March 2014

To Whom It May Concern:

One of Oregon’s goals is to have a System of Care and a Wraparound planning process in all communities by 2015. House Bill 2144 created the Statewide Children’s Wraparound Initiative (SCWI) in 2009. SCWI helps bring Wraparound to communities in Oregon to serve youth and families with complex needs. Through SCWI, three Wraparound demonstration sites were created.

The 2013 Legislature allocated additional general fund dollars to further support the expansion of System of Care infrastructure and Wraparound. Today, 13 Coordinated Care Organizations (CCO) are funded to provide Wraparound allowing SCWI to reach nearly all regions across the state.

The Oregon best practice guidelines are intended to be an example of what is known to be effective and to create a benchmark for the implementation of Wraparound across the state. It is a cumulative result of lessons learned from Oregon Wraparound demonstration sites, the National Wraparound Initiative and national research.

The best practice guidelines aim to promote better health and better care at a lower cost. Specifically:

- Promote high quality care for youth and families served by the Statewide Children’s Wraparound Initiative
- Promote consistent care throughout all regions of Oregon implementing Wraparound
- Promote meaningful partnerships with systems, youth and families
- Promote standards for communities in Oregon to assess their progress in implementing Wraparound

Best practice intended outcomes:

- A consistent understanding of Wraparound and Systems of Care in Oregon.
- A common language and terminology for Oregon’s Wraparound process.
• A structure for communities to assess progress toward the development of best practices.
• Focus areas of training, coaching, workforce development and technical assistance for communities in Oregon.

Through collaboration across youth, families, CCOs, Oregon Health Authority –Addictions and Mental Health, Portland State University, Oregon Family Support Network, Youth M.O.V.E., Oregon Communities, providers, stakeholders, and all child serving systems, Oregon is well on the way to meeting the 2015 goal.

Thank you to all who work so hard for this vision for Oregon’s youth and families.

Sincerely,

Pamela A. Martin, Ph.D., ABPP
Director
AL/Im
A few years ago, I had the opportunity to work with Wraparound Oregon Early Childhood, in Multnomah County. Part of the work I was involved in included the coordination and oversight of a Family Advisory Council.

Six months into the project, we were fortunate enough to have the Co-Directors of the National Wraparound Initiative – Janet Walker, PhD – Portland State University and Eric Bruns, PhD – University of Washington present a training to the Family Advisory Council on High Quality Wraparound Child and Family Teams.

The main idea behind the training was to educate families around the notion of “how you know high quality wraparound practice when you see it.” Part way through the presentation I could see the eyes of several family members ‘light up’ in the way one does when they realize they finally understood something at a deeper level than they had before.

Later that evening, a young mom named Caroline came up to me and said, “All this time, I thought I was getting wraparound services, however just realized that I didn’t really feel supported when the professionals sitting on my team insisted on their thoughts and ideas about what we needed as a family. Tonight, I realized that this wasn’t what wraparound was about.”

That was a profound moment for me.

Often times, we come together with families, engage in the wraparound process, do our best to follow the phases and the steps along the way – get that strengths and culture discovery done, make sure everyone is at the table-especially those who can be there to support the family. These are all very good and important things to do.

However, at the end of the day when families feel we have done something incredibly different – recognized their knowledge and strength, believed in their ability to change, respected and honored their cultural values, joined them in their journey, and assisted them with their ‘real’ needs - then we have done the best job one can ask for.

The Wraparound Best Practices Guide provides clear and concise definitions and core elements involved in each wraparound activity, which drives consistent practice.
The end result – each and every child, youth, young adult and family that receives wraparound in the state of Oregon has the opportunity to receive something that looks consistent regardless of where they live.

That is one of the greatest gifts we can offer Oregon’s youth and families.

Sincerely,

Sandy Bumpus, Executive Director

Oregon Family Support Network
ACKNOWLEDGEMENTS

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School of Social Work, Center for Improvement of Child & Family Services
Systems of Care Institute
# TABLE OF CONTENTS

## SECTION 1: LEADERSHIP AND ADMINISTRATIVE OVERSIGHT

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role of Systems of Care</td>
<td>9</td>
</tr>
<tr>
<td>Governance Structure</td>
<td>9</td>
</tr>
<tr>
<td>Funding</td>
<td>9</td>
</tr>
<tr>
<td>Supervision and Coaching</td>
<td>10</td>
</tr>
<tr>
<td>Service Array</td>
<td>10</td>
</tr>
<tr>
<td>Social Marketing</td>
<td>10</td>
</tr>
<tr>
<td>Utilization Review</td>
<td>11</td>
</tr>
<tr>
<td>Qualifications</td>
<td>11</td>
</tr>
<tr>
<td>Eligibility Criteria</td>
<td>12</td>
</tr>
</tbody>
</table>

## SECTION 2: ROLES AND TERMINOLOGY

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roles</td>
<td>12</td>
</tr>
<tr>
<td>Terminology</td>
<td>14</td>
</tr>
<tr>
<td>Planning Elements</td>
<td>15</td>
</tr>
<tr>
<td>Services &amp; Supports</td>
<td>16</td>
</tr>
<tr>
<td>Phases</td>
<td>16</td>
</tr>
</tbody>
</table>

## SECTION 3: TEAM FUNCTIONING AND FACILITATION OF WRAPAROUND

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Approach</td>
<td>17</td>
</tr>
<tr>
<td>Wraparound Team Meeting Facilitation Components</td>
<td>17</td>
</tr>
<tr>
<td>Facilitation Process</td>
<td>17</td>
</tr>
<tr>
<td>Transition</td>
<td>20</td>
</tr>
<tr>
<td>Principles Evidenced in Practice</td>
<td>21</td>
</tr>
</tbody>
</table>
Required Documentation 21
Plan of Care Elements 21
Strengths and Needs Assessment Domains 22
Timelines 22

SECTION 4: QUALITY, FIDELITY AND EVALUATION

Outcomes 22
Training and Workforce Development 23
Capacity 24

SECTION 5: DOCUMENTS AND TOOLS

Ten Wraparound Principles
Ten Wraparound Principles: Family Partner
Four Phases & Activities of the Wraparound Process
Four Phases & Activities of the Wraparound Process: Family Partner
SECTION 1: LEADERSHIP AND ADMINISTRATIVE OVERSIGHT

ROLE OF SYSTEMS OF CARE

The Wraparound process must occur within a local Systems of Care framework, including:

- **Community partnerships:** A multi-level cross-system governance structure (see Governance Structure below) that addresses barriers to the Wraparound process.
- **Collaborative action:** Formalized partnerships between families, youth, systems, providers and community stakeholders.
- **Fiscal Policies and Sustainability:** Creative funding structures (see Funding below).
- **Access to needed supports and services:** Access to Wraparound and the services and supports to implement a comprehensive plan.
- **Accountability:** Implementation of mechanism to monitor Wraparound fidelity, service quality and outcomes.

GOVERNANCE STRUCTURE

- Membership at all levels of Governance shall be 51% family and youth.
- Families and youth are included in all phases – design, implementation, and oversight of policies, programs, evaluation, including outcome measures, etc.
- Meetings will be held at times to ensure meaningful family and youth participation.
- Supports for meaningful family and youth involvement (childcare, mileage, stipends, etc.) are made available as needed.

FUNDING

- Services are funded from a blended funding pool across children’s Systems of Care including Child Welfare, Juvenile Justice, Developmental Disabilities, Mental Health, Education, and others.
- Reduction of administrative burden is to be achieved through case rate (bundled payment) contracts with providers, encouraging the right service at the right time on an individualized basis.
- Case rates are based on realistic estimates of cost and utilization of the covered services that are to be available on a daily, weekly or monthly rate basis.
• Flexible funding should be available to support and purchase a range of options for and with the family.
• There is both a limited reliance on any one single funding stream and limited over management of flexible funds.

SUPERVISION AND COACHING

• Family Partners will receive both clinical and peer supervision.
• Youth Partners will receive both clinical and peer supervision.
• Care Coordinators will receive consultation from a qualified Wraparound Coach (see Section 3) who may or may not be the clinical or organizational supervisor.
• Supervision and coaching will include a well-defined approach that is clearly linked to the State of Oregon, Portland State University and the materials of the National Wraparound Initiative.

SUPPORTS & SERVICES

• Youth and families participating in fidelity Wraparound will have access to a wide array of services to support their specifically identified needs.
• Services will be strengths based, family and youth driven, community based, and culturally & linguistically competent.
• Service array will include formal, informal and natural supports and will be offered in a variety of settings (office based, community, etc.).
• For each need, youth and families will be given multiple options for services and supports including natural supports whenever possible.
• Wraparound teams will have access to flex funds to pay for supports that meet a family’s identified need that are not traditionally funded through the service array within the system of care.
• Youth and families will have timely access to quality, promising approaches and evidence-based practices.

SOCIAL MARKETING AND INFORMATION FOR FAMILIES AND YOUTH

• Families and youth shall be given written documents that give comprehensive information related to Wraparound in their particular county/region.
UTILIZATION REVIEW

The utilization review process must occur at the Child & Family Treatment Team level with accountability at the Supervisor/Coach level. Utilization review shall not occur separate from the Wraparound team process.

QUALIFICATIONS

Family Partner for Wraparound will have the following qualifications:

- Must be the biological or adoptive parent – or kin or other “forever” person in the parent role – who has been the primary caregiver of a child with emotional or behavioral challenges.
- Must have lived experience navigating the mental/behavioral health, child welfare, or juvenile justice system with their child.
- Must be willing to use their own lived experiences to provide hope and peer support to other families experiencing similar challenges.
- Must be committed to ensuring that other parents have a voice in their child’s care and are active participants in the Wraparound process.
- Must be able to engage and collaborate with people from diverse backgrounds.
- Must be able to maintain a non-judgmental attitude towards families and professionals.
- Experience in Wraparound is preferred but not required

Youth Partner in Wraparound will have the following qualifications:

- Able to articulate the perspective of a youth who has experienced complex needs and has received services from the mental health, child welfare or juvenile probation systems.
- This ability is typically acquired from having personally received intensive mental health, child welfare or probation services (e.g. special education, psychiatric hospitalization, residential treatment, juvenile probation or foster care placement) and is required.
- Demonstrated leadership experience is required. Basic computer word processing skills are required. Diplomacy in resolving conflicts and integrating divergent perspectives is required.
- Preferred Qualifications: Experience in facilitating youth groups or leading youth activities is preferred.

Wraparound Care Coordinator for Wraparound will have the following qualifications:
- Site specific: Examples available upon request.

**ELIGIBILITY CRITERIA**

This approach is designed for children and youth who have complex emotional, behavioral and social needs who typically require care coordination across two or more child-serving systems. Site specific.

**SECTION 2: ROLES AND TERMINOLOGY**

**ROLES**

The following terminology should be used to describe the roles for Wraparound in the state of Oregon:

**Family** – People who are committed, “forever” individuals in the identified youth’s life with whom the youth also recognizes as family; a family is defined by its members, and each family defines itself.

**Parent** – Can be biological and/or adoptive. If this is not applicable or unclear, the youth should identify whom they consider to be their parent.

**Caregiver** – A family member or paid helper who provides direct care for the identified youth.

**Youth** – The statewide-accepted term to describe children, adolescents, teenagers, and young adults.

**Wraparound Care Coordinator** – One who has completed, or is completing, the requirements outlined in Section 3 of this document. A formal member of the Wraparound team who is specially trained to coordinate and facilitate the Wraparound process for an individual family. This person is called a Wraparound Care Coordinator. The person in this role may change over time, depending on what the family thinks works best. For example, a parent, caregiver, youth or other team member may take over facilitating CFT meetings after a period of time and experience.

**Family Partner** – a formal member of the Wraparound team whose role is to support the family and help them engage and actively participate on the team and make informed decisions that drive the Wraparound process.
**Youth Partner** – a formal member of the Wraparound team whose role is to support the youth and help them engage, actively participate on the team and make informed decisions that drive the Wraparound process. The role of youth partner is fairly new to Wraparound and has been very well received. What family partners do for adult family members, youth partners do for youth. Many youth partners needed or have received services like those found in Wraparound. Others have participated in plans for their brothers, sisters, or parents. Their personal experience helps them understand how to effectively reach out to young people. They serve as mentors and coaches. Like family partners, they are flexible and fill whatever role is needed.

**Supervisor** – an individual responsible for supervising a Wraparound Care Coordinator, Family Partner or Youth Partner through their respected agency, who fully understands their respected agency’s policies, procedures and mandates. Supervisors also participate in Wraparound trainings.

**Wraparound Coach** -- someone with Wraparound expertise (who may or may not be the actual supervisor) that has a specific and intentional focus on supporting Wraparound Care Coordinators to further develop their practice skills. Wraparound Coaches help Wraparound Care Coordinators to develop skills in relation to values and principles, as well as their understanding about how skilled practice is connected to positive change for youth and families.

**Peer Coach** -- someone with Youth or Family Partner expertise (who may or may not be the actual supervisor) that has a specific and intentional focus on supporting Youth or Family Partners to further develop their practice skills, as well as their understanding about how skilled practice is connected to the Wraparound principles, and how skilled practice ensures youth and family gain voice and choice in their lives.

**Child & Family Team (CFT)** - A group of people – chosen with the family and connected to them through natural, community, and formal support
relationships – who develop and implement the family’s plan, address unmet needs, and work toward the family’s vision and team mission.

**Family Organization** – a family run and family led grass roots, non-profit community organization providing connection, empowerment and education to families and their communities to assure improved outcomes for youth experiencing significant behavioral health challenges. Family Organizations fulfill a significant role in facilitating family voice in local, state and national policy making.

**Youth Organization** – a youth-led non-profit organization dedicated to improving the services and systems that foster and promote positive growth of youth and young adults. By utilizing peer support and uniting the voices of individuals who have experienced obstacles in child-serving systems, Youth Organizations ensure that youth voices are represented at all levels of policy and practice.

**TERMINOLOGY**

The following terminology should be used to describe processes and documents for Wraparound in the state of Oregon:

**Strengths and Needs Assessment** – a comprehensive strengths discovery and needs assessment process that begins the day the youth and their family are referred into Wraparound. The Assessment involves reviewing initial documentation, spending time with the youth and their family, interviewing current formal and natural supports and considering ALL life domains. The Child and Adolescent Need and Strengths Assessment (definition below) is the assessment tool that compliments this process.

**Child and Adolescent Needs and Strengths Assessment (CANS)** - a multi-purpose tool developed for children’s services to support decision making, including level of care and service planning, to facilitate quality improvement initiatives, and to allow for the monitoring of outcomes of services. It was developed from a communication perspective so as to facilitate the linkage between the assessment process and the design of individualized service plans, including the application of evidence-based practices. More information at: www.praedfoundation.org

**Crisis & Safety Plan** – A family friendly, one to two page document that the Wraparound team creates to address potential crises that could occur for the youth and their family and to ensure everyone’s safety. It should include 24/7 response, formal and natural supports, respite/back-up care, details of what leads to crises, successful strategies that have worked in the past, as well as strengths-based strategies that prevent and avoid escalation toward a crises.
Wraparound Plan of Care – A dynamic document that describes the family, the team, and the work to be undertaken to meet the family’s needs, achieve the team mission and work toward the family’s long-term vision. Additional specifics are included below in the section titled Planning Elements and in Section 3: Plan of Care Elements.

Child & Family Team Meeting Summary (CFT Summary) – A document that captures the details of a child and family team meeting including a list of team members present, new strengths and needs, refer to changes made in the Wraparound Plan of Care, newly assigned action items and next team meeting date and time.

Progress Notes – Documentation that captures details of the daily contact (in person and/or by phone) on behalf of an individual youth involved in Wraparound. Progress notes should be tied to outcomes and/or strategies in the team plan of care.

PLANNING ELEMENTS

Family Vision – A statement constructed with only the youth and family’s voice that describes how they wish things to be in the future (including long-term goals, hopes and dreams), individually and as a family.

Team Mission – A brief statement crafted by the Wraparound team that provides a description of what the team needs to accomplish while they are together. The Team Mission also describes how the team will know when the formal Wraparound process has been achieved. Mission statements are written as if they are true today.

Strengths – the capacity or potential for effective action. They are a source of power and the ability to resist stress or strain. Strengths are pathways to solutions and ultimately resolve concerns.

Needs - Anything that is necessary, but lacking. A need is a condition requiring relief and something required or wanted. Needs are not considered services.

Outcomes - Youth, family and/or team goals stated in a way that can be observed and measured as indicators of progress related to addressing an identified need. Reflects the team’s desired end result.

Strategies – Ideas, plans and/or methods for achieving the desired outcome. When coming up with strategies in the Wraparound process, a brainstorming process is applied.

Interventions – Methods, processes, services or resources used to influence a positive step toward an agreed upon outcome.

Action Steps - Statements in a Wraparound plan that describe specific activities that will be undertaken to support the interventions, including who will do them and within what time frame.
SERVICES & SUPPORTS

**Flex Funds (Discretionary Funds)** – are funds utilized to purchase any variety of one-time or occasional goods or services needed for the youth and/or their family, when the goods or services cannot be purchased by any other funding source, and the service or good is directly tied to meeting an outcome and need.

**Formal supports** - Services and supports provided by individuals who are “paid to provide care or paid to support” under a structure of requirements for which there is oversight by state or federal agencies, national professional associations, or the general public arena.

**Informal supports** – Supports provided by individuals or organizations through citizenship and work on a volunteer basis under a structure of certain qualifications, training and oversight.

**Natural Supports** – Individual or organizations in the family’s own community, social, cultural or spiritual networks, such as friends, extended family members, ministers, neighbors, and so forth.

**Peer delivered services** -- an array of agency or community based services and supports provided by peers, and peer support specialists, to individuals or family members with similar lived experience that are designed to support the needs of individuals and families as applicable.

PHASES

**Engagement & Team Preparation** – Family meets Wraparound Care Coordinator, Youth Partner and Family Partner. Together they explore the family’s strengths, needs and culture. They talk about what has worked in the past, and what to expect from the process. Wraparound Care Coordinator engages other team members, and prepares for first meeting.

**Initial Plan Development** - Team members learn about the family’s strengths, needs, and vision for the future. Team creates a team mission, decides what to work on, how the work will be accomplished, and who is responsible for what. A plan is developed to manage crises that may occur.

**Plan Implementation** - Family and Team members meet regularly. Team reviews accomplishments and progress toward goals, and makes adjustments. Family and team members work together to implement the plan.

**Transition** - As the team nears its goals, preparations are made for the family to transition out of formal Wraparound. Family and team decide how family will continue to get support when needed, and how Wraparound can be “re-started” if necessary.
SECTION 3:  
TEAM FUNCTIONING AND FACILITATION OF WRAPAROUND

THE APPROACH

The Wraparound approach in the state of Oregon will strive toward implementing Wraparound to fidelity by adopting the National Wraparound Initiative processes and documents and Oregon Wraparound: Best Practices Guidelines.

The Wraparound approach will be:

1. Driven by families and youth
2. Culturally and linguistically responsive
3. Grounded in the strengths perspective
4. Guided by outcomes and accountability
5. Collaborative
6. Community Based

WRAPAROUND TEAM MEETING FACILITATION COMPONENTS AND TEAM STRUCTURE

Each team meeting must include the following facilitation components:

- A family member or youth must be present for a Wraparound meeting to occur.
- Wraparound team meetings are held at times and locations to ensure meaningful participation of family members, youth and natural supports.

A Family and/or Youth partner will be made available to all families.

FACILITATION PROCESS

FACILITATE INTRODUCTIONS AND REVIEW AGENDA:

- Allow the youth and family to introduce themselves first. Consider having other team members include their role (formal supports) or how they known the family (informal/natural supports).
• Bring a copy of a written agenda for everyone or write it on easel paper for everyone to see. At minimum, the agenda should be an outline of the facilitation components listed here so that everyone can begin to learn the process.

SET GROUND RULES OR REVIEW GROUND RULES

• A discussion and agreement about ground rules to refer to during difficult times should take place at the first meeting.
• “Ground Rules” is not a common term and may need to be explained.
• Examples include: cell phone ringer off, one person talks at a time, use respectful language when talking about concerns and needs, be on time, etc.

REVIEW THE FAMILY VISION STATEMENT

• The Wraparound Care Coordinator, Youth Partner and Family Partner should talk with the family about their vision before the first team meeting and help them express this vision to the rest of the team.
• The language used by the family should be preserved in the final vision statement.
• Avoid letting team members add to the family vision but they may need clarification.
• If the vision statement is constructed at the team meeting, consider recording major themes and edit final statement at a later time.
• All team members should be given a written copy of the final vision statement and it shall be reviewed by the team regularly.

CONSTRUCT A TEAM MISSION STATEMENT OR REVIEW TEAM MISSION

• The team should formulate a mission statement that is focused on what they need to accomplish during their time together and how they will know when they are done.
• All team members should add to the mission statement.
• Consider recording major themes and edit final statement at a later time.
• All team members should be given a written copy of the final mission statement and it shall be reviewed by the team regularly.

DEVELOP A LIST OF STRENGTHS AND REVIEW STRENGTHS

• The Wraparound Care Coordinator, Youth Partner and Family Partner should talk with the family about their strengths prior to the first team meeting and help them list their strengths for the team.
• The youth and family should list their strengths first and then all team members should add to these strengths.
• Maintain a written list and add to these at each team meeting. After the first team meeting, the list should include strengths and successes.

• At the first team meeting, members may focus on descriptive and contextual strengths. As the team gets to know each other, help them formulate functional strengths to use in the Wraparound Plan of Care.

• Avoid going back-forth between strengths and needs. Finish the strengths list before moving on.

DEVELOP A LIST OF NEEDS OR REVIEW CURRENT NEEDS

• The Wraparound Care Coordinator, Family Partner and Youth Partner should talk with the family about their needs prior to the first team meeting and help them list these at the first team meeting.

• The youth and family should list their needs first and then all team members should add to the list.

• Team members should state all concerns or identified problems in needs language: “I need..., we need..., they need..., etc.”

• Needs are not services. Team members should be redirected to state the real need(s).

• Avoid going back-forth between strengths and needs. Complete strengths first before identifying needs.

• Avoid organizing the list of needs in columns by person so participants don’t compare/contrast.

PRIORITIZE NEEDS

• Facilitate a discussion with the team about which needs should be prioritized to work on over the next 30/60/90 days.

• Typically, teams work better with less than 5 needs prioritized at one time.

• Avoiding a numeric ranking of each need by importance.

DEVELOP OUTCOME STATEMENTS FOR PRIORITIZED NEEDS

• Teams may need a lot of guidance with this at first and will develop these skills over-time.

• Remember the SMART test.

• Avoid wasting time with specific wording at the team meeting. You can rewrite the statements after the team meeting and revisit the final statement for group approval.
BRAINSTORM STRATEGIES

- Brainstorm multiple strategies for one outcome statement at a time.
- Strategies should help achieve each outcome statement and meet the identified need.
- Encourage the youth and family to select which strategies they think would work best for them and fit with the culture of their family.
- Include strategies that draw from the strengths of the youth and family.

ASSIGN ACTION STEPS

- Each strategy should include specific action steps and be assigned to a specific team member(s).
- When appropriate, team members should be given action steps for the strategy that will help achieve the outcome statement and meet the need— not just the family.

SUMMARIZE AND AGREE ON THE PLAN

- The Wraparound Care Coordinator should summarize the entire plan for the team and solicit feedback about missing components or needs.
- Following the team meeting, the plan of care should be documented and given to the team.

SCHEDULE NEXT TEAM MEETING

- The next team meeting should be scheduled while all team members are present.
- Consider scheduling meetings at least every 30 days.

TRANSITION

- Leaving the formal Wraparound team and process has been discussed with the team.
- Crisis drills have been practiced and the family is confident they know what to do if things go poorly.

SMART GOALS

When developing outcome statements for prioritized needs, remember the SMART test.

Specific

Linked to a rate, number, percentage, or frequency

Measurable

Has a reliable process to measure progress toward the achievement of the goal, objective, or outcome

Achievable

It can be done with a reasonable amount of effort

Realistic

The person has the necessary skills to do it

Time-Limited

Has a finish/start date clearly stated and defined
- Families are able to articulate how to access services in the future.
- Youth and their family members have a way to connect with other youth and families who have been through the Wraparound process.
- The youth and family's concerns have been considered in the transition planning.
- Youth and their family have a list of team member contact information to include phone numbers and email addresses, who they can contact if needed.
- Youth and family have written documents that describe their strengths and accomplishments.
- Youth and family have been offered a formal opportunity to celebrate their successful transition from the formal Wraparound process.

**PRINCIPLES EVIDENCED IN PRACTICE**

The ten Wraparound principles, as defined by the NWI, are the guide to practice-level decision making:

- [http://www.nwi.pdx.edu/pdf/TenPrincWAProcess.pdf](http://www.nwi.pdx.edu/pdf/TenPrincWAProcess.pdf)
- [http://www.nwi.pdx.edu/pdf/FamilyPartner10Principles.pdf](http://www.nwi.pdx.edu/pdf/FamilyPartner10Principles.pdf)

**REQUIRED DOCUMENTATION**

Each Wraparound site will complete the following documents for each enrolled youth and their family. Items 1-3 shall be reviewed at each Child & Family Team Meeting:

1. Strengths & Needs Assessment
2. Crisis & Safety Plan
3. Wraparound Plan of Care
4. Child & Family Team Meeting Minutes (CFT Minutes)
5. Progress Notes

**PLAN OF CARE ELEMENTS**

The Wraparound plan of care will include the following elements:

- Family Vision
- Team Mission
- Strengths
- Needs
- Outcomes
- Strategies
- Interventions
• Action Steps

STRENGTHS AND NEEDS ASSESSMENT DOMAINS

The Wraparound strengths & needs assessment will include the following life domain areas:

• Family & Relationships
• Home & A Place to Live
• Psychological & Emotional
• Health & Medical
• Crisis & Safety
• Financial
• Educational & Vocational
• Legal
• Cultural & Spiritual
• Daily Living
• Substance Abuse & Addictions
• Social & Recreational

TIMELINES

• Each Wraparound Care Coordinator and Family/ Youth Partner will work with the family, youth and team using the Four Phases & Activities of Wraparound Process as a guide.
• Wraparound Care Coordinator: http://www.nwi.pdx.edu/pdf/PhaseActivWAProcess.pdf
• Wraparound Family Partner: http://www.nwi.pdx.edu/pdf/FamPartnerPhasesActivitiesStandal__one.pdf
• Site specific Wraparound Care Coordinator timeline

SECTION 4:
QUALITY, FIDELITY AND EVALUATION

OUTCOMES

Each Wraparound project will:
- Define cross-sector outcomes for the project with input from community stakeholders, system partners, family and youth.
- Track project outcomes and report annually.
- Develop an outcomes and evaluation committee or workgroup consisting of community stakeholders, system partners, family and youth.

Outcomes should include:
  - Maintenance in less restrictive, community based placements
  - Improvement in behavior, functioning and/or symptoms
  - Decreased involvement or improvement in one or more systems: child welfare, juvenile justice, education and mental health.

**TRAINING AND WORKFORCE DEVELOPMENT**

Oregon has adopted the guidelines by training, coaching and supervision outlined by the National Wraparound Initiative.

### Phase 1: Orientation
- Back history and overview of Wraparound
- Introduction to skills/competencies
- Intensive review of the process

### Phase 2: Apprenticeship
- Observation by the apprentice
- Observation of the apprentice

### Phase 3: Ongoing coaching and supervision
- Ongoing coaching informed by data
- Periodic observation
- Document review

### Main Components
- **Ends when...**
  - Training completed
  - Observations completed
  - Score exceeds the threshold
  - Apprentice passes knowledge test
  - Ongoing

### Key Features
- “Tell, show, practice, feedback” process
- Experienced coaches
- Structured process
- Use of reliable assessments
- Quarterly observations (minimum)
- Intensity increased if data indicate challenges
- Superior Wraparound Care Coordinators become innovators

Throughout, training, coaching, and supervision is provided in a way that is consistent with Wraparound.


### CAPACITY
- The recommended number of youth assigned to a Wraparound Care Coordinator is less than 10. Assigned youth should not exceed 15.
- The recommended number of families assigned to a Family Partner is 10. Assigned families should not exceed 15.
- The recommended number of youth for a Youth Partner is 10. Assigned youth should not exceed 15.

**Note:** Ideally, capacity decisions should be based on the intensity and needs of each individual youth and family and not on the number of cases they should have at any given time. Also, providers need to be cognizant of how many
youth and families are assigned in a given time period (2 per month is ideal).

CITATIONS:


RESOURCES:

The National Wraparound Initiative: www.nwi.pdx.edu
The National Federation of Families: www.ffcmh.org
Oregon Family Support Network: www.ofsn.org
Youth M.O.V.E. Oregon: www.youthmoveoregon.org
Portland State University Systems of Care Institute: www.pdx.edu/ccf/soci
SECTION 5:  
ATTACHMENTS: DOCUMENTS & TOOLS


Ten Wraparound Principles

- [http://nwi.pdx.edu/pdf/TenPrincWAProcess.pdf](http://nwi.pdx.edu/pdf/TenPrincWAProcess.pdf)

Ten Wraparound Principles Family Partner

- [http://www.nwi.pdx.edu/pdf/FamilyPartner10Principles.pdf](http://www.nwi.pdx.edu/pdf/FamilyPartner10Principles.pdf)

Four Phases & Activities of Wraparound Process Care Coordinator

- [http://nwi.pdx.edu/pdf/PhaseActivWAProcess.pdf](http://nwi.pdx.edu/pdf/PhaseActivWAProcess.pdf)

Family Partner Four Phases & Activities of Wraparound Process

- [http://nwi.pdx.edu/pdf/FamPartnerPhasesActivitiesStandalone.pdf](http://nwi.pdx.edu/pdf/FamPartnerPhasesActivitiesStandalone.pdf)