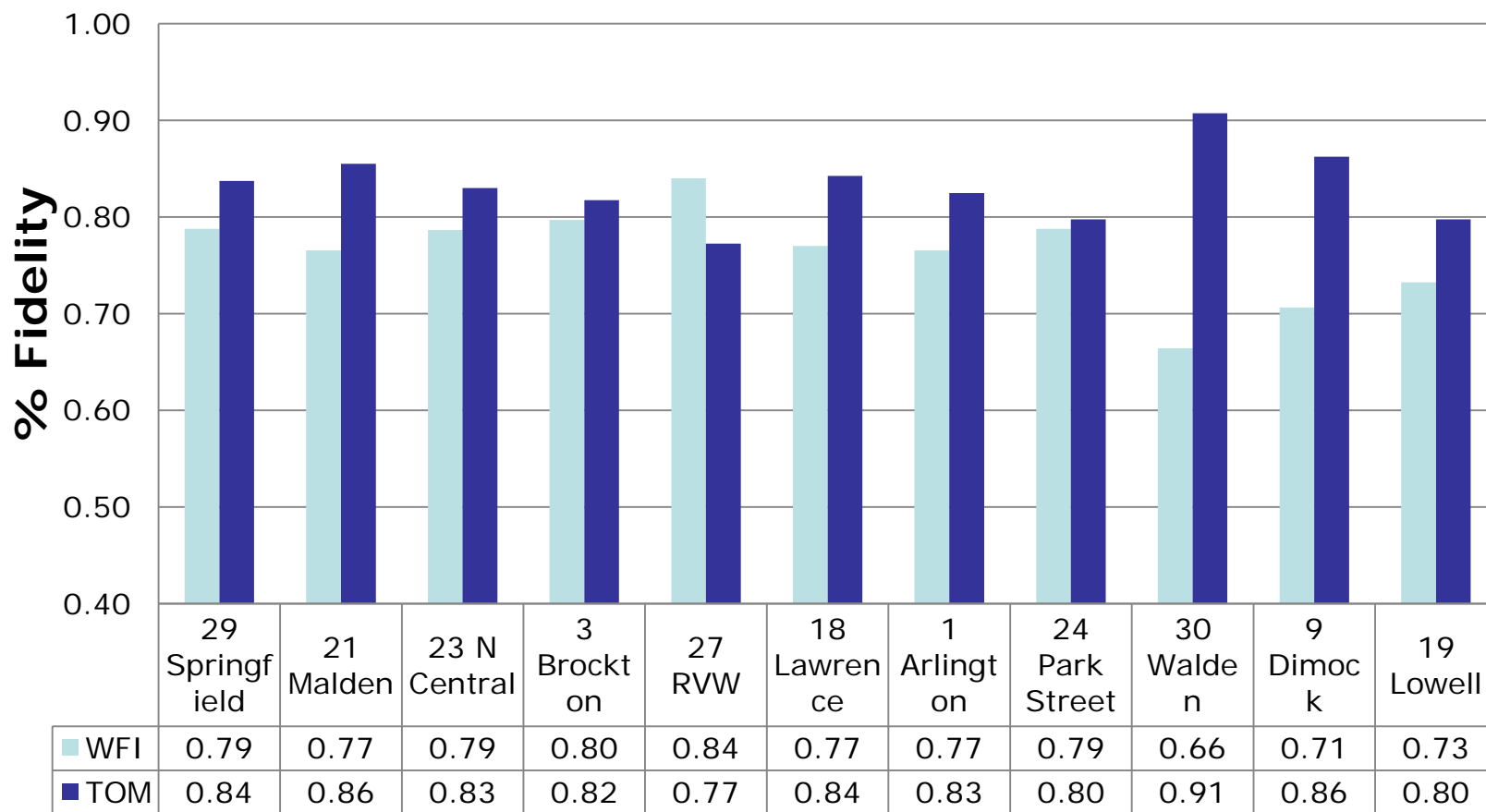


Combined Scores by CSA





Combined Scores by CSA





CSAs with biggest change on the WFI (2011 to 2012)

- WFI biggest improvers
 - 17 Hyde Park +.14
 - 15 Haverhill + .12
 - 4 Cambridge + .11
- WFI biggest decliners
 - 18 Lawrence -.09
 - 19 Lowell -.05
 - 9 Dimock-.04

CSAs with biggest change on the TOM (2011 to 2012)

- TOM biggest improvers
 - 32 Worcester W +.14
 - 12 Gandara +.13
 - 14 Harbor +.10
 - 25 Pittsfield +.10
- TOM biggest decliners
 - 21 Malden-.06
 - 7 CSR -.05
 - 8 Coastal -.04