Wraparound NH:

What It Is, What It Is Not: Family Teams and Systems Level Supports

New Hampshire Children's Behavioral Health Collaborative
Workforce Development Network
Wraparound Workgroup
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NH Department of Health and Human Services Fast Forward Program Manager

The Context: Systems of Care

"A spectrum of effective, community-based supports, that is organized into a coordinated network, builds meaningful partnerships with families and youth, and addresses their cultural and linguistic needs, in order to help them to succeed at home, in school, in the community, and throughout life" (Stroul & Friedman, 2010)

System of Care Values

- 1. Family driven and youth guided
- 2. Community based
- 3. Culturally and linguistically competent

2010, Beth A. Stroul, M.Ed. Gary M. Blau, Ph.D. Robert M. Friedman, Ph.D. Updating the System of Care Concept and

Family and Youth Driven

The strengths and needs of the child and family determine the types of services and supports provided.

Community Based

The locus of services as well as s<mark>ystem management rest within a supportive, adaptive infrastructure and relationships at the community level.</mark>

Culturally and Linguistically Competent

Agencies, programs, and services reflect the cultural, racial, ethnic, and linguistic differences of the populations they serve to facilitate access to and utilization of appropriate services and supports and to eliminate disparities in care.

Positive Outcomes of System of Care Development and Implementation

- Increased positive social, academic, and behavioral outcomes and community connectedness for children, youth, and families
- Decreased out of home, school, and community placements (and duration of such)
- Increased caregiver capacity, decreased caregiver strain
- Programs and supports that are uniquely tailored to each child and family's culture, strengths, and dreams

(Suter & Bruns, 2009; Bruns & Suter, 2010)

FAST Forward NH Project

- 4-year System of Care project funded by the federal Substance Abuse and Mental Health Services Administration (SAMHSA)
- Goals:
 - Establish family/youth-driven wraparound in NH
 - Establish a funding, policy, and systems administration to support System of Care and wraparound development in NH



FAST Forward- System of Care Service Array

- Enhance and expand traditional service array
- Develop new, non-traditional supports
- Natural, unpaid, community based supports
- All team members commit to developing natural community supports and connections

The NH Division of Children, Youth and Families as the CME

Family/Youth Level: Referrals, eligibility and payment process

- Accepts referrals (Erica Ungarelli and Adele Gallant)
- Screening for eligibility of family, self or school direct referrals when one has not yet been done (using NH CANS) (Erica & Adele)
- Works with referent on Crisis Plan when necessary (Erica & Adele)
- Medicaid payment processing (pa's entered into MMIS): (DCYF Provider Relations)

Care Management Entity (cont.)

DCYF as CME

System Level:

- Develops provider network to provide SOC service array with Managed Care Organizations (MCOs) – utilizing current DCYF/Bureau of Behavioral Health (BBH) providers (Adele and Erica, DCYF provider Relations and BBH)
- Works at developing private insurance network (DCYF Fiscal Specialists)
- Develops/joins regional teams to assess capacity and barriers and community partnership –(Adele/Family Organizations)
- Service utilization management, Quality improvement, Information technology-web based system. (Adele, Erica and DCYF's data and evaluation groups)
- Manages the contracts and supervises with Fast Forward Coordinators

FAST Forward Eligibility and Referral

- Eligibility:
 - Child or youth, ages 8 to adult transition age
 - Meets state eligibility criteria for Serious Emotional Disturbance (SED)- multiagencycategory
 - At risk for out of home placement
 - Enrolled in NH Medicaid program

Contact: Adele Gallant, 603-271-4371

The Wraparound NH Model

Wraparound brings families together with supportive teams to plan and deliver supports and services that build on family-identified strengths and needs, to help families live together safely and productively in the community.

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What is Wraparound?

- Wraparound is a solution-focused process that is family and youth driven.
- Wraparound connects families to supports and services in their communities, and always includes a mix of public, private, and natural supports.
- Wraparound includes access to family/youth peer support.
- Wraparound is a process that respects families' culture and values.
- Wraparound is led by a *trained* facilitator.

Wraparound Is Not:

- A specific set of services offered
- A typical team meeting
- Any meeting held without family or youth
- An immediate or quick solution
- A crisis intervention or response
- A standing interagency team

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FAST Forward Coordinators

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FAST Forward NH Project Roles:

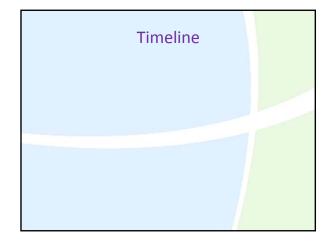
Wraparound NH Coordinators in the Fast Forward Project (2012-2016):

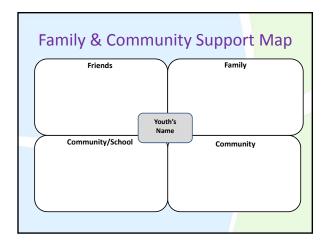
 Works with families to establish wraparound teams, hold initial meetings with families, facilitates wraparound meetings and performs care coordination, facilitates referrals to other supports and services, develop crisis plans, facilitates the development of the family's vision and plan of care, collaborates with Family and Community Support Specialists, collects data and completes required documentation.

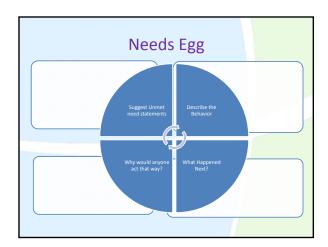
A Phases of Wraparound Hello: Initial contacts of welcoming and setting the stage for "engaged enough" Help: Agreeing on, providing and delivering a range of interventions, services & supports Healing: Modifying initial helping activities to produce family report of healing Hope: Future oriented activities designed to sustain family experience of hope

Phase 1: "Hello"

- Involves a sense of being welcomed which sets the stage for enduring equal partnership-
- Hello conveys the experience of being greeted and appreciated that families deserve to feel as they enter Wraparound.
- Provides comfort while quickly gathering enough information to assemble a helping response on the foundation of the initial greeting.







Phase 2: "Help"

- Families are usually more interested in getting help than in a completed plan.
- Build a team, identify team member strengths and roles, decide what to work on, develop strategies.
- A Child and Family Team is not the intervention but is the way that decisions get made about the range of interventions.

- Blend multiple perspectives
- Plan of Care
- Benchmarking, evaluating, and monitoring progress
- Continuous Engagement Activities
- Brainstorming- at least 10 ways to meet each prioritized need
- Empower to action
- Establish and adjust safety plan
- Review progress towards the family's vision

Phase 3: "Healing"

Healing is the restoration of the family's sense
of health and wholeness, as they take charge
of identifying, accessing, and utilizing the
supports and services they need.

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Activities at Healing

- Check commitments and follow through
- Assess information about benchmarks
- Rate progress towards family's vision
- Establish wellness plan
- Identify new strategies
- Review and adjust safety plan

Phase 4: "Hope"

- Hope begins to happen when the family's underlying needs are being met and the family's vision is realized.
- When the right supports are in place, transition planning and commencement happen.

Activities at Hope

- Identify contingency plans, ways to "come back"
- Create a transition portfolio
- Define hopes and dreams for life "after Wrap"
- Identify supports and resources beyond Wraparound Planning Process tenure
- "What if" drills

		
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Laurie Foster

Family & Community Support Specialist
NAMI NH

Roles of Family and Community Support Specialists

- Brings "lived" experience to the team
- Coaches and empowers the family to find their own voice in the process
- Provides resource information and connects the family with support activities
- Ensures the family's culture is respected
- Helps family identify strengths and natural supports

Onami New Hampshire

F.A.S.T. Forward Expand "Family to Family" Support, Education and Leadership Training

> + 1:1 Support-Wraparound + PMC Family Education Program + Family Leadership Training

Identify, recruit and provide on-going technical assistance to family leaders serving on a wide range of activities on the local, state and national levels.

Maureen Gross

FAST Forward Coach
UNH/Institute on Disabilities

Role of the Coach in Wraparound

>Modeling, communicating, teaching, and providing feedback to Facilitators to ensure high quality practice that adheres to the model.

>Guide Facilitators to adapt Wraparound to different contexts.

>Use data (process; outcomes, fidelity) to guide process

>Problem solving around implementation issues.

> Education, outreach, and relationship building with internal and external stakeholders

What Does It Take to Coach Wraparound?

Knowledge of the Wraparound Model

Interactive Abilities with Staff

Ability to Individually Troubleshoot

Innovation and Adaptation Skills

Activities in Coaching

Regular Individual Coaching Sessions with FF Coordinators

Individual Coaching as needed

Small Group Coaching Sessions

Attend Team Meetings

Review Videotapes of Team Meetings

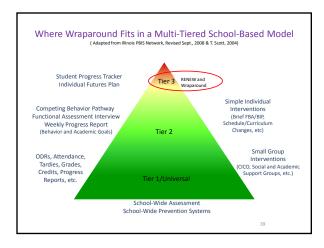
Some Tools for Coaching

NH Wraparound Facilitator Review Form

Plan of Care Review Form

Wraparound Facilitators Competencies Checklist

Review of Evaluation Tools



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		Tiers 2, 3, & i Feams (Wrapa	ndividualized
	Toutil	icams (wrapa	around)
		Student Teams	
	Tier 2	Tier 3	Tier 3 Wraparound
	Small behavior planning team reviewing students who need more than Tier 1 interventions	administrator, teacher, behavioral staff member,	Student and family identify team members which may include peers and professionals outside of school
		etc.)	
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		Questions?	