

Wraparound Provider Training: Assuring Best Practice



Best Practice Award

Presented by:



Wraparound Milwaukee And Families United of Milwaukee



What is Wraparound Milwaukee?

- ◆ Program which offers support and services to families with children with emotional, behavioral or mental health needs
- ◆ Care Management Organization
 - Family Friendly
 - Traditional and Non-traditional mental health services



Program Components

- ◆ Administrative Services
- ◆ Care Coordination
- ◆ Families United of Milwaukee
- ◆ Provider Network
- ◆ Informal Supports/Community Resources
- ◆ Mobile Crisis Team



Care Coordinator's Role

- ◆ Weekly contact
- ◆ Assemble ***child and family team*** to Meet Monthly
- ◆ Prepares written ***plan of care*** based on child and family team meeting
 - Within first 30 days
 - Then every 90 days
- ◆ Authorizes paid services



Provider Network

- ◆ 80 Core Services – Multiple Providers
- ◆ Services Organized on a Fee-for-Service Basis
- ◆ Applications are reviewed for: Credentials of Providers, MA Certification, Cultural Competency of Provider, Liability Coverage, etc.
- ◆ **Consumer Choice** in Selection of Service Providers
- ◆ Quarterly Provider Network Meetings
- ◆ Established QA/QI Standards for Services



What to expect from a Network Provider

- ◆ Active participant in Child and Family Team Meetings
- ◆ Honest and open communication in a Strength Based Manner
- ◆ Provide agreed upon services
- ◆ Provide ample notice in scheduling and canceling appointments
- ◆ Carry out their role in the Plan of Care
- ◆ Document change in a Strength Based Manner



Natural/Informal Supports & Community Resources

- ◆ Family
- ◆ Friends
- ◆ Relatives
- ◆ Faith Organizations
- ◆ Neighborhood Resources ie: Boys clubs, YMCA, Big Brother/Big Sister
- ◆ Civic Organizations



Families United of Milwaukee, Inc.



- ◆ Advocacy for Parents and Children
- ◆ Supportive Services - MUTT
- ◆ Participate in Child and Family Team Meetings
- ◆ Members of Wraparound Milwaukee Committees
- ◆ Assist with Trainings and Workshops
- ◆ Social Events



Mobile Crisis Team

- ◆ Team of Mental Health Professionals
- ◆ Services
 - Crisis Intervention
 - Authorize Psychiatric Hospitalization
 - Crisis Group Home
- ◆ Hours Available
 - M - F 9 am-10 pm / Sat & Sun 1:30-10 pm
 - Psychiatric crisis line answers calls after 10 pm and before 1:30 pm on weekends



Youth and Families in Wraparound Milwaukee

- ◆ Identified By Child Welfare or Juvenile Justice
 - Children and Adolescents diagnosed with serious mental health/behavioral issue
 - Families with complex needs in multiple systems
 - Youth at risk of imminent placement out of their homes
- ◆ Currently 600+ Families Enrolled

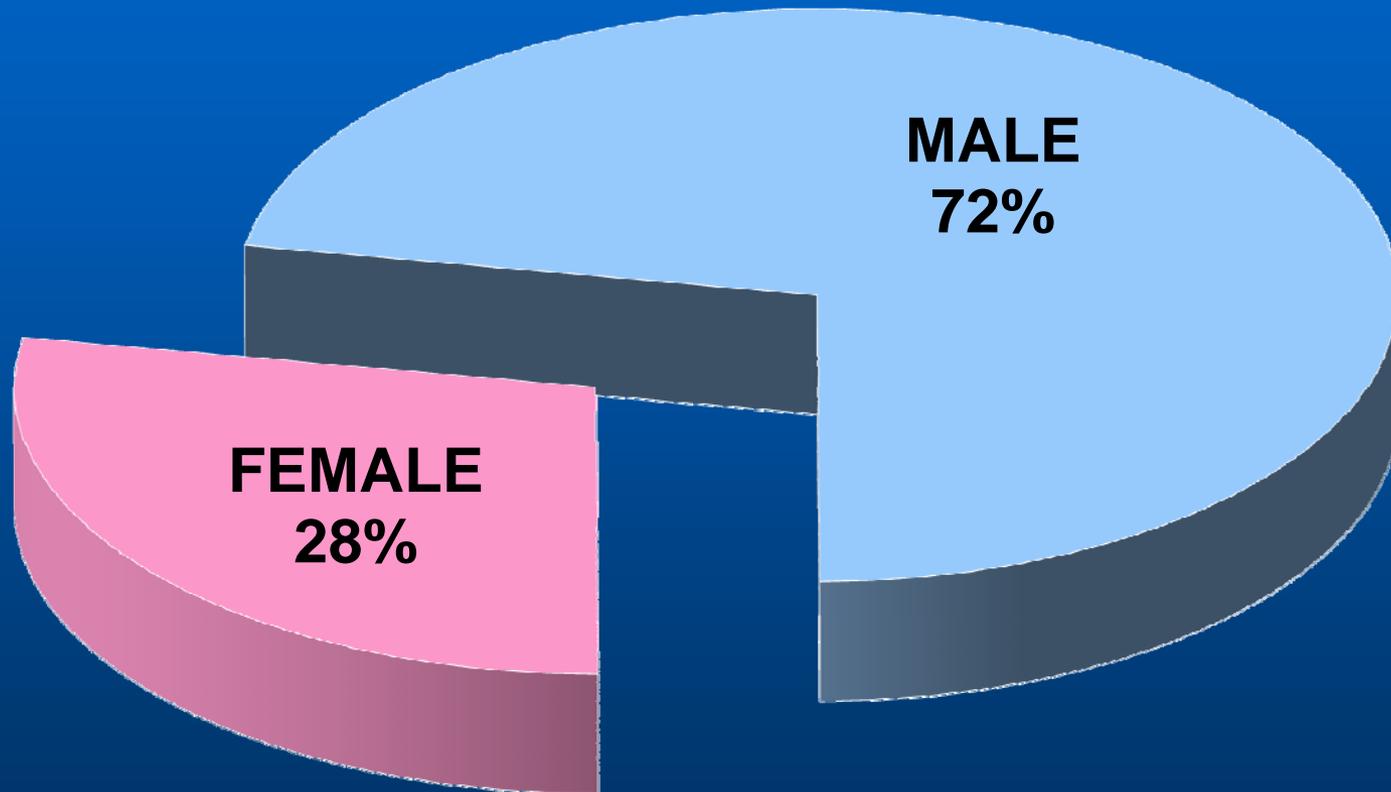


Other Wraparound Programs

- ◆ Reach-200+ Families Enrolled
- ◆ O' Yeah
- ◆ Focus



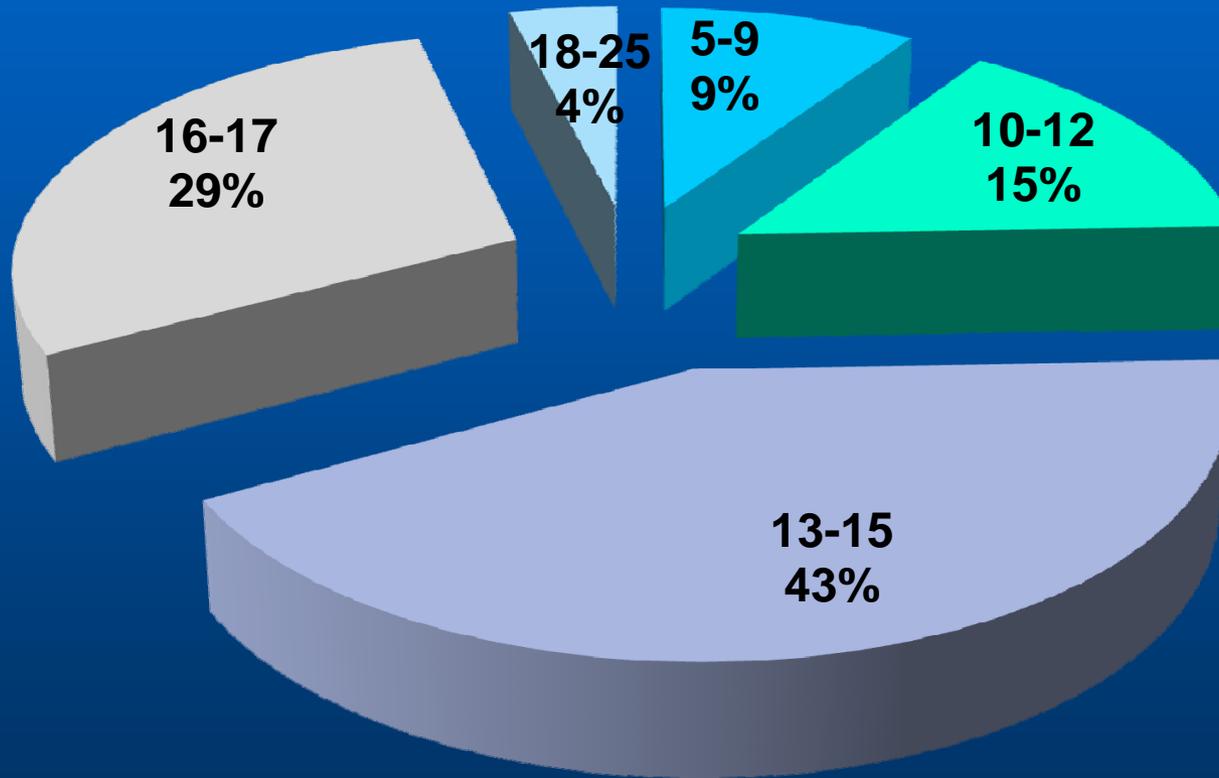
Gender of Youth in Program



Current Enrollees - 2011



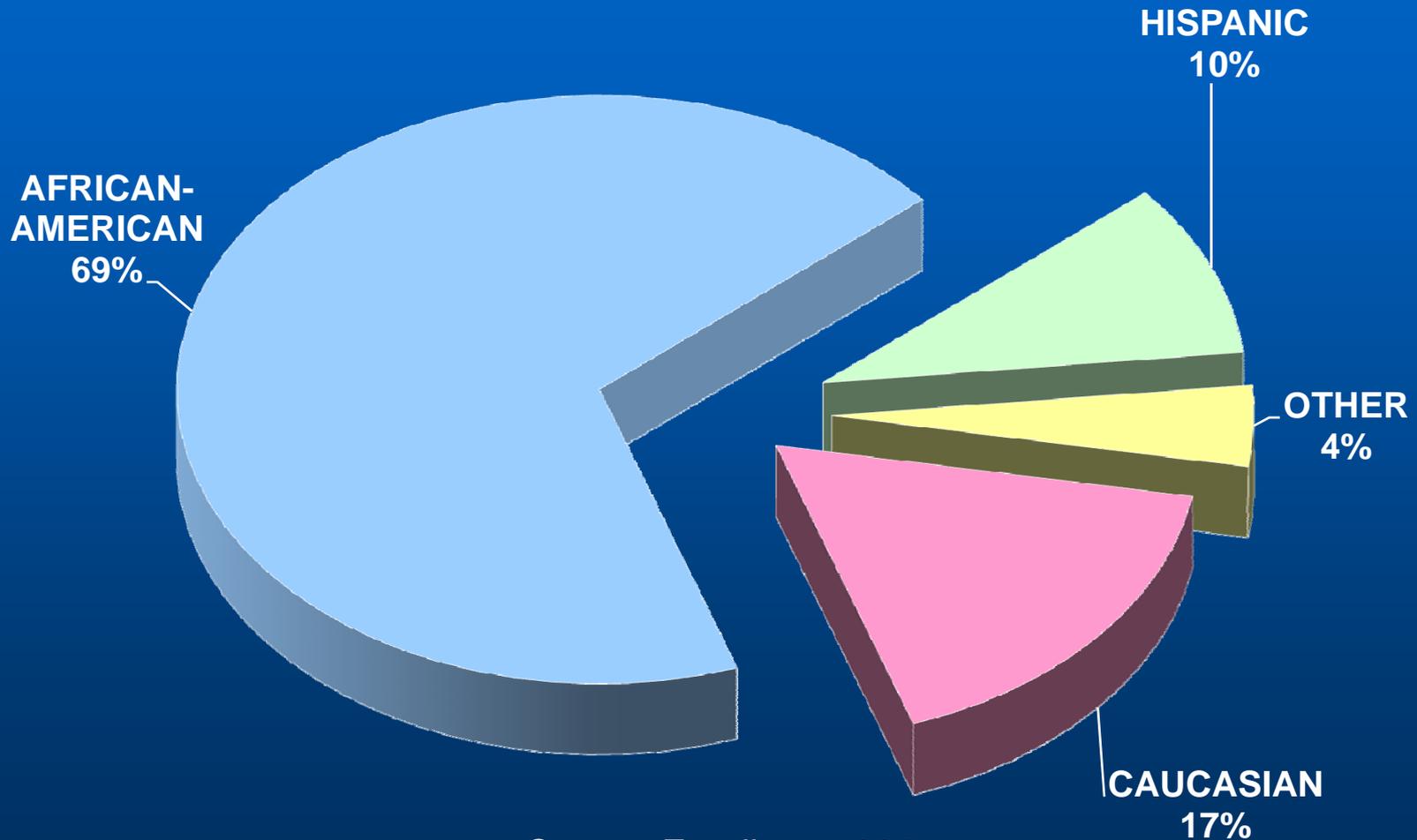
Age of Youth in Program



Current Enrollees – 2011



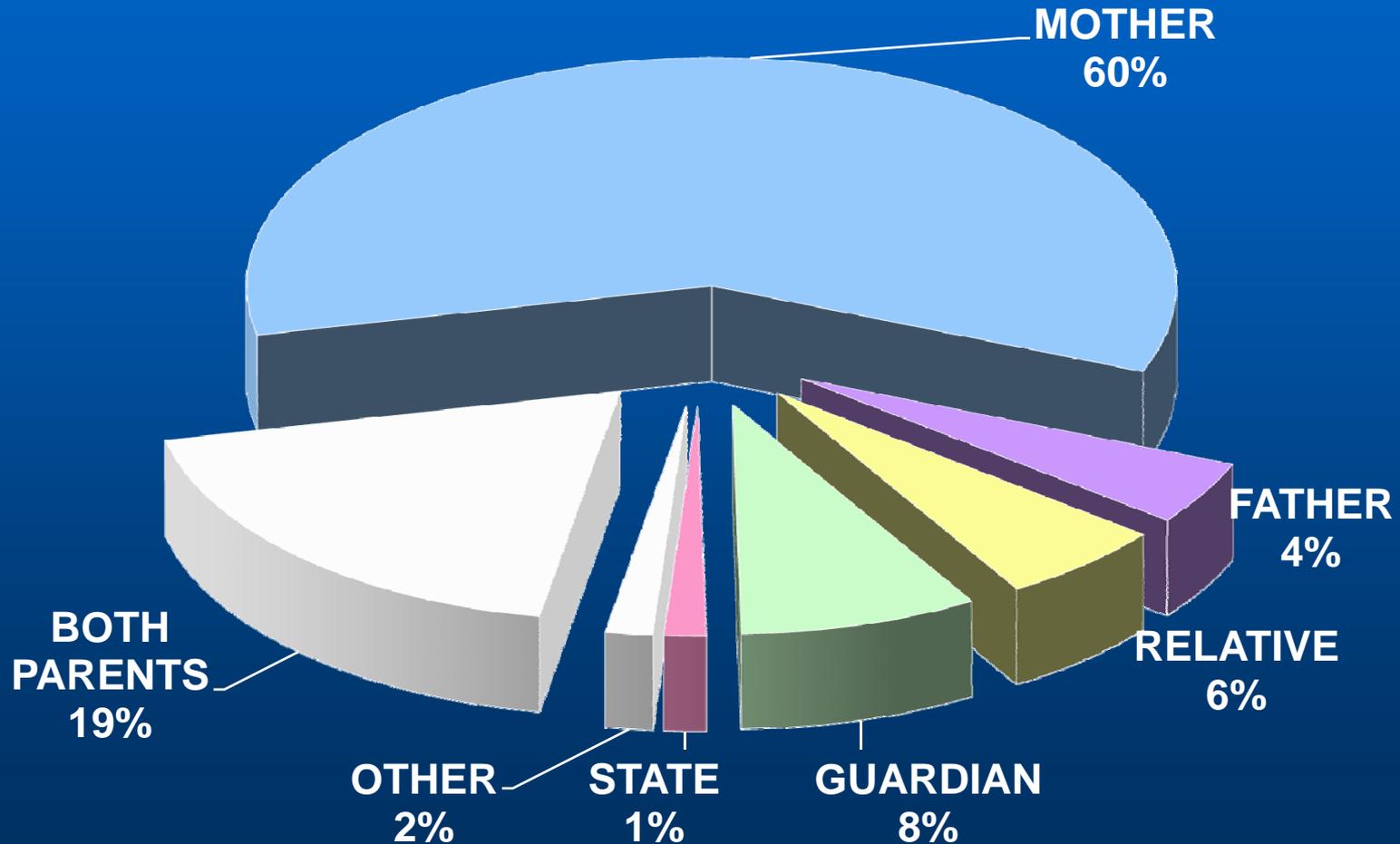
Ethnic Representation of Youth



Current Enrollees - 2011



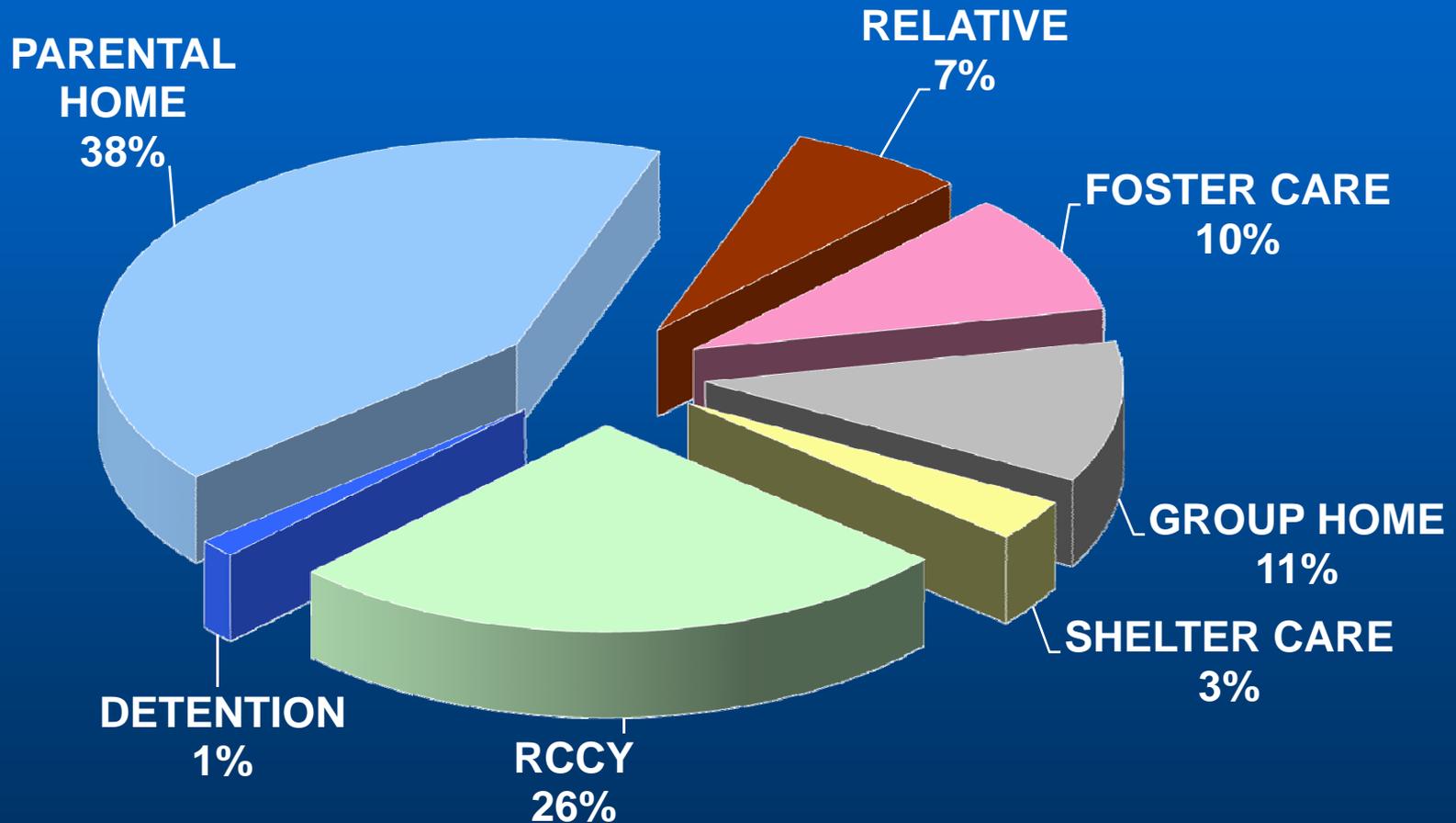
Custody of Children at Intake of Wraparound Enrollees



Current Enrollees - 2011



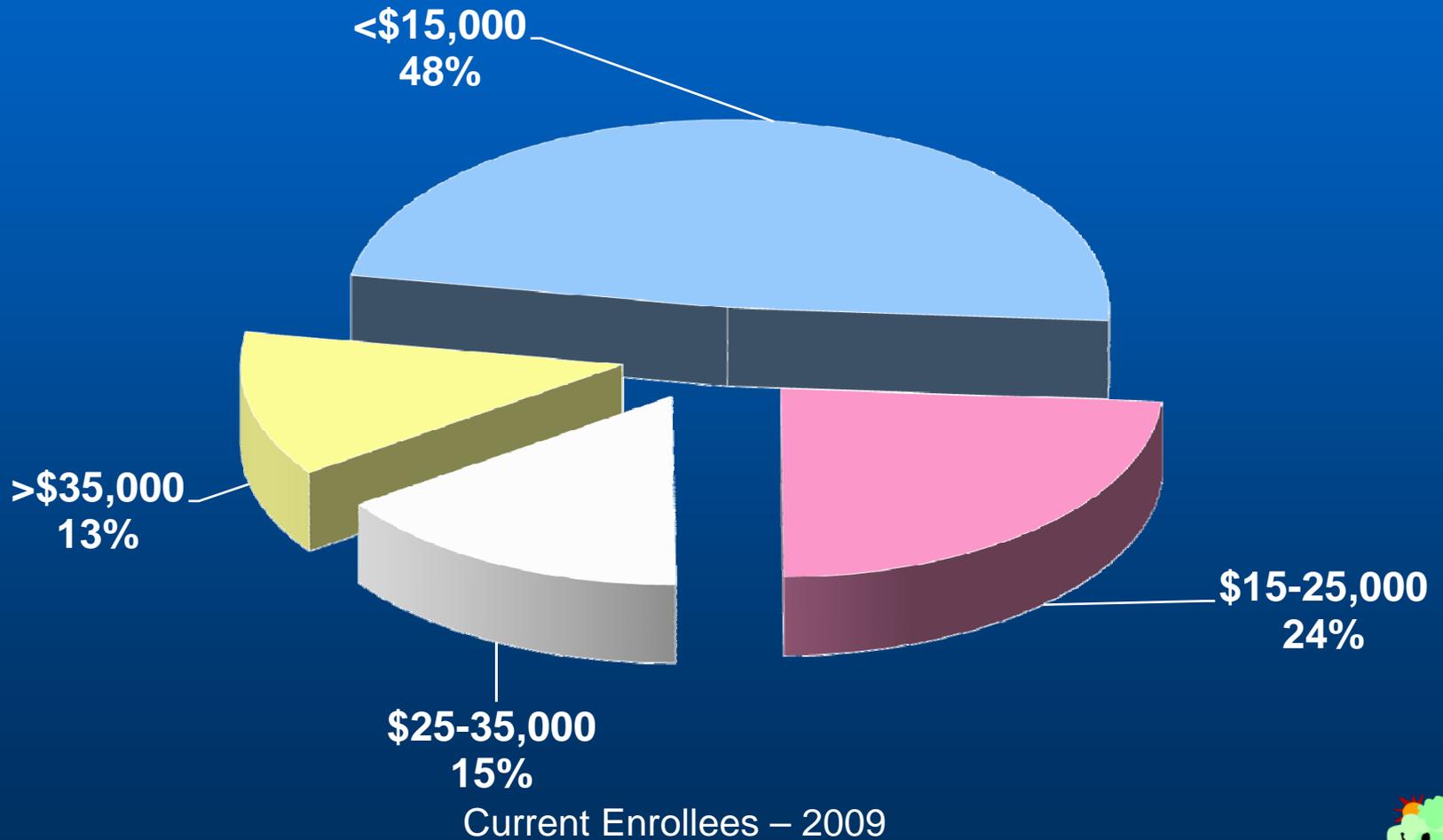
PLACEMENT AT WRAPAROUND ENROLLMENT



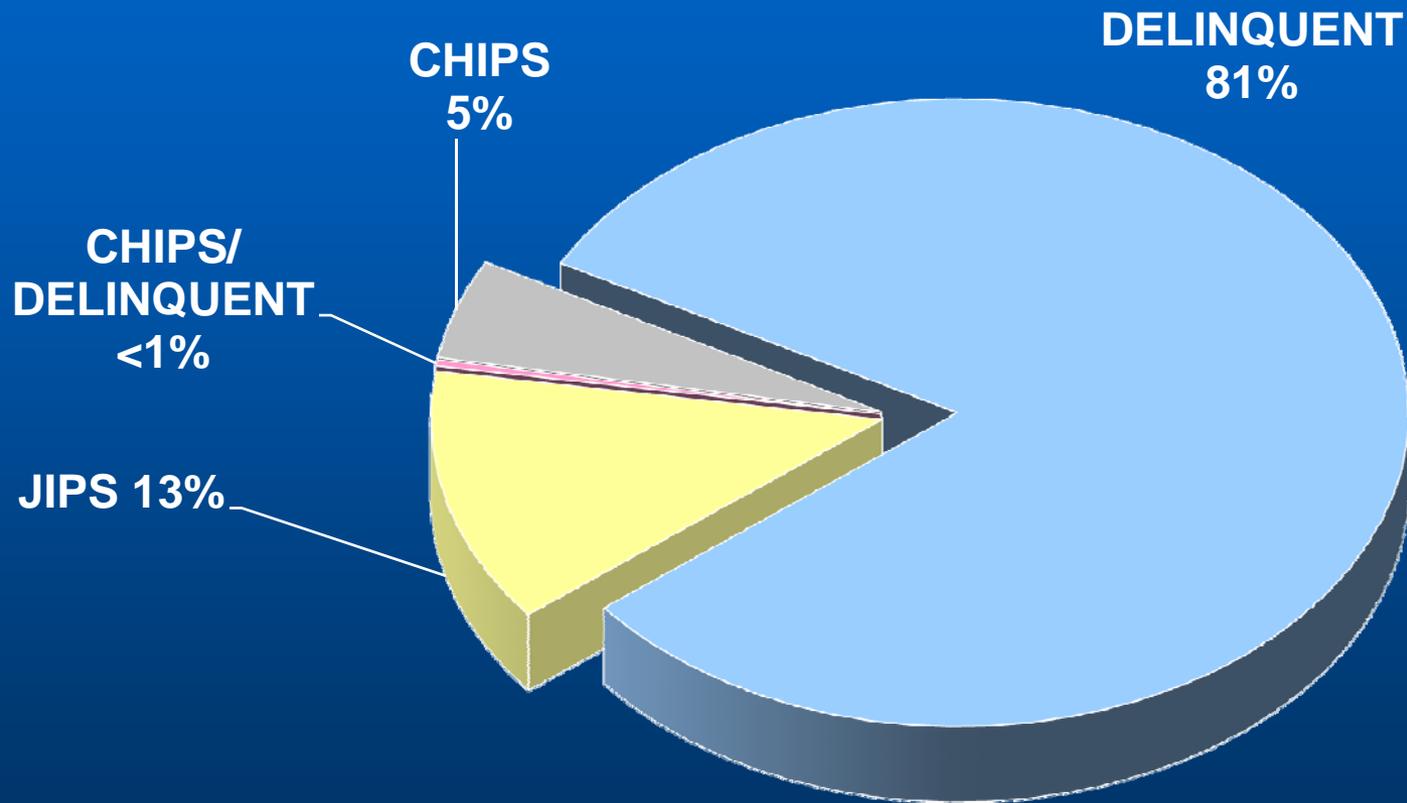
Current Enrollees – 2011



Family Income



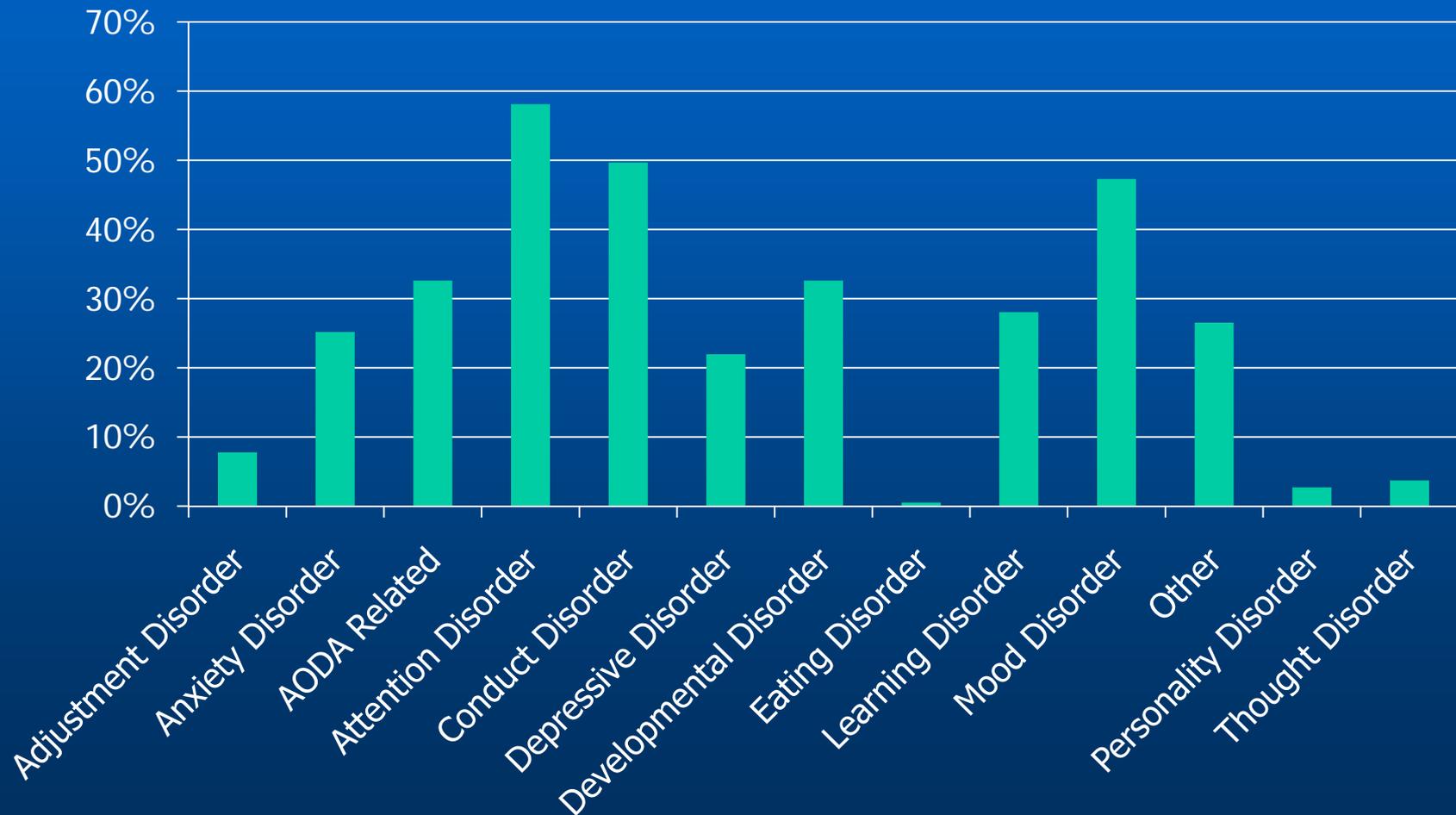
Initial Orders of Court Enrolled Youth



Current Enrollees - 2011



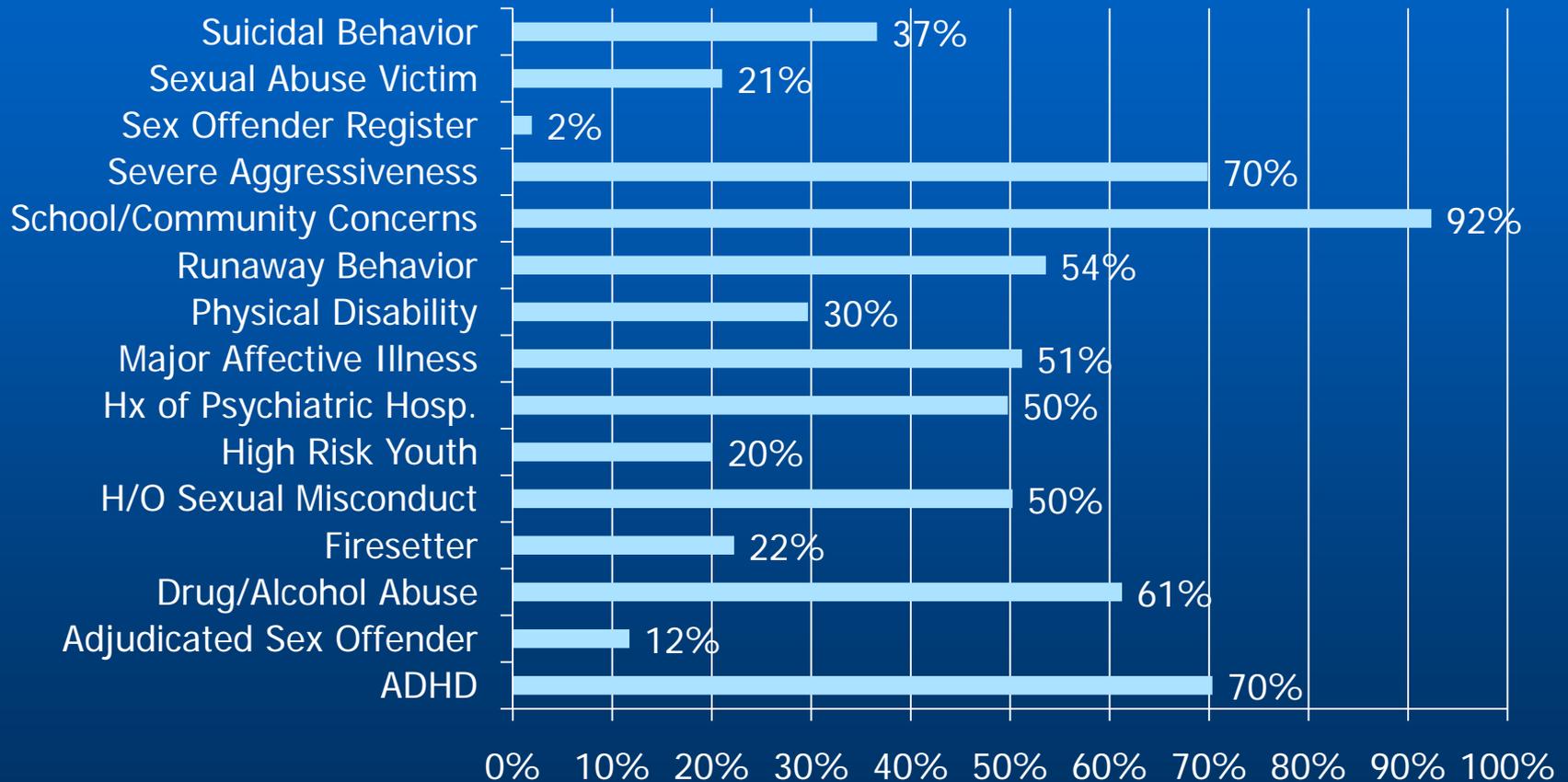
Diagnostic Categories- Wraparound and Reach



Current Enrollees - 2011



Child Issues at Intake

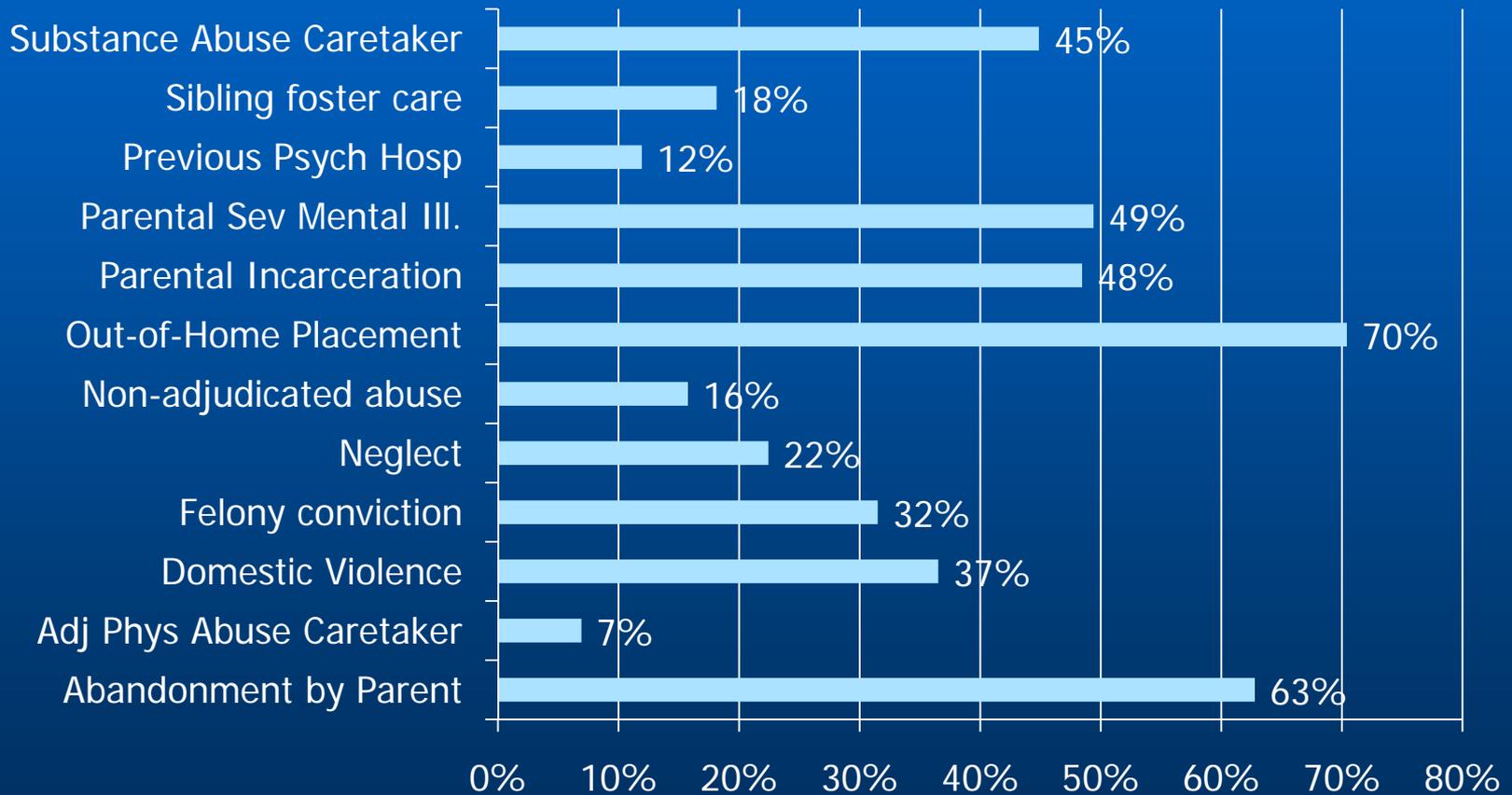


Current Enrollees - 2011

PERCENTAGE WITH ISSUE



Family Issues at Intake



FAMILIES EXHIBITING CONCERNS

Current Enrollees - 2011



Program Outcomes

Utilization of Residential Treatment

- ◆ 33% Reduction
 - May 1996 - 370 Placements
 - Currently - 100 Placements

Psychiatric Hospitalization

- ◆ Yearly Utilization Dropped
 - From 5,000 to 140 Days

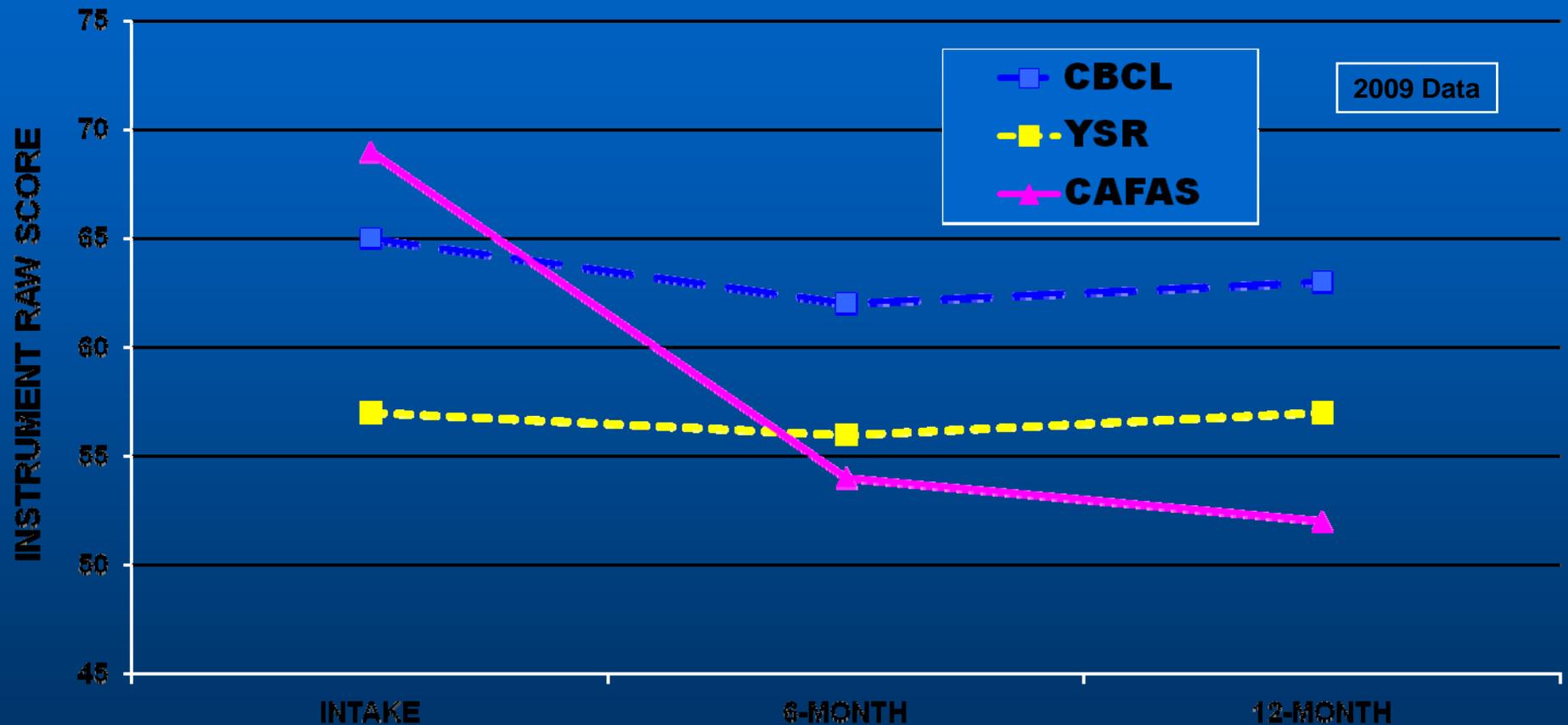


Wraparound Milwaukee Financial Savings Comparison

- ◆ Wrap Average Monthly Cost per Child was \$3,870 per Month
- ◆ \$8,500 per month per Child for Residential Treatment Placement.



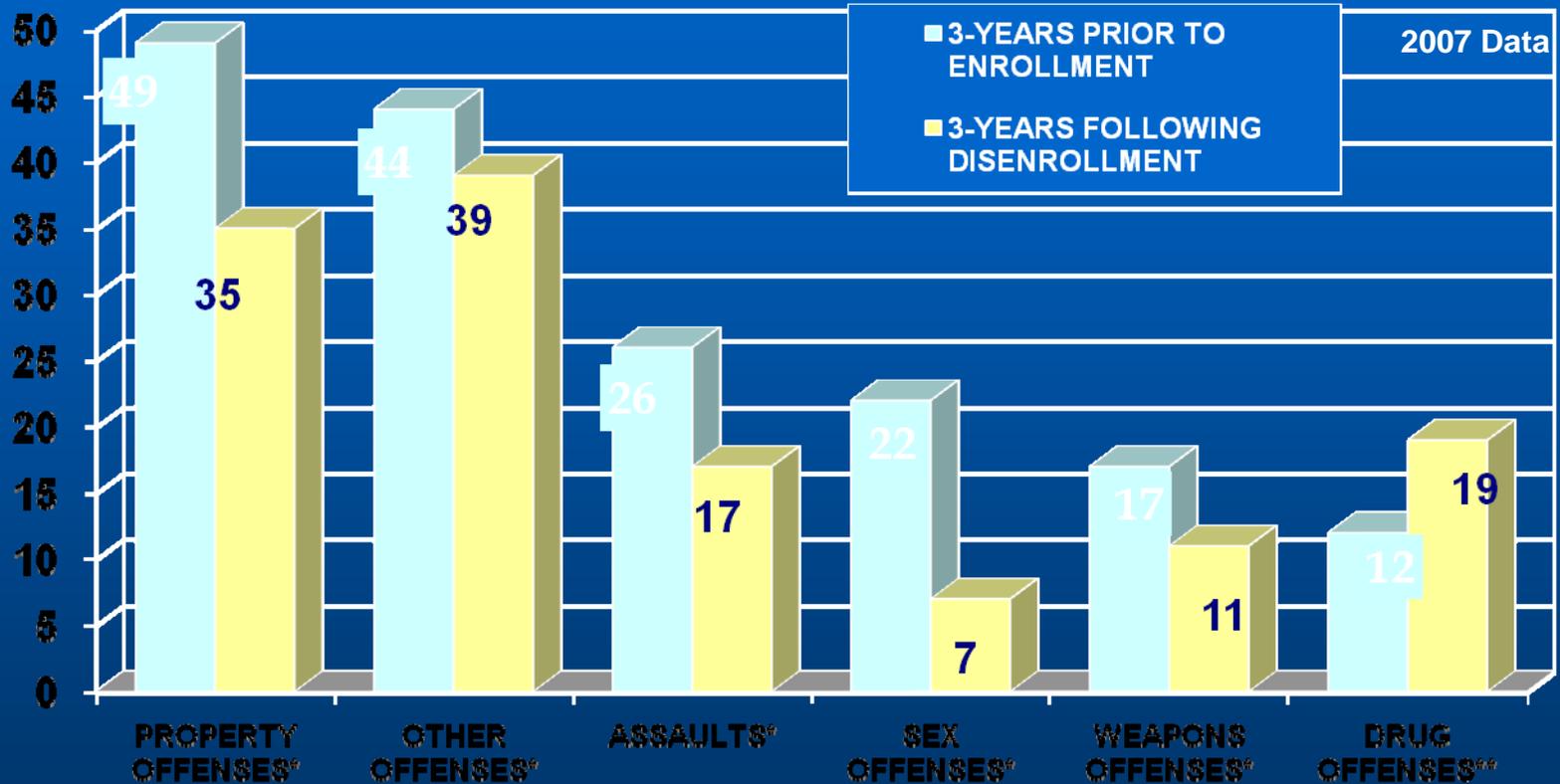
Caregiver, Care Coordinator, & Youth Reported Improvement In Functioning For Clients



Child Behavior Checklist (CBCL), n=159; Youth Self-Report (YSR), n=140; Child & Adolescent Functional Assessment Scale (CAFAS), n=225.



SPECIFIC OFFENSE TYPES THREE YEARS PRIOR TO ENROLLMENT & THREE YEARS FOLLOWING DISENROLLMENT IN WRAPAROUND MILWAUKEE



Other offenses consist primarily of Disorderly Conduct (58%) & Obstructing Justice/Fleeing (29%)

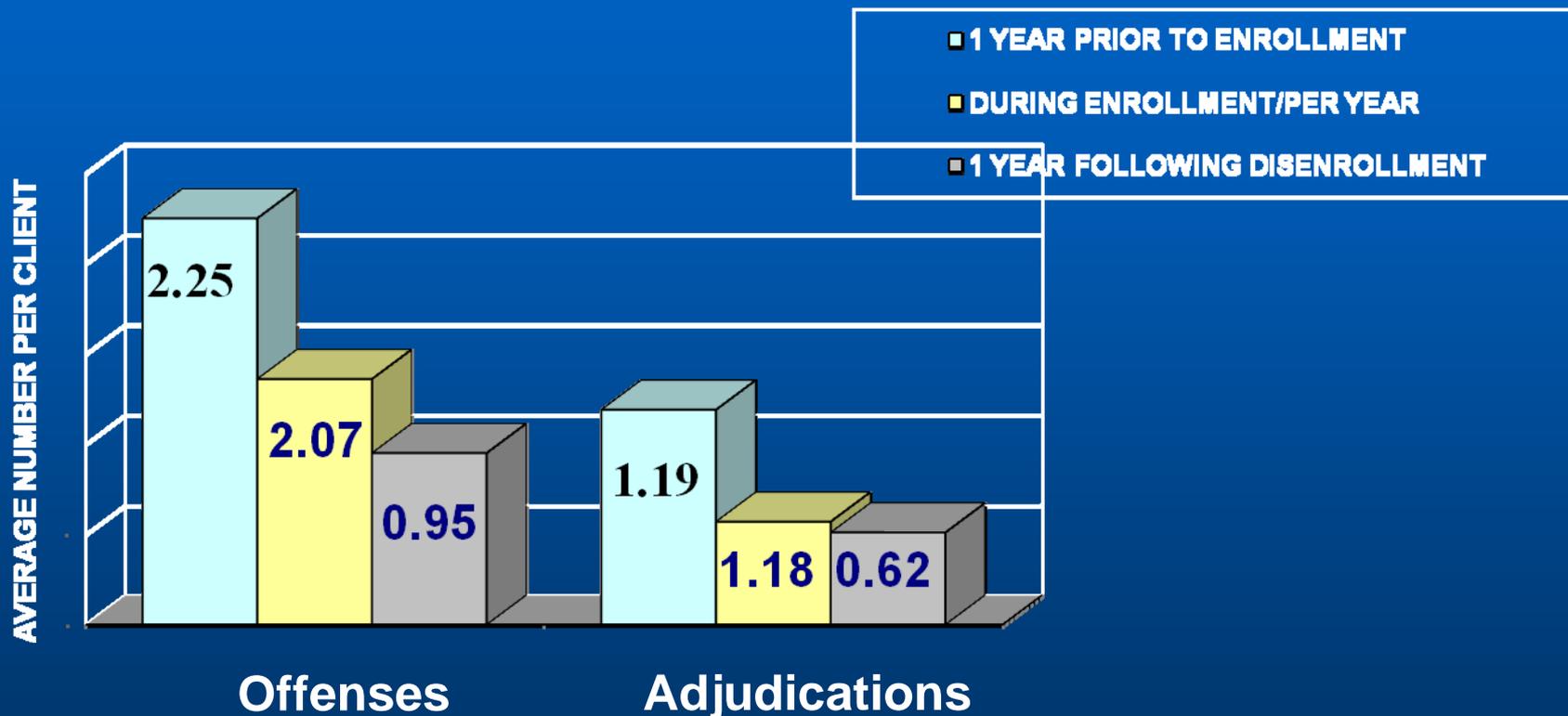
*Reductions are significant at a $p < .01$ level using a Chi-Square comparison.

**Increase is significant at a $p < .01$ level using a Chi-Square comparison.

n = 842



Reduction in Legal Offense Referrals & Adjudications During Enrollment & After Disenrollment for Clients in the Wraparound Milwaukee Program



n=828. Reductions are significant at the $p < .001$ level of significance using a repeated measures analysis of variance.

2007 Data



Families United of Milwaukee



Promoting a Partnership with Families



An Effective Provider...

- ◆ Always Focuses on the Family Strengths
- ◆ Respects the family at all times
- ◆ Provides Translation When Needed
- ◆ Strongly believes each family has the ability to change and grow





An Effective Provider . . .

- ◆ Values the comments and insights of the parent.
- ◆ Actively listen to the parents – they can tell you about their child's total needs and activities.
- ◆ Does not impose their values on how parents should live.
- ◆ Identifies and respects the different values, attitudes and behaviors of families from all racial, ethnic, religious, cultural and geographic backgrounds.



Do . . .



- ◆ Follow through on all commitments made to families.
- ◆ Make appointments and provide services at times & in places that are convenient for the family.
- ◆ Call and explain why if you can't keep an appointment.
- ◆ Honestly and assertively bring perceived problems to the child and family team.
- ◆ Encourage your agency to work in collaboration with families.



Remember To . . .

Families
United



- ◆ Make sure that all providers are working for the family - ONE FAMILY → ONE PLAN – and the families own it.
- ◆ Tell the family about other families in similar situations - respecting confidentiality.
- ◆ In the event of abuse or neglect – do not hesitate to tell the parent that you plan to make a report and explain why.





WHAT WE LEARNED FROM WORKING TOGETHER

IS TO →



Partnering with Families

- ◆ Respecting Each Others View and Ethnic Values
- ◆ Involving Families in All Aspects of the Plan of Care
- ◆ Giving Families the Tools to Become Innovative Partners in the System of Care
- ◆ Listening to Hear What the Families are Truly Saying
- ◆ Developing Family Friendly Practices and Policies Together



About Parents . . .



- ◆ Parents are *THE EXPERTS* on their child.
- ◆ Parents are equal to you and me.
- ◆ Parents are flexible and resilient.
- ◆ Parents have pride - they want help while remaining independent.
- ◆ Parents would like to be respected.
- ◆ Parents want what is best for their family.
- ◆ Parents do not like to be judged or disempowered.
- ◆ Parents do love their children.



Make a Commitment



- ◆ To regard parents with the same respect you prefer the parents give you.
- ◆ Not to hold side-bar conversations without the child and family present.
- ◆ To help promote an agency culture that is supportive and friendly to parents.
- ◆ Stay true to your agency's vision mission.



We all have questions.

There is no easy answer.

Keep being creative.

Take care of yourself.

NEVER GIVE UP!



For More Information Contact:

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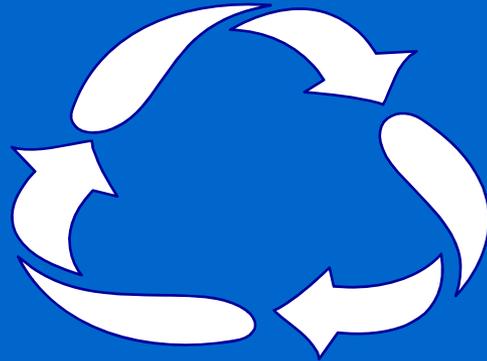
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The point is not to have a system which includes a wraparound option



The point is to have a system based on wraparound values

Value Base

- ◆ Build on Strengths to Meet Needs
- ◆ One Family - One Plan
- ◆ Community-Based Responsiveness
- ◆ Increase Parent Choice and Family Independence
- ◆ Care For Children in Context of Families
- ◆ Never Give Up



Wraparound: A Cluster of Technologies





Operationalizing the Value Base



Build on Strengths

- ◆ Maintaining Strengths Based Conversation and Documentation
- ◆ Listening for Functional Strengths
- ◆ Knowing the Skill of Reframing
- ◆ Listening for Needs Rather than Problems
- ◆ Encouraging Creative Resource Development



Needs Driven

- ◆ Is the team identifying what the families need help with to reach their Vision?
- ◆ Has the team identified barriers to progress?
- ◆ Bad behavior comes from “unmet needs”.
- ◆ Has the team explored underlying needs of challenging behaviors?



One Family - One Plan

- ◆ Individualized - Tailored Care
- ◆ Team Representation Leads to One Plan



Community Based Responsiveness

- ◆ Does the team represent the family's community?
- ◆ Is the team committed to maintaining the child in his or her community?
- ◆ Is the team seeking resources in the family's community?



Increased Parent Choice and Family Independence

- ◆ Family Voice and Choice
- ◆ Walking in Family's Shoes
- ◆ Learning from Satisfaction Surveys
- ◆ Educational Opportunities for Families
- ◆ Planning for Disenrollment from Day One
- ◆ Team Moves Towards 80% Natural Supports



Care for Children in Context of Families

- ◆ Commitment to Family Cohesion
- ◆ Building Natural Supports
- ◆ Prevention of Institutional Placement
- ◆ Permanency for Child is Paramount



Never Give Up Unconditional Care

- ◆ Team Remains Committed
- ◆ Team Remains Creative
- ◆ Team Embraces Conflict
- ◆ Team Engages in Responsible Risk Taking
- ◆ Facilitator Accepts Help from Within and Outside Team



Normalization

- ◆ Family Norms / Family Culture
- ◆ Youth's and Family's Age and Developmental Level
- ◆ Awareness of Stigma
- ◆ Knowledge Regarding Stages of Change



Cultural Competency

- ◆ Agency Diversity, Hiring Practices, Policies and Training
- ◆ Team Membership Reflects Family's Culture
- ◆ Strategies are Based on Family Preference as Well as Functional Strengths
- ◆ Open Dialogue Among Team Members



Refinancing

- ◆ Use of Multiple Resources
- ◆ Creative and Responsible Use of Flex Funds
- ◆ Sustainability



Collaboration

System Integration

- ◆ Are the right parties at the table?
- ◆ Are team members participating?
- ◆ Are team members willing to share responsibilities?
- ◆ Does the facilitator elicit a spirit of volunteerism?
- ◆ Are team members following through?





Is this Collaboration?

Goals are defined by one group,
then shared with another group?



Categorical Approach

- ◆ Assess Problems
- ◆ Look at Services that are Available...
- ◆ Plug Services into the Family



Examples of a Categorical Approach

- ◆ Services reflect what's available and has been tried rather than what's really needed



Wraparound *IS* . . .

~~not a
program
or
a service~~ . . . a process

and an approach.



What is a Child and Family Team

- ◆ A group of people identified by the child and family who will work with the family while they are in the program.
- ◆ Composed of **50% informal and 50% formal** members who will continue to support the family after leaving the program.
- ◆ The Child and Family Team should meet as frequently as needed.



Wraparound Plan of Care Meeting

- ◆ Family Driven Process/Family Always Present
- ◆ Flexible Location & Timing
- ◆ Inclusion of Natural/Informal Supports
- ◆ Strengths/Needs Driven – Not Problems or Deficits Driven
- ◆ Planning Process – Not Just Updating
- ◆ Build on Skills, Creativity and Willingness of Participants



Essential Components of Plan of Care Meetings

- ◆ Crisis Planning
- ◆ Strengths
- ◆ Family Vision
- ◆ Needs
- ◆ Strategies



Crisis Plan

- ◆ Reactive
- ◆ Tied to Body of Plan/Reason for Referral
- ◆ Changes Over Time
- ◆ Creative, Practical and Specific
- ◆ May Change Based on Setting of Child
- ◆ Strategies Listed in Order of Use



Strengths Discovery

- ◆ Ongoing - Changes with Time
- ◆ Functional
- ◆ All Family Members
- ◆ Whole Team
- ◆ Community and Environment
- ◆ Used to Create Strategies



Family Vision

- ◆ Concise
- ◆ In family's words
- ◆ Reflects family's hopes and dreams
- ◆ Where the family wants to be in
6 mo. to a year
- ◆ May change over time



Needs Statements

- ◆ Needs help with . . .
- ◆ What is needed to reach Vision ?
- ◆ Not - Services or Goals
- ◆ Answer to the question - “why”
(underlying need)
- ◆ Don't forget Safety Needs



Strategies

- ◆ Builds on Strengths
- ◆ Designed to Meet Needs
- ◆ Remember “Normalization”
- ◆ Be Creative
- ◆ Use as many Natural Supports as Possible
- ◆ Utilize Whole Team
- ◆ Be Specific ➤ Who -- What -- When -- How
- ◆ Modify in Response to Change or Progress
- ◆ Reflects Service Authorized



Provider Partners: Valued Traits

- ◆ Knows and Values Wraparound Process
- ◆ “Trained Listener”
- ◆ Strength-Focused, Optimistic
- ◆ Understands the Importance of Diversity
- ◆ Understands Child & Family Development
- ◆ Respects Parent Authority/Responsibility



Valued Traits (continued)

- ◆ Flexible Hours, Accessible and Responsive
- ◆ Attends and Participates in Meetings
- ◆ Accepts Own Limitations
- ◆ Seeks Consultation
- ◆ Is There for Meetings
- ◆ Respects Team as Decision-Making Body
- ◆ Doesn't Quit When Program Ends



Lessons Learned:

Important Agency Attributes

- ◆ Culture Represents Wraparound Values and Respect for Families
- ◆ Family Involvement is a High Priority
- ◆ Demonstrates True Collaboration and Partnerships With Community
- ◆ Quality Assurance Measures Based on Wraparound Principles
- ◆ Outcome Oriented
- ◆ Continuous Commitment to the Greater Good



How Can You As A Provider Be Heard?

- ◆ Speak Within Team Process
 - “Nothing About Families Without Families”
- ◆ Conflict Resolution Protocol
- ◆ Complaint Form
- ◆ Positive Recognition Form
- ◆ Get Involved
 - Provider Meetings, Agency Team Meetings, Offer Trainings, Participate on Committees, Host Family Events





WRAPAROUND MILWAUKEE

“ Never doubt that a small group of committed citizens can change the world: indeed, it’s the only thing that ever does.”

Margaret Mead

**For More Information About
Wraparound Milwaukee**

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