

Wraparound/REACH Disenrollment Progress Report

Youth's Name: _____ DOB: _____

Care Coordinator: _____ Agency: _____

You are now getting ready to leave the Wraparound or the REACH program. We would like to know what kind of progress you feel you and your child have made.

 Parent / Guardian Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Doesn't Apply
1. I feel my family has made significant progress in meeting the Family Vision we have been working towards.	1	2	3	4	5	N/A
2. I feel my child's educational needs have been met.	1	2	3	4	5	n/a
3. Overall, I feel that Wraparound/REACH helped me be more able to handle challenging situations.	1	2	3	4	5	n/a
4. I feel that I have family, friends and community resources that will be there for me and my family if we need them.	1	2	3	4	5	n/a
5. If my family does have a crisis, I believe the final Crisis Plan my Team developed will help us.	1	2	3	4	5	n/a
6. After disenrollment I will know how to get services and supports that my family may still need.	1	2	3	4	5	n/a

On a scale of 1-5 (1 being very poor, 5 being very good):

How do you feel your family was doing when first enrolled? (circle one)

1 2 3 4 5

How do you feel your family is doing now?

1 2 3 4 5

 Youth Questions	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Doesn't Apply
1. I feel that I'm doing better in school than I was before	1	2	3	4	5	n/a
2. I feel like I'm getting along better with my family than I did before.	1	2	3	4	5	n/a
3. I feel like I'm getting along better with my friends than I did before.	1	2	3	4	5	n/a
4. I feel my behavior is better since I was enrolled.	1	2	3	4	5	n/a

On a scale of 1-5 (1 being very poor, 5 being very good):

How do you feel you were doing when you first enrolled? (circle one)

1 2 3 4 5

How do you feel you are doing now?

1 2 3 4 5

Caregiver Signature: _____ Date: _____

Youth Signature: _____ Date: _____