CSA STATEWIDE MEETING

September 20, 2013 HOLIDAY INN & SUITES • MARLBORO, MA

Today's Agenda



™ Welcome/updates

- Reminder: Partnering to ensure CPT meeting attendance
- Reminder: Community participation in SOC meetings

FY 2013 Wraparound Fidelity Findings

- **Break**
- Round Table Discussion on Increasing Fidelity
- **Next Steps**

MA Wraparound Fidelity Assessment System:

Promoting Positive Outcomes through Fidelity Monitoring



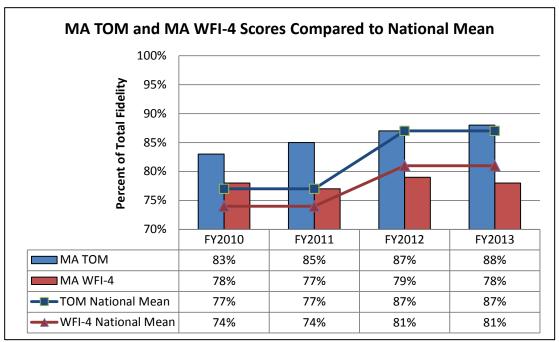
Fall 2013
Natasha De Marco, Health Research Analyst, MBHP
With special thanks to Lavonia Smith LeBeau, Eric Bruns,
and April Sather

Statewide

Meeting

Purpose of this Presentation

1. Create shared understanding of what continues to make Wraparound in Massachusetts unique – and how our strengths in fostering quality Wraparound have evolved over a year's time.







Purpose of this Presentation

2. Continue our dialogue about what WFAS findings mean to those involved in the CBHI – and possible implications for action





Proposed Agenda

FY2013 WPPA RESULTS

- Quick Recap
 - ✓ Why spend valuable time measuring fidelity?
 - ✓ What are the TOM and WFI?
 - ✓ How is our statewide data collected?
 - ✓ How do we make practical sense of the scores?
- 2. Overview of WFAS (TOM/WFI) Statistics
 - ✓ How do our FY2013 scores compare to that of other states?
 - ✓ How do our FY2013 scores compare to last year's results?





CBHI Mission

Strengthen, expand and integrate Massachusetts services into a comprehensive, community-based system of care so that families and their children with significant behavioral, emotional or mental health needs can obtain the services necessary for success in home, school and community.





What is Wraparound Fidelity?

- Typically we define fidelity as the degree to which a program is implemented as intended by its developers.
- Wraparound fidelity, as measured by the MA Wraparound Fidelity Assessment System, is defined as the degree to which intensive care coordination teams adhere to the principles of quality wraparound and carry out the basic activities of facilitating a wraparound process.





Why Measure Fidelity?



Research has **linked high fidelity scores**with better outcomes for youth and families:

- Improved functioning in school and community
- Safe, stable, home-like environment
- Improved resilience and quality of life
- Improved mental health outcomes

Bruns EJ, Suter JC, Force MM and Burchard JD. 2005. Adherence to wraparound principles and association with outcomes. *Journal of Child and Family Studies* **14**: 521-534.





Why Measure Fidelity?

Fidelity monitoring lays the groundwork for outcomes measurement by assessing whether activities are being carried out according to plan. . .

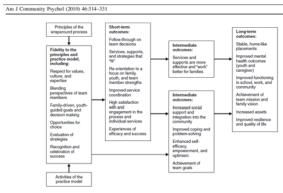


Fig. 1 A theory of change for the wraparound process (from Walker 2008a, b)



... and it provides a vehicle for comparing our experiences with peers who are promoting and implementing Wraparound here and in other states.

Walter UM and Petr CG. 2011. Best Practices in Wraparound: A Multidimensional View of the Evidence. *Social Work* **56**(1): 73-80





What is the MA TOM?

Team Observation Measure (MA TOM)

- Supervisors observe care planning team meetings to assess adherence to standards of high-quality wraparound
- Tool consists of 20 items, each made up of 3 to 5 indicators that are assigned a "yes" or a "no"
- Trained raters indicate whether indicators are in evidence
- Scale = 0 (none scored "yes") to 4 (all scored "yes")
- Two items linked to each of the 10 principles of Wraparound
- Internal consistency very good
- Inter-rater reliability found to be adequate





How was the MA TOM Data Collected?

MA TOM

- July 1, 2012 through June 30, 2013 data collection period
- Total of 720 assessments completed and entered into Wraparound Online Data Entry and Reporting System.





What is the MA WFI-4?

Wraparound Fidelity Index, Version 4 (MA WFI-4)

- Set of four interviews that measure the nature of the wraparound process that an individual family receives
- Brief, confidential interviews may be completed via telephone or face-to-face with four types of respondents: (1) caregivers, (2) youth ages 11+, (3) Wraparound facilitators, and (4) team members.
- Massachusetts continues to use the caregiver interview.
- A Demographic Form is also part of the MA WFI-4 battery.





What is the MA WFI-4?

Wraparound Fidelity Index, Version 4 (MA WFI-4)

- Interviews are organized by the four phases of Wraparound:
 - (1) Engagement and Team Preparation
 - (2) Initial Planning
 - (3) Implementation
 - (4) Transition
- Tool consists of 40 items
- Scale = 0 (low fidelity) to 2 (high fidelity)
- Four items linked to each of the 10 principles of Wraparound
- MA WFI-4 interviews intended to assess both conformance to the Wraparound practice model and adherence to the principles of Wraparound in service delivery





MA WFI-4: Caregiver Form

- Massachusetts' implementation of the WFI involves only one of the four interviews: the caregiver interview
- The decision to use the caregiver interview was made based on information collected regarding the four interview tools.

"In our opinion, the best and most comprehensive information from the WFI is derived when all three forms are employed. However, data suggests that reports from Caregivers and Youths show the greatest variability and are best associated with outcomes. Facilitators represent an important perspective, and implementing WFI interviews with these staff may help reinforce the wraparound practice model. However, data and experience suggests facilitators may very well provide less reliable and valid information. If forced to choose among the WFI interviews, parent/caregiver report may be most useful."

- University of Washington Division of Public Behavioral Health & Justice Policy Wraparound Evaluation & Research Team (http://www.parecovery.org/documents/HFW_Assessment.pdf)





MA WFI-4: Conducting the Interviews

- Consumer Quality Initiatives (CQI), a mental health consumerrun research and evaluation organization, was hired to implement the MA WFI-4.
- CQI trained interviewers (primarily parents of youth with SED) to conduct the interviews and provides ongoing supervision to interviewers to ensure inter-rater reliability. CQI currently has six trained interviewers (one bilingual Spanish/English)
- The goal is to complete 20 interviews with caregivers of youth enrolled in ICC at each of the CSAs, for a total of 640 interviews.
 One of the CSAs is expected to have fewer than 20 eligible caregivers each year.

CQI completed 602 interviews during FY2013.

MA WFI-4: Collecting the Data

- CSA Staff Responsibilities:
 - 1. Inform caregivers of the interview and evaluation process
 - 2. Seek consent from all eligible¹ caregivers, who should have signed a consent indicating whether they chose to participate or not
 - 3. Make sure a call information sheet was completed for each caregiver
 - 4. Fax signed consents along with the call information sheets to CQI
- Information from the call information sheet was used to facilitate the interview process
- Information from these sheets was entered into a call contact database which provided interviewers with an updated listing of those caregivers who were eligible to be interviewed.



¹ Eligibility was defined as anyone (with an enrolled child under the age of 18) enrolled in ICC between January 1 and December 31, 2012. Caregivers were eligible to be interviewed if they had been enrolled in ICC for three or more months.



MA WFI-4: Collecting the Data

- CQI Tasks:
 - 1. Review call information sheets for any missing or inaccurate information and follow up with CSA
 - 2. Enter call contact data into database
 - 3. Contact caregivers who were eligible to participate and schedule interview time
 - 4. Conduct phone interview and complete WFI scoring.
 - 5. Enter completed interview data (scores) into WONDERS/WrapTrack.
 - 6. Send weekly reports to MBHP: (# of interviews completed at each CSA, # of consents received from each CSA, total # of attempted and refused calls for the week, total # of calls made and interviews completed since the project began)
- Interviews averaged 30 to 45 minutes.
- Caregivers received a \$15 check for their participation. Addresses are confirmed with caregiver before completing the call.

Statewide Meeting

MA WFI-4: Nature of the Interviews

- MA WFI-4 is not a satisfaction survey but a fidelity tool
- Interviews informed the scoring for the WFI
- Interviewers were not simply asking quantitative questions and recording the respondent's answer
- Probing for explanation, definition, expanded information...informed the interviewer's determination of a score for each particular question
- This methodology leads to longer interviews, a more in-depth discussion, and can possibly feel more invasive to the respondent. It also helps ensure validity of the scores





MA WFI-4: Challenges

- Consent Process
 - 1. Incomplete, inaccurate, ineligible consents
 - 2. Varying levels of awareness of caregivers (getting better) both of the evaluation and description/terminology for ICC
- Difficulty Reaching Caregivers
 - 1. Don't return messages
 - 2. Frequent phone number changes
 - 3. Several repeated no-shows with caregivers





How are Scores Interpreted?

- **Item scores** presented as a number (0-4 for TOM, 0-2 for WFI) w/ two decimal places (e.g. 1.65)
- **Principle scores** presented as a percentage calculated by averaging the corresponding items and dividing by the total possible score to obtain a "percent of total fidelity" (e.g. 76%)
- **Total fidelity scores** presented as a percent of total fidelity and calculated by averaging across all 10 principles





Principles of Wraparound



Family Voice and Choice (**FVC**) Team-Based (**TB**)

Natural Supports (NS)

Collaboration (Col)

Community-Based (CB)

Culturally Competent (CC)

Individualized (Indiv)

Strengths-Based (SB)

Persistence (Per)

Outcome-Based (OB)





WFI-4 Total and Principle Scores

	Total									_	
	Score	FVC	ТВ	NS	Col	СВ	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%
MA 2013	78%	87%	84%	52%	88%	73%	93%	71%	81%	78%	70%
2011 - '12											
Change	_	\uparrow	1	_	_	_	_	_	_	1	_
2012 – '13											
Change	_	_	_	_	₩	_	V	_	_	₩	T
National											
Average	81%	90%	75%	66%	90%	78%	94%	71%	85%	85%	72%

Key:

Family Voice and Choice (FVC)

Team-Based (TB)

Natural Supports (**NS**)

Collaboration (Col)

Community-Based (CB)

Culturally Competent (CC)

Individualized (Indiv)

Strengths-Based (SB)

Persistence (Per)

Outcome-Based (**OB**)





WFI-4 Fidelity by Wraparound Phase

	Engagement	Planning	Implementation	Transition
MA 2010	86%	82%	79%	64%
MA 2011	85%	82%	77%	64%
MA 2012	88%	84%	79%	67%
MA 2013	86%	83%	77%	66%
National Average	82%	81%	85%	73%





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ENGAGEMENT	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
CG1.1 - When you first met WF, were you given time to talk about your strengths, beliefs and traditions?	1.78	1.74	1.80	1.74	1.82	₽
CG1.2 - Before your 1st team meeting, did your WF fully explain the WA process and the choices you could make?	1.78	1.82	1.88	1.84	1.83	
CG1.3 - At beginning of WA process, did you have a chance to tell WF what things have worked in the past?	1.83	1.78	1.90	1.84	1.81	
CG1.4 - Did you select the people who would be on your WA team?	1.41	1.34	1.41	1.36	0.93	
CG1.5 - Is it difficult to get team members to attend team meetings when they are needed?	1.66	1.65	1.72	1.67	1.64	
CG1.6 - Before your 1st WA team meeting, did you go through a process of identifying what leads to crises for child and family?	1.81	1.90	1.86	1.89	1.76	



Maximum Item Score = 2.00

				_	_	_
PLANNING	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
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	1.90	1.85	1.78	Ĺ
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	1.84	1.63	
CG2.3 - Does your WA plan include mostly professional services?	0.99	1.10	1.20	1.17	0.74	1
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	1.77	1.85	
CG2.5 - Does the WA plan include strategies for helping your child get involved with activities in his/her community?	1.31	1.26	1.21	1.33	1.27	1
CG2.6 - Are there members of your WA team who do not have a role in implementing your plan?	1.73	1.73	1.77	1.73	1.78	



Maximum Item Score = 2.00

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PLANNING	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
CG2.7 - Does your team brainstorm many strategies to address your family's needs before selecting one?	1.79	1.79	1.84	1.79	1.84	
CG2.8 - Is there a crisis plan? *and* does this plan specify how to prevent crisis?	1.48	1.57	1.63	1.52	1.67	
CG2.9 - Do you feel confidant that, in crisis your team can keep your child in the community?	1.57	1.58	1.53	1.61	1.74	
CG2.10 - Do you feel like other people on your team have higher priority than you in designing your WA plan?	1.83	1.73	1.84	1.82	1.71	
CG2.11 - During planning process, did team make enough time to understand values? *and* Is your WA plan in tune w/ family's values?	1.89	1.84	1.87	1.82	1.85	





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IMPLEMENTATION	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
CG3.1 - Are important decisions made about your child or family when you are not there?	1.90	1.86	1.89	1.89	1.77	
CG3.2 - When your WA team has a good idea for support, can they find resources or make it happen?	1.58	1.54	1.51	1.59	1.82	
CG3.3 - Does your WA team get your child involved with activities they like and do well?	1.05	0.95	0.92	0.98	1.18	
CG3.4 - Does the team find ways to increase the support you get from friends & family?	1.09	1.13	1.30	1.13	1.43	
CG3.5 - Do the members of your team hold each another responsible for doing their part?	1.73	1.73	1.75	1.71	1.84	
CG3.6 - Is there a friend or advocate of your child or family who actively participates in WA team?	0.68	0.66	0.63	0.70	0.96	
CG3.7 - Does your team come up with new ideas? *and* Does your team come with ideas when something's not working?	1.75	1.70	1.76	1.72	1.85	



Maximum Item Score = 2.00

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IMPLEMENTATION	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
CG3.8 - Are the services and supports in your WA difficult for your family to access?	1.61	1.66	1.61	1.54	1.72	
CG3.9 - Does the team assign specific tasks to all team members at end of meeting? *and* Does team review team member's follow-through at next meeting?	1.67	1.63	1.68	1.71	1.73	
CG3.10 - Do members of your team always use language you can understand?	1.96	1.94	1.95	1.95	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	1.89	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	1.87	1.87	1.85	
CG3.13 - Do you think your WA process could be discontinued before you're ready?	1.48	1.32	1.42	1.32	1.54	
CG3.14 - Do all the members of your team demonstrate respect for you and your family?	1.96	1.91	1.92	1.91	1.94	
CG3.15 - Does your child have the opportunity to communicate their own ideas when it comes to decisions?	1.49	1.39	1.47	1.43	1.91	



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TRANSITION	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
CG4.1 - Has your team discussed a plan for how WA will end *and* Does your team have a plan for when?	0.46	0.70	0.68	0.87	0.80	
CG4.2 - Has the WA process helped your child develop friendships with other youth?	0.94	0.92	1.00	0.98	1.27	
CG4.3 - Has the WA process helped your child to solve his/her own problems?	1.09	1.02	1.07	1.17	1.46	
CG4.4 - Has your team helped you and your child prepare for major transitions?	1.50	1.64	1.67	1.55	1.50	
CG4.5 - After formal WA ends, do you think the process will be able to be 're-started' if you need it?	1.82	1.80	1.89	1.86	1.76	
CG4.6 - Has the WA process helped your family to develop or strengthen relationships that will support you when WA is finished?	1.45	1.42	1.49	1.46	1.65	
CG4.7 - Do you feel like you and your family will be able to succeed on their own?	1.33	1.41	1.43	1.38	1.49	
CG4.8 - Will some members of your team be there to support you when formal WA is finished?	1.60	1.40	1.44	1.41	1.68	



Maximum Item Score = 2.00

WFI-4 Fidelity: Relative Strengths

- Wraparound services remain highly team-based. Caregivers say
 they select the people on their Wraparound team, that their
 team has a clear mission, and that the team goes out of its way to
 ensure all members share their ideas and participate in decisionmaking.
- There is ongoing improvement in outcome-based services.
 Caregivers say tasks are assigned to each team member accompanied with review of these tasks at subsequent meetings, a transition plan has been developed, and the wraparound process has helped their child to solve his/her own problems.





WFI-4 Fidelity: Need for Improvement

- Natural Supports remains a challenge to care planning teams in Massachusetts relative to those in other states.
- CSAs also scored below the National mean on the implementation and transition phases of the Wraparound process.
- There was decline among services related to collaboration and persistence. This indicates challenges regarding caregivers feeling supported by the team when WA is complete, perceiving services could be prematurely discontinued, coming up with new ideas for the WA plan when things are not working or in need of change, and holding team members accountable for their part in the WA plan.





TOM Total Fidelity Scores

_		Total Score	FVC	ТВ	NS	Col	СВ	CC	Indiv	SB	Per	ОВ
	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%
	MA 2013	88%	94%	83%	52%	92%	92%	93%	89%	92%	92%	86%
	2011 - '12 Change	↑	_	1	1	_	-	_	_	↑	1	\uparrow
	2012 - '13 Change	_	_	1	1	V	1	_	_	→	1	^
	National Average	87%	95%	88%	65%	87%	93%	93%	89%	89%	93%	80%

Key:

Family Voice and Choice (FVC) Culturally Competent (CC)

Team-Based (**TB**) Individualized (**Indiv**)

Natural Supports (NS) Strengths-Based (SB)

Collaboration (**Col**) Persistence (**Per**)

Community-Based (CB) Outcome-Based (OB)





TEAM BASED	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean
Item 1: Team Membership and Attendance	3.10	3.09	3.04	3.00	3.42
a. Parent/caregiver is a team member and present at the meeting.	0.99	0.99	1.00	0.99	0.98
b. Youth (over age 9) is a team member and present at the meeting.	0.61	0.61	0.61	0.55	0.86
c. Key school or other public stakeholder agency representatives are present.	0.61	0.60	0.52	0.56	0.52
Item 2: Effective Team Process	3.61	3.71	3.70	3.83	3.65
a. Team meeting attendees are oriented to the wraparound process and understand the purpose of the meeting.	0.88	0.91	0.89	0.94	0.82
b. The facilitator assists the team to review and prioritize family and youth needs.	0.95	0.95	0.95	0.98	0.95
c. Tasks and strategies are explicitly linked to goals.	0.91	0.95	0.93	0.97	0.94
d. Potential barriers to the nominated strategy or option are discussed and problem-solved.	0.86	0.91	0.93	0.93	0.93



Max item score = 4.00, Max indicator score = 1.00



COLLABORATIVE	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
Item 3: Facilitator Preparation	3.50	3.68	3.66	3.70	3.27	
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.	0.86	0.91	0.92	0.91	0.84	
b. The meeting follows an agenda or outline such that team members know the purpose of their activities at a given time.	0.84	0.91	0.88	0.92	0.84	
c. Facilitator has prepared needed documents and materials prior to meeting.	0.90	0.96	0.96	0.96	0.92	
d. A plan for the next meeting is presented, including time & date.	0.89	0.91	0.90	0.91	0.68	
Item 4: Effective Decision-Making	3.50	3.69	3.74	3.80	3.68	1
a. Team members demonstrate consistent willingness to compromise or explore further options when there is disagreement.	0.96	0.97	0.96	0.96	0.91	
b. Team members reach shared agreement after having solicited information from several members or having generated several ideas.	0.87	0.95	0.96	0.97	0.92	
c. The plan of care is agreed upon by all present at the meeting.	0.94	0.98	0.97	0.98	0.95	
d. The facilitator summarizes the content of the meeting at the end of the meeting, including next steps and responsibilities.	0.76	0.82	0.85	0.90	0.88	

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INDIVIDUALIZED	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
Item 5: Creative Brainstorming and Options	3.11	3.16	3.41	3.57	3.34	
a. The team considers several different strategies for meeting each need and achieving each goal that is discussed.	0.83	0.87	0.91	0.93	0.88	
b. The team considers multiple options for tasks or action steps.	0.81	0.86	0.89	0.94	0.87	
c. The facilitator leads a robust brainstorming process to develop multiple options to meet priority needs.	0.67	0.69	0.72	0.78	0.72	
Item 6: Individualized Process	3.53	3.70	3.76	3.79	3.75	
a. Planning includes action steps or goals for other family members, not just identified youth.	0.85	0.92	0.93	0.94	0.96	
b. Facilitator and team members draw from knowledge about the community to generate strategies and action steps based on unique community supports.	0.85	0.91	0.90	0.90	0.88	
c. Team facilitates the creation of individualized supports or services to meet the unique needs of child and/or family.	0.89	0.96	0.96	0.97	0.94	
d. Youth, caregiver, & family members give their opinions about potential services, supports, or strategies.	0.93	0.95	0.96	0.97	0.97	



Max item score = 4.00, Max indicator score = 1.00



NATURAL SUPPORTS	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
Item 7: Natural and Community Supports	1.54	1.61	1.64	1.67	1.89	
a. Natural supports for the family are team members and are present.	0.27	0.27	0.28	0.27	0.41	
b. Team provides multiple opportunities for natural supports to participate in significant areas of discussion.	0.75	0.80	0.70	0.77	0.83	
c. Community team members and natural supports participate in decision-making.	0.72	0.79	0.77	0.79	0.79	
d. Community team members and natural supports have a clear role on the team.	0.72	0.81	0.79	0.85	0.76	
Item 8: Natural Support Plans	1.94	2.47	2.42	2.57	3.31	
a. Brainstorming of options and strategies include strategies to be implemented by natural and community supports.	0.70	0.77	0.74	0.78	0.83	
b. The plan of care represents a balance between formal services and informal supports.	0.45	0.58	0.56	0.57	0.71	
c. There are flexible resources available to the team to allow for creative services, supports, and strategies.	0.21	0.58	0.49	0.67	0.97	





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UNCONDITIONAL/PERSISTANCE	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
Item 9: Team Mission and Plans	3.44	3.61	3.68	3.72	3.66	
a. The team discusses or has produced a mission/vision statement.	0.84	0.90	0.93	0.96	0.94	
b. The team creates or references a plan that guides its work.	0.91	0.96	0.97	0.97	0.96	
c. The team has confirmed or is creating a crisis plan.	0.78	0.90	0.84	0.81	0.80	
d. The team plan contains specific goals that are linked to strategies and action steps.	0.92	0.96	0.95	0.97	0.96	
Item 10: Shared Responsibility	3.66	3.72	3.76	3.86	3.79	
a. The team explicitly assigns responsibility for action steps that define who will do what, when, and how often.	0.87	0.91	0.91	0.95	0.93	
b. There is a clear understanding of who is responsible for action steps and follow up on strategies in the plan.	0.92	0.92	0.93	0.97	0.95	
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.	0.96	0.98	0.98	0.97	0.97	





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MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean
3.55	3.62	3.69	3.76	3.58
0.83	0.88	0.87	0.91	0.80
0.89	0.92	0.93	0.95	0.91
0.92	0.92	0.93	0.91	0.90
0.93	0.92	0.95	0.95	0.95
3.76	3.86	3.92	3.92	3.85
0.87	0.95	0.97	0.96	0.92
0.95	0.97	0.98	0.98	0.94
0.97	0.98	0.99	0.98	0.98
0.97	0.98	0.99	0.99	0.99
	2010 3.55 0.83 0.89 0.92 0.93 3.76 0.87 0.95 0.97	201020113.553.620.830.880.890.920.920.920.930.923.763.860.870.950.950.970.970.98	2010201120123.553.623.690.830.880.870.890.920.930.920.920.930.930.920.953.763.863.920.870.950.970.950.970.980.970.980.99	20102011201220133.553.623.693.760.830.880.870.910.890.920.930.950.920.920.930.910.930.920.950.953.763.863.923.920.870.950.970.960.950.970.980.980.970.980.990.98

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OUTCOMES BASED	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean	
Item 13: Outcomes Based Process	2.88	3.06	3.35	3.58	3.21	
a. The team uses objective measurement strategies.	0.67	0.76	0.81	0.87	0.77	
b. The team assesses goals/strategies using measures of progress.	0.72	0.77	0.81	0.89	0.75	
c. The team revises the plan if progress toward goals is not evident.	0.84	0.88	0.93	0.95	0.89	
Item 14: Evaluating Progress and Success	2.99	3.15	3.43	3.52	3.24	
a. The team conducts a systematic review of members' progress on assigned action steps.	0.78	0.84	0.90	0.91	0.88	
b. The facilitator checks in with the team members about their comfort and satisfaction with the team process.	0.74	0.79	0.82	0.85	0.79	
c. Objective or verifiable data is used as evidence of success, progress, or lack thereof.	0.72	0.78	0.84	0.88	0.76	





VOICE AND CHOICE	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean
Item 15: Youth and Family Voice	3.89	3.86	3.89	3.89	3.92
a. The team provides extra opportunity for caregivers to speak and offer opinions, especially during decision making.	0.98	0.98	0.99	0.99	0.99
b. The team provides extra opportunity for the youth to speak and offer opinions, especially during decision making.	0.93	0.93	0.91	0.92	0.97
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.	0.98	0.98	0.99	0.98	0.99
d. The youth is invited to speak in an open-ended way about current and past experiences and/or about hopes for the future.	0.96	0.93	0.94	0.91	0.96
Item 16: Youth and Family Choice	3.72	3.69	3.82	3.81	3.70
a. The youth prioritizes life domains, goals, or needs on which he or she would like the team to work.	0.78	0.79	0.81	0.81	0.80
b. The caregiver or parent prioritizes life domains goals, or needs on which he or she would like the team to work.	0.93	0.96	0.97	0.97	0.94
c. The family and youth have highest priority in decision making	0.97	0.95	0.99	0.98	0.97





STRENGTH BASED	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean
Item 17: Focus on Strengths	3.31	3.47	3.64	3.71	3.50
a. Team members acknowledge or list caregiver/youth strengths.	0.92	0.95	0.96	0.95	0.94
b. Team builds an understanding of how youth strengths contribute to the success of team mission or goals.	0.78	0.85	0.87	0.91	0.84
c. In designing strategies, team members consider and build on strengths of the youth and family.	0.82	0.89	0.93	0.94	0.89
d. Facilitator and team members analyze youth & family member perspectives and stories to identify functional strengths.	0.78	0.87	0.89	0.91	0.84
Item 18: Positive Team Culture	3.7	3.69	3.80	3.77	3.62
a. Team focuses on improvements or accomplishments.	0.91	0.92	0.94	0.93	0.92
b. The facilitator directs a process that prevents blame or excessive focus on or discussion of negative events.	0.97	0.95	0.96	0.96	0.91
c. Facilitator encourages team culture by celebrating successes.	0.88	0.93	0.93	0.93	0.90
d. There is a sense of openness and trust among team members.	0.94	0.93	0.96	0.95	0.89

COMMUNITY BASED	MA 2010	MA 2011	MA 2012	MA 2013	Nat Mean
Item 19: Community Focus	3.41	3.45	3.62	3.66	3.57
a. The team is actively brainstorming and facilitating community activities for the youth and family.	0.82	0.85	0.88	0.90	0.84
b. The team prioritizes services that are community-based.	0.82	0.86	0.88	0.89	0.89
c. The team prioritizes access to services that are easily accessible to the youth and family.	0.93	0.94	0.96	0.96	0.94
Item 20: Least Restrictive Environment	3.92	3.86	3.93	3.91	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.	0.99	0.97	0.99	0.99	0.99
b. When residential placements are discussed, team chooses community placements for the child or youth rather than out-of-community placements, wherever possible.	0.87	0.88	0.94	0.88	0.97
c. Serious challenges are discussed in terms of finding solutions, not placement in more restrictive residential or educational environments.	0.95	0.94	0.96	0.98	0.97





TOM Fidelity: Relative Strengths

- Teams are focusing on Outcomes-Based processes, which went from being Massachusetts' weakest TOM principle in FY2010 to one of the strongest in FY2013 and FY2013.
- Driving improvement on outcomes-based are items relating to the use of objective strategies for monitoring completion of action items and measuring progress toward goals.
- There is an increasing improvement in effective team processes, facilitator preparations, effective decision making, creative brainstorming, and focusing on strengths.





TOM Fidelity: Need for Improvement

- MA teams have far more school representatives involved than teams in other states, but they have relatively less **Youth Involvement**.
- MA teams tend to have fewer natural and community supports involved than teams in other states. Items related to Natural Support Planning saw score increases from FY12 to FY13, but scores are still well below the national mean.





Summary of Findings

Fidelity to the Wraparound model remains strong in the fourth year of the CBHI. TOM scores showed improvement compared to the National Mean and WFI scores remained stable between FY2012 and FY2013.

Strengths

- Engagement and Planning Phases -
- Strengths-Based / Individualized / Team-Based -
 - Outcomes Orientation -
 - Crisis Planning -

Areas for Improvement

- Transition Phase -
- Natural Supports -
- Youth Engagement and Empowerment -





What's Next

WRAPAROUND FIDELITY INDEX FY2014

- Signed consent forms sent to CQI starting July 1, 2013 and interviews began September 2013
- Eligible caregivers include those enrolled in ICC between January 1 and December 31, 2013 with signed consent forms
- CQI will take steps to ensure no one interviewed last year will be interviewed again this year





What's Next

TEAM OBSERVATION MEASURE FY2014

- Please remember to complete TOMs and enter them into WrapTrack on a rolling basis as they are conducted. Data collection period is July 1, 2013 through June 30, 2014.
- When to complete a TOM?
 - <u>Existing ICC Staff</u>: Each ICC staff must have two TOMs completed per year of employment.
 - <u>New ICC Staff</u> New ICC staff must have two TOMs completed within months four and six from the date of hire. This allows adequate training of staff before utilizing the TOMs.
- The Wraparound Evaluation and Research team is working to improve the functionality of WrapTrack, and any feedback is welcome: wrapeval@uw.edu





Questions?









CSA WRAPAROUND FIDELITY: ROUND TABLE DISCUSSIONS

CSA Statewide September 20, 2013

Mass Total Fidelity Scores



Consistent Scores: Year after year after year...

	Total Score	Family Voice & Choice	Team Based	Natural Supports	Collaboration	Community Based	Culturally Competent	Individualized	Strengths Based	Persistence	Outcome Based
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%
MA 2013	78%	87%	84%	52%	88%	73%	93%	71%	81%	78%	70%

In Their Shoes...

Natural Supports

- Does the team find ways to increase the support you get from your friends and family?
- 2. Is there a friend or advocate of your child or family who actively participates on the wraparound team?
- 3. Has the wraparound process helped your child develop friendships with other youth who will have a positive influence on her or him?
- 4. Has the wraparound process helped your family to develop or strengthen relationships that will support you when wraparound is finished?

Community Based

- 1. Does the wraparound plan include strategies for helping your child get involved with activities in her or his community? (ie After school activities, activities with a church, volunteer activities, recreational activities with normal peers)
- 2. Do you feel confident that, in the event of a major crisis, your team can keep your child or youth in the community? (i.e., not immediately placed in a hospital, jail, residential treatment center)
- 3. Are the services and supports in your wraparound plan difficult for your family to access? (ie Because of scheduling or transportation issues or because services and supports are far away or hard to get to.)
- 4. Do you feel like you and your family will be able to succeed without the formal wraparound process? In other words, with the help of family, friends, community supports, and key providers, but without formal team meetings or wraparound facilitation.

Individualized

- 1. Does your wraparound plan include mostly professional services?
- Is there a crisis or safety plan that specifies what everyone must do to respond to a crisis? Does this pan also specify how to prevent crises from occurring?
- 3. When your wraparound team has a good idea for a support or service for your child, can it find the resources or figure out some way to make it happen?
- 4. Has your team helped you and your child prepare for major transitions (e.g., new school, new residential placement) by making plans to deal with these changes?

Outcome Based

- Before your first wraparound team meeting, did you go through a process of identifying what leads to crises or dangerous situations for your child and your family?
- 2. Does the team review each team member's follow-through on their tasks at the next meeting?
- 3. Does the team review each team member's follow-through on their tasks at the next meeting?
- 4. Has your team discussed a plan for how the wraparound process will end? (i.e., a "transition plan") Does your team have a plan for when this will occur?
- 5. Has the wraparound process helped your child to solve her or his own problems?