

Louisiana's Coordinated System of Care

The National Wraparound Initiative (NWI)

Technical Assistance Webinar

April 13, 2011

Louisiana's Coordinated System of Care

Purpose of today's webinar is to

- ❑ Reinforce the requirement that WAAs in CSoC implementing regions must be trained and certified in wraparound as defined by NWI
- ❑ Explain how NWI was established and its relationship with LA CSoC's training partner, the MD Innovations Institute
- ❑ Communicate the what NWI offers as a resource to regions implementing CSoC
- ❑ Provide additional information on "what is wraparound" and the importance of the family driven practice model
- ❑ Answer questions about WAA, NWI and other issues posed by attendees to support local responses to the RFA

Louisiana's Coordinated System of Care

Agenda

RFA process and Timeline Overview

Presentations by

Rochelle Head Dunham, MD, OBH Medical Director

Marlene Matarese, Maryland Innovations Institute

Peter Selby, PhD, Mercer

Questions and Answers

CSoC Request for Applications

Projected Timeline

- March 28, 2011- list of regional points of contact were posted to www.dcfsl.a.gov/csoc
- April 8, 2011- updated list of questions and answers posted on www.dcfsl.a.gov/csoc
- May 13, 2011- 3:30pm- Application deadline
- June 3, 2011- Potential presentation by responders
- June 16, 2011- Announcement of awards
- January 1, 2012- CSoC launch date

CSoC Request for Applications

- The response should reflect collaboration and partnership across the region, rather than the efforts of a single “lead agency” or similar entity.
- This RFA is seeking to understand the level of community support and capacity to work towards CSoC development in the region, rather than looking for an individual agency or entity to manage implementation.

CSoC Request for Applications

- The purpose of this Request for Applications (RFA) is to serve as the first step towards statewide implementation of the CSoC by identifying
 - (1) the regions in Louisiana that are ready to participate in the first phase of CSoC implementation and
 - (2) the communities within those regions that are most prepared to be part of that initial phase
- The CSoC will implement one Family Support Organization (FSO) and one Wraparound Agency (WAA) per region, and each applying region can only support one FSO and WAA as part of their proposed CSoC under this RFA.

Technical Assistance for Applicants

- ❑ Webinar Technical Assistance Meetings
 - every Wednesday, 1:00 to 3:00 pm, from 3/23 - 5/4
 - dialing and webinar log in information will be will be posted on the CSoC website
- ❑ Email Questions and posting of answers on website
 - Questions maybe submitted via email to CSoC.HelpDesk@la.gov through 5/04/2011.
 - Answers to questions will be posted regularly throughout the response period at the CSoC website (www.dcfsl.a.gov/csoc).

Webinar Schedule

- ❑ 03/23/11 - Stakeholder & Family Leadership in Local CSoCs
- ❑ 03/30/11 – Family Support Organizations
- ❑ 04/06/11 - The Role of the WAA & its Relationship with the Statewide Management Organization in the CSoC
- ❑ 04/13/11 - National Wraparound Initiative (NWI)
- ❑ 04/20/11 - Provider Issues and Related Medicaid Requirements
- ❑ 04/27/11 - FSO and WAA Relationships with the Community
- ❑ 05/04/11 - CSoC Training by the Maryland Innovations Institute

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Coordinated System of Care

National Wraparound Initiative (NWI)



Louisiana Department of
EDUCATION

ROUSSEAU



Louisiana's System of Care

Values and Principles:

- ❑ Family-driven and youth-guided
- ❑ Home and community based
- ❑ Strength-based and individualized
- ❑ Culturally and linguistically competent
- ❑ Integrated across systems
- ❑ Connected to natural helping networks
- ❑ **Data-driven, outcomes oriented**

OBH Trainings

- ❑ Three components are necessary to successfully train providers and build capacity in local, implementing communities:
 - ❑ **Wraparound process**
 - ❑ Building EPB and promising practice capacity
 - ❑ Workforce skill development
- ❑ All WAA staff must participate in OBH trainings, prior to the delivery of treatment planning or services as a Wraparound Agency (WAA).
- ❑ OBH will certify Wraparound Facilitators employed by the WAA, who have completed the required training.
- ❑ Certification will serve as a pre-requisite to the credentialing / subcontracting process administered by the SMO.

National Wraparound Initiative (NWI)

In 2004, stakeholders—including families, youth, providers, researchers, trainers, administrators and others—came together in a collaborative effort to better specify the wraparound practice model, compile specific strategies and tools, and disseminate information about how to implement wraparound in a way that can achieve positive outcomes for youth and families.

National Wraparound Initiative (NWI)

OBH has engaged the Maryland Innovations Institute to ensure that WAAs develop, implement and sustain a wraparound process, that aligns with the established NWI fidelity components, and protects the integrity of the practice model.

National Wraparound Initiative (NWI)

"The NWI works to promote understanding about the components and benefits of wraparound, and to provide the field with resources to facilitate high quality and consistent wraparound implementation."

National Wraparound Initiative (NWI)

Benefits of NWI to LA WAA Implementing Communities

- ❑ NWI defines the activities in a manner that is sufficiently precise to permit fidelity measurement, but also sufficiently flexible to allow for diversity in the manner in which a given activity might be accomplished.
- ❑ NWI builds agreement about essential elements of wraparound practice.
- ❑ NWI establishes phases and activities of the wraparound process
- ❑ NWI describes the main goals to be accomplished in the phase and the activities that are carried out to meet each goal.

Wraparound: An Overview of the History, Practice Model and Research Base

Marlene Matarese, MSW
Innovations Institute, University of Maryland,
School of Medicine
Director, Training and Technical Assistance



Integrating Systems  Improving Outcomes

A Very Brief History...

- During the 70s and 80s, wraparound emerged from efforts to “do whatever it takes” to keep children successfully in the community
- Provide comprehensive community supports rather than institutionalization
- Help family and child get their unique needs met
- In 1998, concerns that “wraparound” was not well specified led to original statement of 10 principles/value base

Focus on Knowledge: How Does Wraparound Work?

Wraparound Principles:

- Family voice and choice
- Team-based
- Culturally competent
- Natural supports
- Collaboration
- Community-based
- Individualized
- Strengths based
- Persistence
- Outcome-based



Positive Outcomes!



Bruns, E. and Walker, J. (2011)

How Do You Go to Scale with Miracles?

Still, by 2003, mounting evidence that the miracle didn't always occur

- ❑ Some programs described as “wraparound” were clearly not working in ways that reflected the principles
- ❑ Individual programs had to reinvent the miracle
- ❑ It was hard to share materials across programs
- ❑ Hard to build evidence of effectiveness

The NWI Gets Started

In 2003, stakeholders got together and planned to work *collectively* to:

- ❑ Clarify more about what the principles mean in wraparound practice
- ❑ Describe necessary elements of practice– the “practice model”
- ❑ Promote research on wraparound’s effectiveness
- ❑ Develop and share information and resources– “community of practice”
- ❑ www.nwi.pdx.edu


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the national wraparound initiative

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- **Supporting community-level planning and implementation**
- **Promoting professional development of wraparound staff**
- **Ensuring accountability**
- **Sustaining a vibrant and interactive national community of practice**

The NWI is membership supported. You can [join the NWI](#) to help continue this important work!!

wraparound resources

The always-useful **Resource Guide to Wraparound**

NEW! NWI webinar slides and recordings

NEW! Summary of evidence for wraparound

upcoming trainings & events

NWI presents at California Wraparound Institute - **June 7, 2010**

Webinar: Accountability and Quality Assurance in Wraparound - **June 15, 2010**

top news & new research

KBCS radio featured a **story** on Washington State and the National Wraparound Initiative as the second feature of a two part series "Cruel Choices."

Wraparound Milwaukee in 2009 Visionaries **video**

members & affiliates section

NWI members and affiliates can log in [here](#) to access job postings, bulletin boards, the NWI blog, members and providers directories, "beta" versions of new resources, archived materials, and more...



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"The NWI works to promote understanding about the components and benefits of wraparound, and to provide the field with resources to facilitate high quality and consistent wraparound implementation."

the national wraparound institute

In 2004, staff and researchers collaboratively compiled special information about how wraparound works and outcomes for individuals and communities through work that empowers.

- **Supporting community-level planning**
- **Promoting professional development**
- **Ensuring accountability**
- **Sustaining a vibrant and interactive community**

The NWI is membership supported. You can help us do this important work!!

theory of change
ten principles
phases and activities
implementation guide
user's guide
manual de usuario
family partner/principles
family partner/activities
nwi impact
evidence base
bibliography
wraparound research
implementation overview
webinars
johnny chaos comix



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**SO WHERE DOES INNOVATIONS
INSTITUTE FIT INTO ALL OF
THIS?**

Operationalizing Wraparound The Practice Model



What is Wraparound?

Wraparound is an approach to individualized care planning encompassing the concept of wrapping services and supports around children, youth and families, utilizing both clinical treatment services and natural supports.

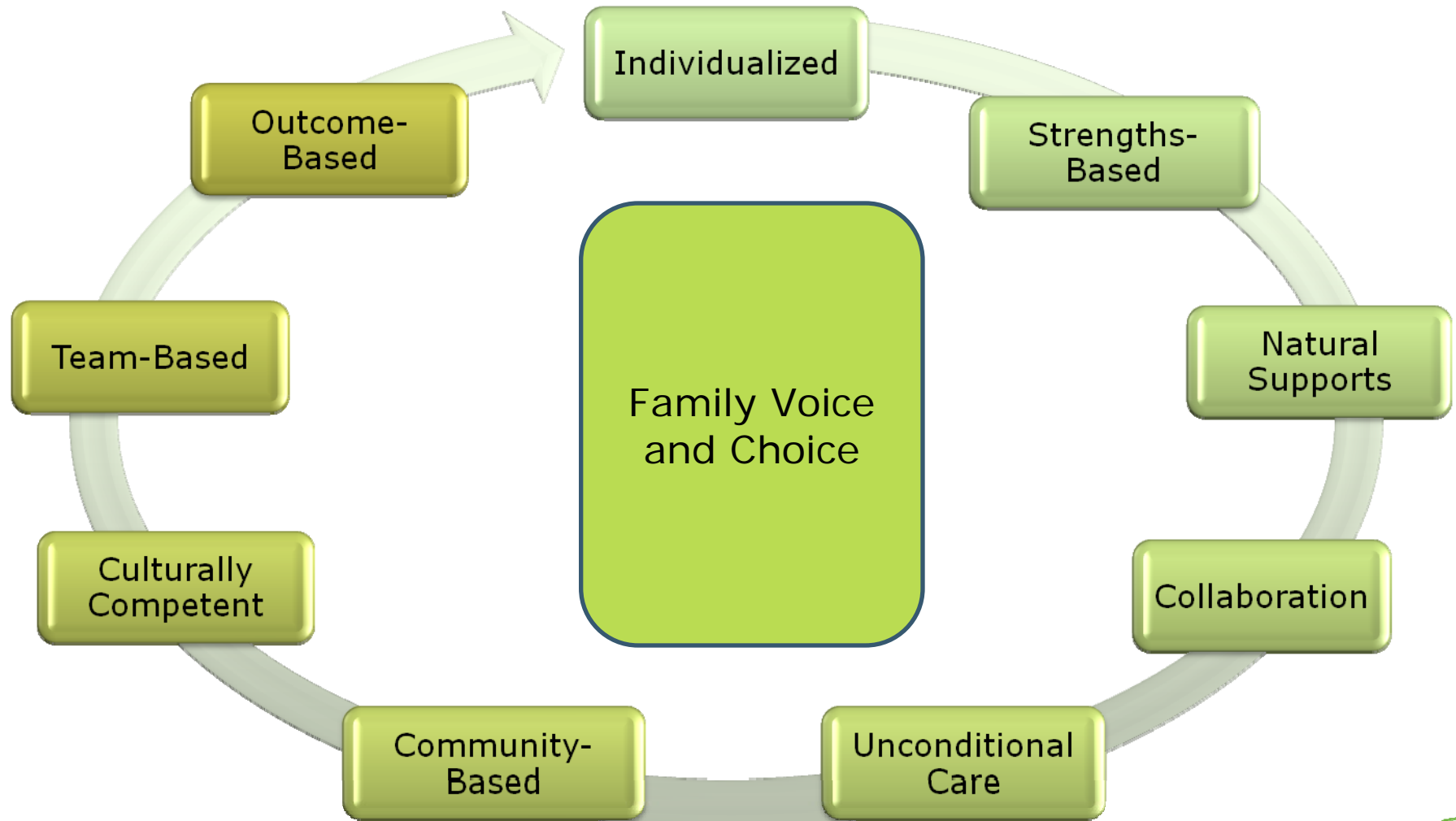
Wraparound Practice

Wraparound practice is a process whereby the values and principles of wraparound are actualized through facilitation of a child and family team that closely links family strengths, needs, and interventions together to achieve the family's vision.

Culture of Wraparound

- ❑ Wraparound is an art, not a science
- ❑ Innovation and creativity are welcome
- ❑ Families are partners in the process
- ❑ Consistency and cohesion is critical
- ❑ Values are adhered to
- ❑ Wrap proponents practice what they preach
- ❑ There is shared accountability
- ❑ Mutual respect
- ❑ It is blame free

Principles of Wraparound



National Wraparound Initiative

Family Voice and Choice

- ❑ Family and child/youth perspectives are elicited and prioritized during all phases of the wraparound process.
- ❑ Planning is grounded in family members' perspectives.
- ❑ Options and choices are provided by the team such that the plan reflects family values and preferences.

Team-Based

- ❑ A Child and Family Team is a group of individuals who work with the family and youth to help prepare and implement the individual support and service plan (ISP).
- ❑ Child and Family Team members are identified by the family and youth, with assistance from the facilitator (e.g., care coordinator, family support partner) or others as requested or needed.
- ❑ A Child and Family Team is unique to every family.

Natural Supports

- ▣ The Child and Family Team actively seeks out and encourages the full participation of team members drawn from family members' networks of interpersonal and community relationships.
- ▣ The Team plan reflects activities and interventions that draw on sources of natural support.

Collaboration

- ❑ Child and Family Team members work cooperatively and share responsibility for developing, implementing, monitoring, and evaluating a single wraparound plan.
- ❑ The plan reflects a blending of team members' perspectives, mandates, and resources.
- ❑ The plan guides and coordinates each team member's work towards meeting the team's goals and family/youth vision.

Collaboration

Collaborative Partnerships

- ▣ Equal partners does not mean that parents and professionals assume each others roles, but rather respect each others roles and contributions.

While professionals bring technical knowledge and expertise to the relationship, parents offer the most intimate knowledge of their children, and often special skills.

Community-Based

- ❑ The Child and Family Team implements service and support strategies that take place in the most inclusive, most responsive, most accessible, and least restrictive settings possible.
- ❑ The Team implements service and support strategies that safely promote child and family integration into home and community life.

Culturally Competent

The wraparound process demonstrates respect for and builds on the values, preferences, beliefs, culture, and identity of the child/youth and family, and their community.

Individualized

To achieve the goals laid out in the Child and Family Team plan, the team develops and implements a customized set of strategies, supports, and services

Strength-Based

The wraparound process and the Child and Family Team plan identify, build on, and enhance the capabilities, knowledge, skills, and assets of the child and family, their community, and other team members

Unconditional Care

Despite challenges, the Child and Family Team persists in working toward the goals and family/youth vision included in the plan until the team reaches agreement that a formal wraparound process is no longer required

Outcome-Based

- ❑ The Child and Family Team ties the goals and strategies of the plan to observable or measurable indicators of success.
- ❑ The Team monitors progress in terms of movement toward achievement of the family's vision.
- ❑ The Team revises the plan accordingly.

Wraparound:

Principles are not Always Enough

A review of Wraparound teams showed that:

- Fewer than 1/3 of teams maintained a plan with team goals
- Fewer than 20% of teams considered >1 way to meet a need
- Only 12% of interventions were individualized or created just for that family
- Natural supports were represented minimally
 - 0 natural supports 60%
 - 1 natural support 32%
 - 2 or more natural support 8%
- Effective team processes were rarely observed

Walker, Koroloff, & Schutte, 2003

Key Elements in Wraparound



Grounded in a Strengths Perspective

Strengths are defined as interests, talents, and unique contributions that make things better for the family. Within an entire process that is grounded in a strengths perspective, the family story is framed in a balanced way that incorporates family strengths rather than a focus solely on problems and challenges. A strengths perspective should be overt and easily recognized, promoting strengths that focus on the family, team and community, while empowering and challenging the team to use strengths in a meaningful way.

Driven by Underlying Needs

Needs define the underlying reasons why behaviors happen in a situation. In a needs-driven process, the set of underlying conditions that cause a behavior and/or situation to exist are both identified and explored in order to understand why a behavior and/or situation happened. These needs would be identified across family members in a range of life areas beyond the system defined areas. These underlying conditions would be articulated and overt agreement with the family and all team members about which to select for action or attention would occur. The process involves flexibility of services and supports that will be tailored to meet the needs of the family.

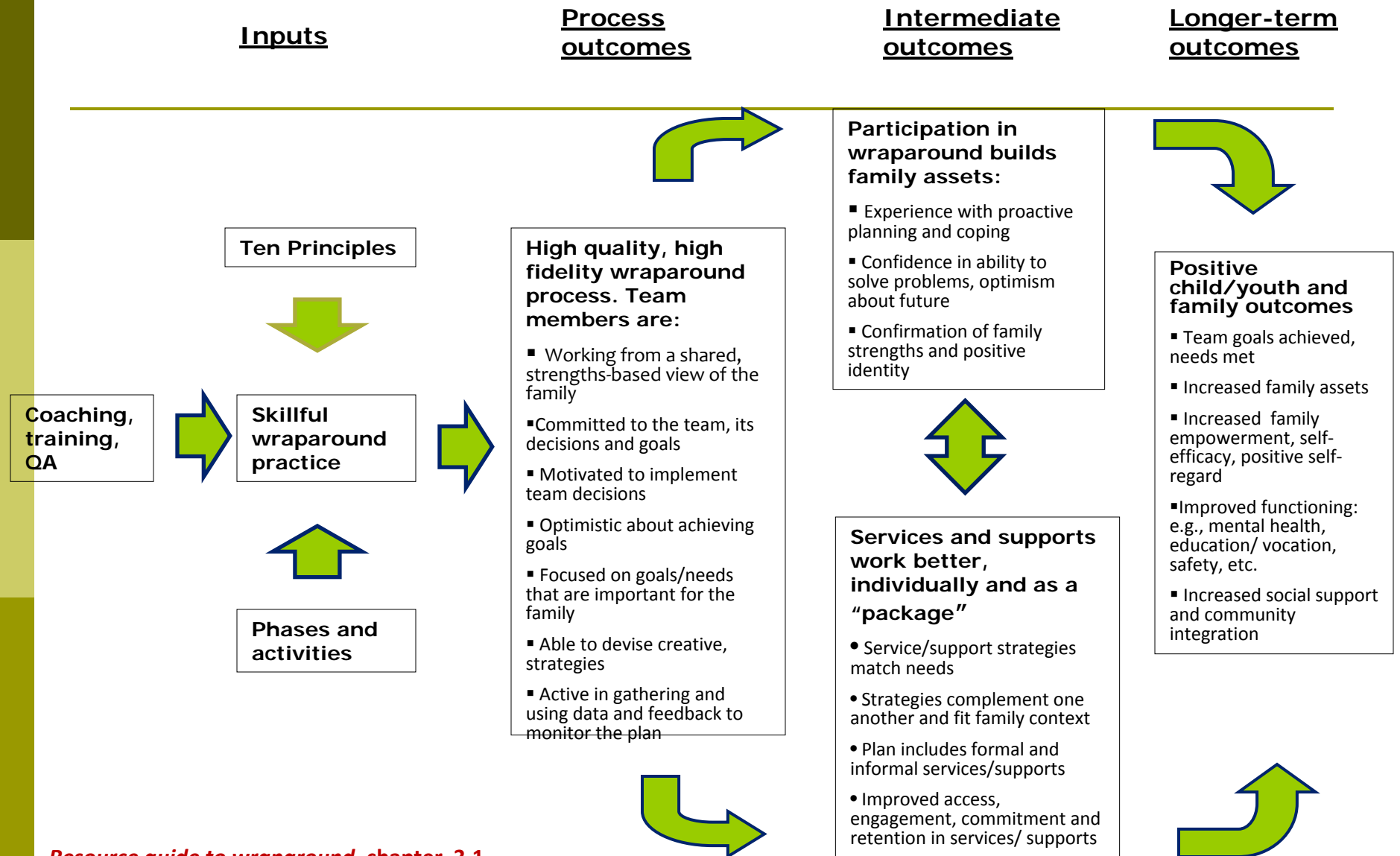
Supported by an Effective Team Process

Wraparound is a process that requires active investment by a team, comprised of both formal and informal supports who are willing to be accountable for the results. Measurable target outcomes are derived from multiple team member perspectives. The team's overall success is demonstrated by how much closer the family is to their vision and how well the family needs have been addressed.

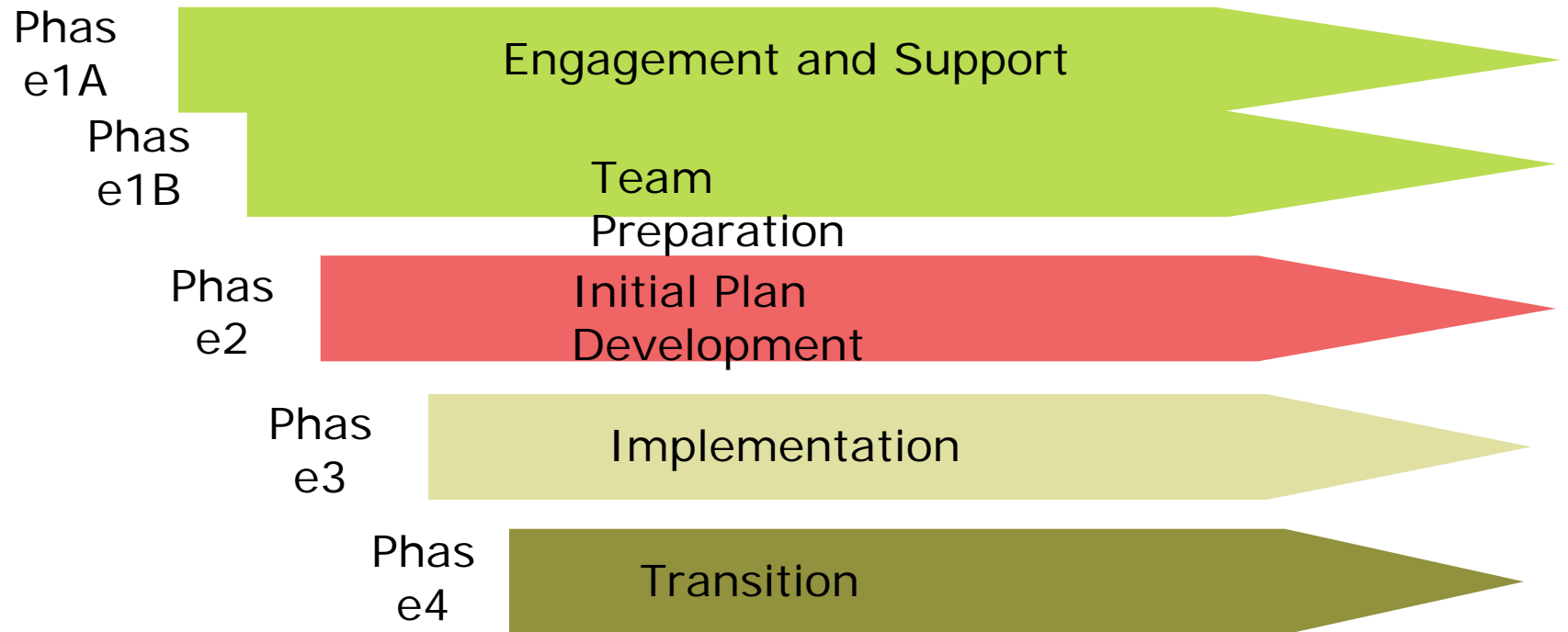
Determined by Families

A family-determined process includes both youth and caregivers and the family has authority to determine decisions and resources. Families are supported to live a life in a community rather than in a program. The critical process elements of this area include access voice, and ownership. Family **access** is defined as inclusion of people and processes in which decisions are made. Inclusion in decision making implies that families should have influence, choice and authority over services and supports identified in the planning process. This means that they should be able to gain more of what is working and less of what they perceive as not working. Family **voice** is defined as feeling heard and listened to, and team recognition that the families are important stakeholder in the planning process. Therefore, families are critical partners in setting the team agenda and making decisions. Families have **ownership** of the planning process in partnership with the team when they can make a commitment to any plans concerning them. In Wraparound, the important role of families is confirmed throughout the duration of care.

Theory of change outline



The Phases of Wraparound



Time

Phase 1A: Engagement Overview

- ❑ Listen to the family's story
 - What has worked in the past
 - What would they like to see happen as a result of the wraparound process
 - Learn about the family's culture and begin listening for family strengths
- ❑ Orient the family/youth to the Wraparound process
- ❑ Address immediate crises/needs/concerns and develop an initial crisis plan
- ❑ Explore strengths, needs, culture, and vision

Phase 1B: Team Preparation

Overview

- ❑ Prepare family for first team meeting
- ❑ Encourage the family to set an agenda
- ❑ Engage other team members
- ❑ Make team arrangements
- ❑ Make the Family feel safe and supported at the meeting

Phase 2: Initial Plan Development

Overview

- ❑ Conduct first Child & Family Team (CFT) 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
 - Look at 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 on.

Phase 3: Implementation Overview

- ❑ Implement the plan
 - ❑ Implement action steps for each strategy
 - ❑ Track progress on action steps
 - ❑ Evaluate success of each strategy
 - ❑ Celebrate successes
- ❑ Revisit and update the plan
- ❑ Consider new strategies as necessary
- ❑ Maintain/build team cohesiveness and trust
- ❑ Continue to complete necessary logistics

Phase 4: Transition Overview

- Plan for cessation of wraparound
 - -Create transition plan
 - -Create post-wraparound crisis plan
 - -Modify wraparound process to reflect transition
- Conduct commencement ceremonies
 - -Document the team's work
 - -Celebrate success
- Follow-up with the family
 - -Check in with family
 - -Reconvene team if necessary

Wraparound Fidelity and Research



What is “high-fidelity” Wraparound?

- ❑ Simply put, “high-fidelity,” “model-adherent,” or “high quality” Wraparound refers to implementation in which the Wraparound principles are achieved, e.g.:
 - Well-functioning teams and good teamwork
 - Family and youth drive the process
 - Natural supports meaningfully involved
 - Creative, individualized planning process
 - Youth and family integrated into the community
 - Setting and measuring progress toward goals

Key resource: *Wraparound: Implementation Essentials*.

[http://www.nwi.pdx.edu/NWI-book/Chapters/Bruns-5a.2-\(implementation-essentials\).pdf](http://www.nwi.pdx.edu/NWI-book/Chapters/Bruns-5a.2-(implementation-essentials).pdf)



“High Fidelity” is not...

- ...A particular manualized version or defined “brand” of Wraparound
- ...An excuse to not measure outcomes!
 - Regardless of how rigorous you are in implementation, the true test of Wraparound success is whether you are getting the results you set out to achieve

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Bruns, E. and Walker, J. (2011)

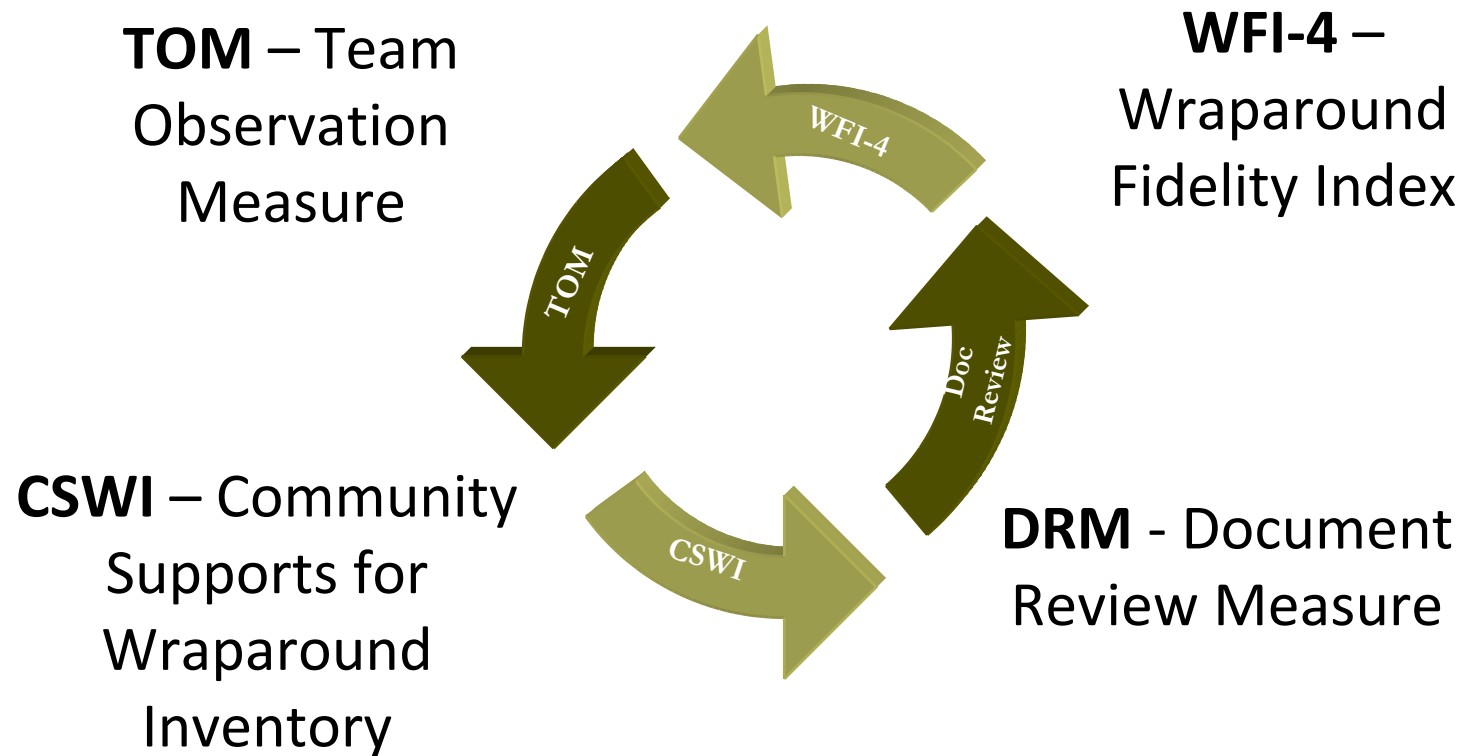


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Wraparound Fidelity Assessment System

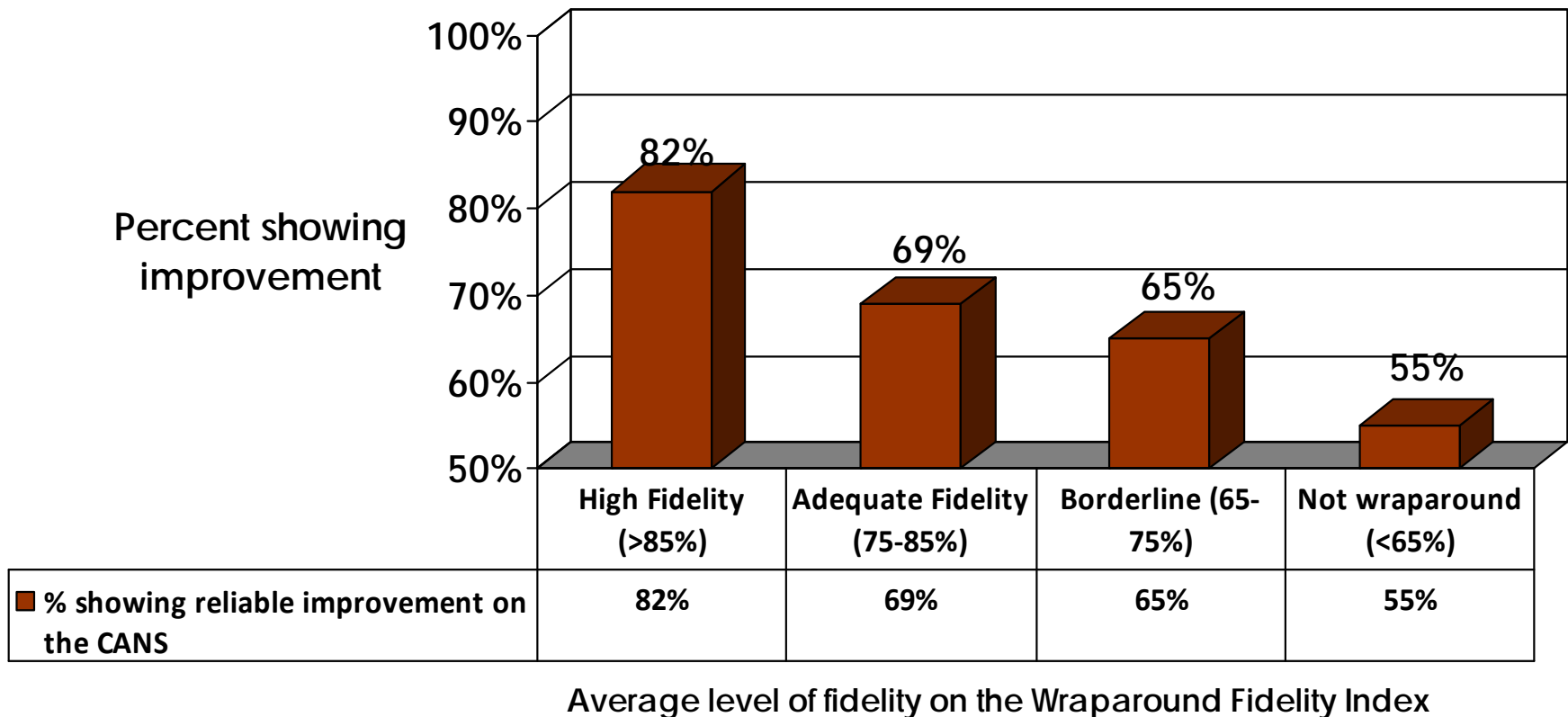
www.wrapinfo.org or <http://depts.washington.edu/wrapeval>



Chapter on fidelity measurement: [http://www.rtc.pdx.edu/NWI-book/Chapters/Bruns-5e.1-\(measuring-fidelity\).pdf](http://www.rtc.pdx.edu/NWI-book/Chapters/Bruns-5e.1-(measuring-fidelity).pdf)

Bruns, E. and Walker, J. (2011)

Higher Fidelity is Associated With Better Child and Youth Outcomes



Effland, McIntyre, & Walton, 2010

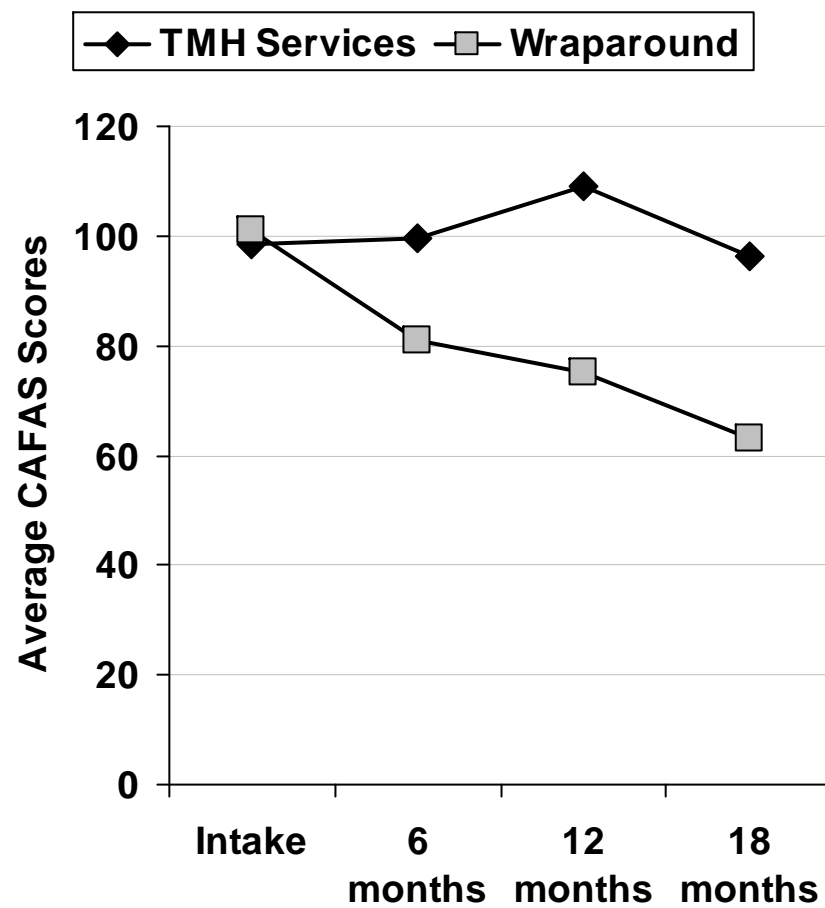
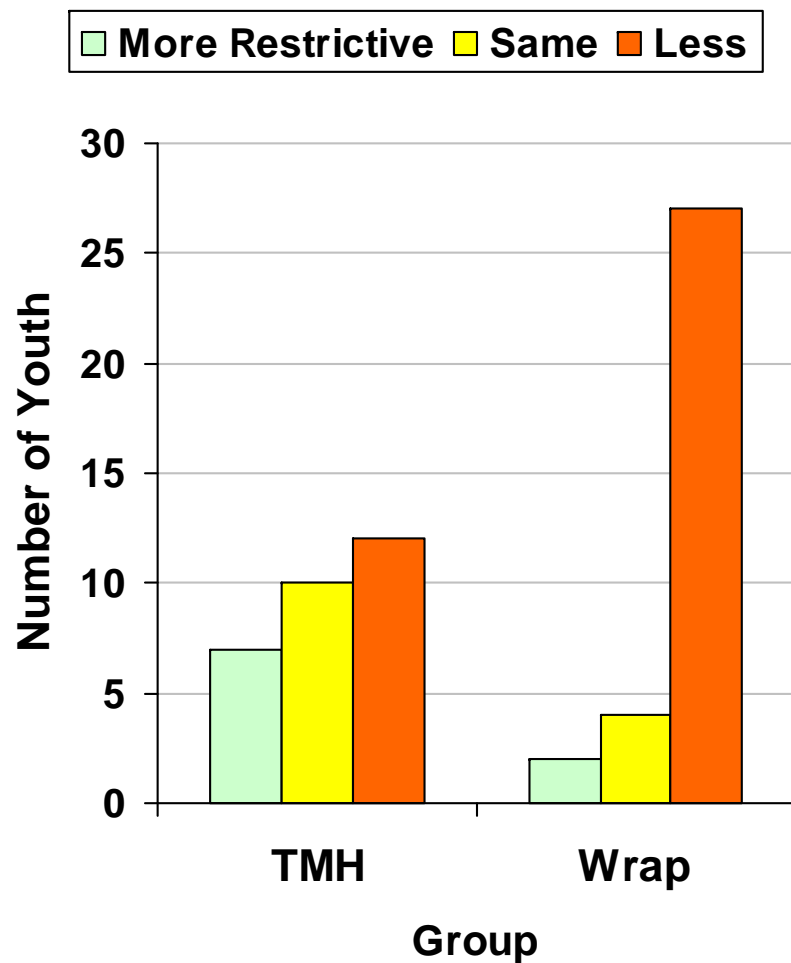


**THERE IS A SIGNIFICANT
DIFFERENCE BETWEEN
HIGH-FIDELITY AND
QUALITY PRACTICE IN
WRAPAROUND**

Wraparound Research Supports the Theory: 9 Controlled Studies to Date

- ❑ Better functioning and mental health outcomes for wraparound groups (NV, MD, NYS, elsewhere)
- ❑ Reduced recidivism and better juvenile justice outcomes (Clark Co., Washington)
- ❑ Higher rates and more rapid achievement of permanency when implemented in child welfare (Oklahoma)
- ❑ More successful integration of adult prisoners into the community (Oklahoma)
- ❑ Reduction in costs associated with residential placements (Milwaukee, LA County, Washington State, Kansas, many other jurisdictions)

Results from Nevada: More Community-Based, Better Functioning



Bruns, E. and Walker, J. (2011)

Results from Clark County, WA

Improving juvenile justice outcomes (Pullman et al., 2006)

- ❑ Connections group (N=110) 3 times less likely to commit felony offense than comparison group (N=98)
- ❑ Connections group took 3 times longer on average to commit first offense after baseline
- ❑ Connections youth showed “significant improvement in behavioral and emotional problems, increases in behavioral and emotional strengths, and improved functioning at home at school, and in the community”

Meta Analysis Finds Significant Effects

- ❑ Recent meta-analysis found significant, medium-sized effects in favor of wraparound for Living Situation outcomes (placement stability and restrictiveness)
- ❑ A significant, small to medium sized effect found for:
 - Mental health (behaviors and functioning)
 - School (attendance/GPA), and
 - Community (e.g., JJ, re-offending) outcomes
- ❑ The overall effect size of all outcomes in the 7 studies is about the same (.35) as for “evidence-based” treatments, when compared to services as usual (Weisz et al., 2005)

Suter & Bruns (2009)

Wraparound is About...

- Leadership at all levels
- Involvement of all members
- Maintenance of individual self-esteem
- Open communication
- Power within the group to make decisions
- Attention to both process and content
- Mutual trust and support
- Respect for differences
- Constructive conflict resolution
- Focus on benefit of working as a team
- Mission and values driven
- Use the team as your primary communication device

Resources

Based on:

Bruns, E.J. Walker, J.S., VanDenburg, J.D., Rast, J., Osher, T.W., Miles, P., Adama, J., & National Wraparound Initiative Advisory Group. Phases and Activities of the Wraparound Process

Miles, P. The Wraparound Planning Process User's Guide: A Manual for Families; Portland State University.

Pires, S.A. "Primer Hands On": Skill Building in Systems of Care

Meyers, M.: Wraparound Milwaukee

Contact Information

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Louisiana's Coordinated System of Care

Questions?

CSoC.HelpDesk@la.gov

www.dcfhs.la.gov/csoc