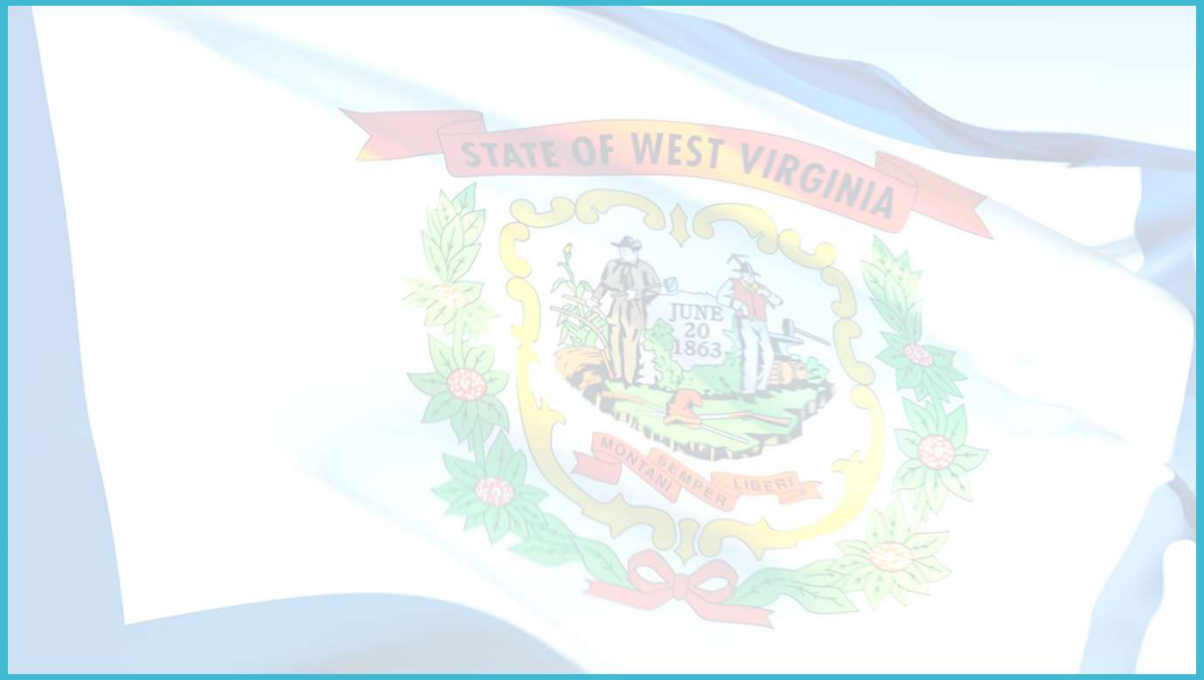
WV Wraparound Fidelity



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What is Fidelity?

- Fidelity can be defined as the extent to which delivery of an intervention adheres to the protocol or program model originally developed.
- Fidelity measurement has increasing significance for evaluation, treatment effectiveness research, and service administration.
- Different instruments will be utilized in WV to assess wraparound adherence to the essential elements of wraparound, the impact of training and technical assistance, coaching, and supervision.

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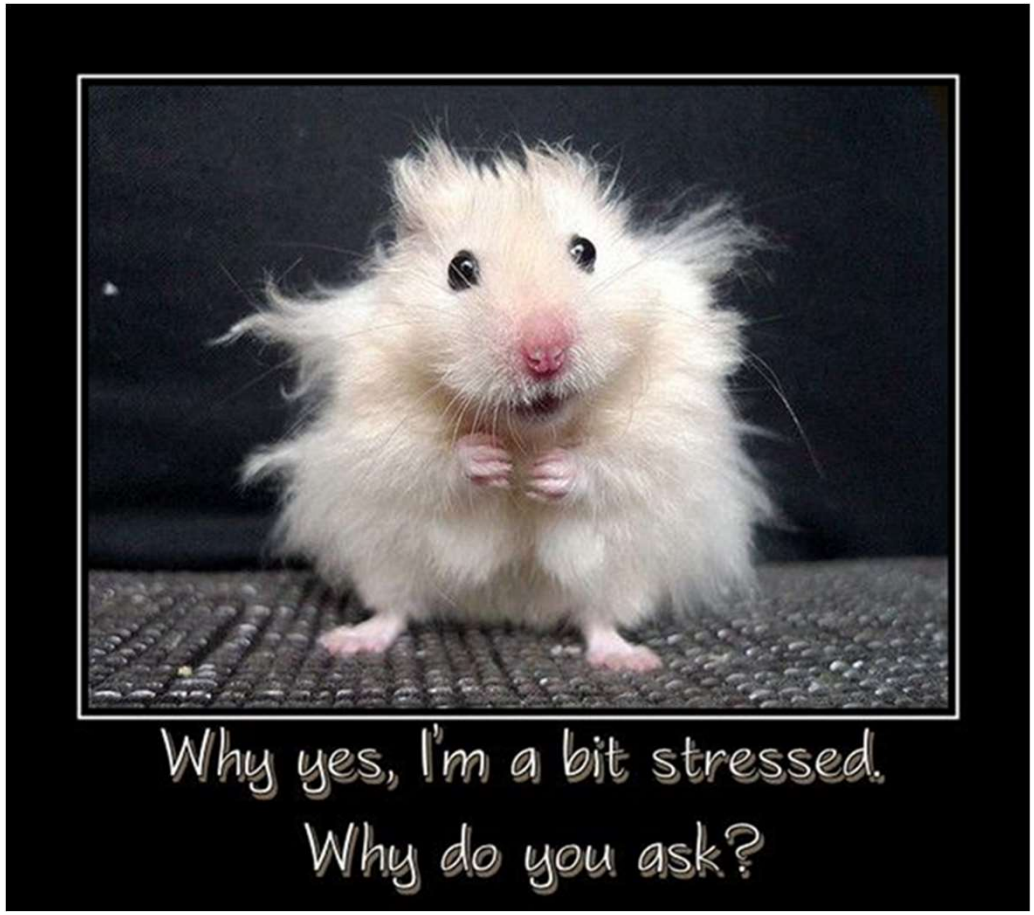
NO STRESS! You will NOT meet fidelity in all areas this time!



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First Report

- Baseline
- Explain the steps WV is taking to move toward fidelity.

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What Assessments will be used by Marshall University?

- Wraparound Document Assessment and Review Tool (DART)
- The Wraparound Fidelity Index, Short Form (WFI-EZ)
- Child and Adolescent Needs and Strengths(CANS)

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Wraparound Document Assessment and Review Tool (DART)

The DART is a tool utilized to assess adherence to standards of high-quality fidelity. The tool has 42 items that cover 9 areas of fidelity and 8 items that look at outcomes. The DART is divided into 6 scored areas:

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Wraparound Document Assessment and Review Tool (DART)

- Timely Engagement
- Wraparound Key Elements
  - ❖Meeting Attendance
  - ❖Driven by Strengths & Families
  - ❖Natural & Community Supports
  - ❖Needs-Based
  - ❖Outcomes-Based
- Safety Planning
- Crisis Response
- Transition Planning
- Outcomes

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Sources of Information

- Plans of Care
- Attendance Sheets
- Referral Paperwork
- Crisis/Safety Plans
- Strengths, Needs & Culture Discovery/Family Story
- Progress Notes
- CANS

- PLEASE organize your information!
- MU Staff will be contacting you if they have questions.

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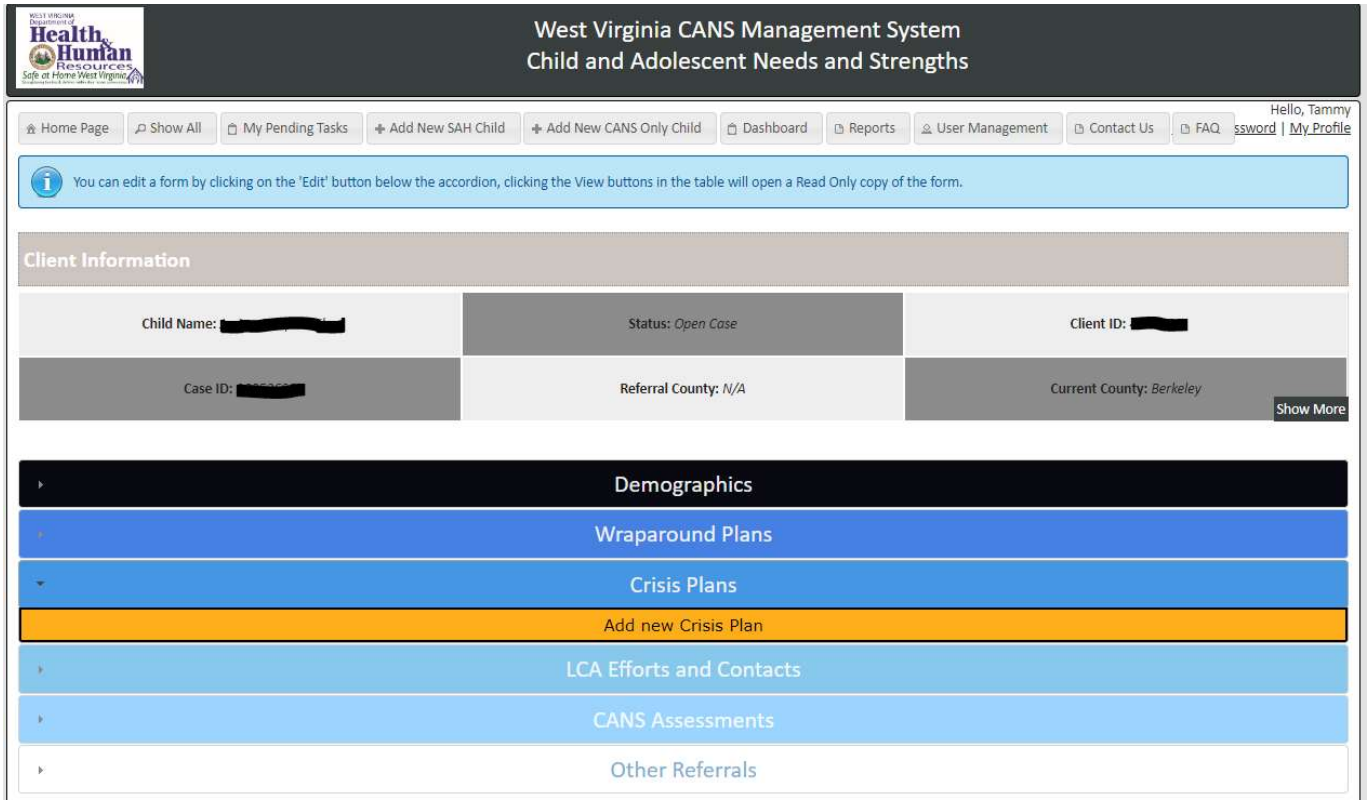
Sources of Information

- This will all be uploaded into the WV CANS System under the **Crisis Plan tab.**



Timely Engagement

- First contact with family following referral or wraparound facilitator assignment. **(Standard-Within 3 days of referral or assignment)**
- First Face-to-face contact between wraparound facilitator, youth and family **(Standard-10 days from referral or assignment)**
- First Crisis Plan Completed **(Standard-At first Face-to-face meeting)**
- First family story, strengths, needs and cultural discovery completed **(Standard-Within 20 days of first face-to-face)**
- First child and family meeting **(Standard-Within 30 days of first face-to-face) Must include caregiver, youth and at least 1 formal and 1 informal support.**

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Timely Engagement

- First plan of care completed **(Standard-Within 35 days of first face-to-face)**
- Review of last 3 child and family meetings **(Standard-No more than 35 days between CFTM)**

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Timely Engagement

First Contact 3 days from assignment

First Face-to-Face and Crisis Plan completed 10 days from assignment

First Family Story, strengths, needs and cultural discovery within 20 days of first face to face

First child and family meeting withion 30 days of first face-to-face

First Plan of Care within 35 days of face-to-face

All Plans of Care after the first should be no more than 35 days a part

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Timely Engagement

- CANS is completed within 30 days from wraparound facilitator assignment
- CANS updated every 90 days

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Effective Teamwork and Plans of Care

Definition- Refers to the amount of teamwork that is being shown with Care Coordinator and others involved in the Wraparound Process to work through goals.

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Effective Teamwork and Plans of Care

- The plans of care represent a balance between informal (natural and community) and formal strategies, services, and supports.
- The plans of care include tasks and strategies that encourage the youth's and family's positive connection to their community (i.e., participation in community activities, clubs, and/or other informal organizations).
- The plans of care include tasks and strategies that encourage the youth's and family's positive connection to their natural supports (e.g., extended relatives, friends, neighbors, clergy, business owners, etc.).

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Effective Teamwork and Plans of Care

- There is evidence that the team reviews the status of task completion and/or strategy implementation at every meeting.
- There is evidence that progress toward meeting the youth's and family's needs is explicitly monitored at every meeting.
- The outcomes outlined in the plans of care are specific and measurable using objective and verifiable measures, not just general or subjective feedback.
- There is evidence that the Wraparound plan of care is meaningfully updated at each team meeting (i.e., the strategies, outcomes, and/or needs statements are adjusted, as appropriate).

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Meeting Attendance

- At least 1 caregiver or close family member attended every child and family team meeting.
- The youth attended every child and family team meeting. (If the youth is 10 years old or younger and/or is not developmentally able to participate, then N/A)
- All key representatives from school, child welfare, juvenile justice agencies who seem integral to the plan of care attended nearly every child and family team meeting. (If no system partner should be involved, then N/A. School can be in N/A in Summer months)

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Meeting Attendance

- All other service providers who seem integral to the plan of care attended nearly every child and family team meeting. (If no other service providers should be involved, then N/A.)
- All peer partners (family support partners, youth support partners, etc. who seem integral to the plan of care attended nearly every child and family team meeting. (If no peer partners, then N/A.)
- At least 1 natural support (Extended family, friends, community support, etc.) attended every child and family team meeting.

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Strengths Driven

Refers to the family's voice in deciding who and what will be best for their needs to be met during the Wraparound Process.

- An inventory of the youth's strengths is present, and at least two strategies included in the plans of care are clearly linked to his/her identified strengths.
- An inventory of the family's and/or family members' strengths is present, and at least two strategies included in the plans of care are clearly linked to their identified strengths.
- An inventory of the team's and/or team members' strengths is present, and at least two strategies included in the plans of care are clearly linked to their identified strengths.

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Strengths Driven

- The inventory of strengths (for whomever is present) is updated at least quarterly.
- Detailed and specific examples of the youth's and family's culture, values, and beliefs are provided, especially as they relate to the reasons the family enrolled in Wraparound.
- There is a clearly articulated, positively-worded, long-range vision for the ENTIRE family (not only the youth or only the caregiver). **(If the youth is transition-age and does not have family members on the team, the vision can be only about the youth.)**
- Were all strength items in the plan of care rated on the CANS? If a strength is identified in the plan of care, is it also rated a 0 or 1 on the CANS.

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Natural Community Supports

Definition-refers to the natural supports, including friends, family, and neighbors. Community support refers to the community support that the family can be linked to through the Wraparound Process.

- Documentation identifies the youth's and family's natural, or community supports and explains how they might be part of the team or involved in implementing the plan of care.

- If natural supports are not consistently attending Child and Family Team Meetings, then there is evidence of ongoing and persistent efforts to identify and engage them.

- CANS Natural Support item is rated at a level that would indicate correct level as identified in the plan.

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Needs Based

- Needs statements for the youth are included in every plan of care and refer to the underlying reasons why problematic situations or behaviors are occurring. These needs are not simply stated as deficits, problematic behaviors, or service needs.
- Needs statements for family members are included in every plan of care and refer to the underlying reasons why problematic situations or behaviors are occurring. These needs are not simply stated as deficits, problematic behaviors, or service needs.
- No plan of care includes more than three needs statements.
- The strategies in the plans of care are clearly individualized and can be logically expected to meet the youth's and family's needs.
- If a need is identified in the plan of care, is it also rated a 2 or 3 on the CANS.

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Safety Planning

- There is at least one crisis/ safety plan found in the record.
- The crisis/safety plan(s) identifies triggers or behaviors that indicate onset of a crisis or risk situation, especially those triggers or behaviors that precipitated the referral for Wraparound or are placing the youth at risk of out-of-home placement or increased residential restrictiveness.
- The crisis/ safety plan(s) identifies specific actions and interventions and assigns specific responsibilities for who will take these actions.

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Crisis Response

- While enrolled in Wraparound, how many crises/reportable events (arrest, suicide attempt, hospitalization, removal from home, etc.) has the youth experienced?
- After each crisis/reportable event, the crisis/safety plan was updated within 24 hours.
- After each crisis/reportable event, a Child and Family Team Meeting was held within 72 hours.

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Transition Planning

- Is the youth and family in the Transition Phase or have they exited formal Wraparound services after going through a transition phase?
- The Wraparound plans of care produced during the transition phase identify needs, services, and supports that will continue after formal Wraparound ends or when the youth transitions to the adult service system.
- There is a post-Wraparound crisis management plan.
- A commencement celebration respectful of the youth's and family's traditions/culture is planned and/or is documented.

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Outcomes

- In the last six months, the youth's **living situation has been stable**—S/he has not been removed from the home or changed placements. If there was a move, it was to a less restrictive setting.
- In the last six months, the youth has **NOT visited the ER and/or been hospitalized** for emotional or behavioral difficulties.
- In the last six months, the youth has **experienced reduced mental health symptoms**.
- In the last six months, the youth has experienced **improved interpersonal functioning.**
- In the last six months, the youth has **regularly (85%+) attended school** and/or has been employed.

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Outcomes

- In the last six months, the youth has **experienced improved school or vocational functioning**.
- In the last six months, the youth has **NOT been arrested or violated probation/parole.**
- Recidivism Rate-Number of youth who return to wraparound services.
- Overall Outcomes from CANS-Average Impact and Treatment Needs Report

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Case Selection

- 17 Providers
- 3 cases from each provider-2 open 1 closed, if available.
- Equal number of CSED, BBH and SAH cases if possible.

- **The selection may vary in future reviews**

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Case Selection

Once the cases are selected, the wraparound facilitator and supervisor will be notified.

All data will be uploaded into the WV CANS System within 1 week.

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Contacts

Tammy Pearson

tpearson@marshall.edu

Lydia Shaw

cartwright15@marshall.edu

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