

Title: Certification of Facilitators as a Method for Increasing Wraparound Fidelity

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Introduction

The use of the term wraparound to describe a process or set of services for children with mental health needs has expanded rapidly over the past fifteen years. The first mention of the word “wraparound” was in an article by Dr. Lenore Behar in 1986. The first article about wraparound as a formal process was in a 1988 article by John VanDenBerg and was described as a process for providing community-based individualized services for children with severe emotional disorders. Over time wraparound has been used to describe everything from a set of prescribed services, to flexible non-categorical supports, to a value-based proves of providing individualized services and supports. These variations in expectations and processes have made it difficult to research wraparound and to implement the process.

The growing demand from legislators, agency heads, supervisors, and advocates for evidence-based practice has established a need for research on the wraparound process. Defining and measuring the fidelity of wraparound is important for research to specify the expected service process and differentiate it from the control condition. The first step in this process is to clearly define the performance elements of the wraparound process. This defines what must be done to be called wraparound. The second step is to measure the process to see if it matches the expectations. If these two steps are not done, the outcomes of research can not be related to the wraparound process. It may be that the services provided do not meet basic criteria for wraparound or that the control process is so similar to wraparound that the comparison is not a good evaluation of the wraparound process. For example, Peterson, et. al 2003 report that the fidelity of the wraparound process has direct impact on the outcomes for seven outcome measures for children in the child welfare system. Figure One shows the differential impact on residential placement of high and low fidelity wraparound as measured on the Wraparound Fidelity Index (WFI).

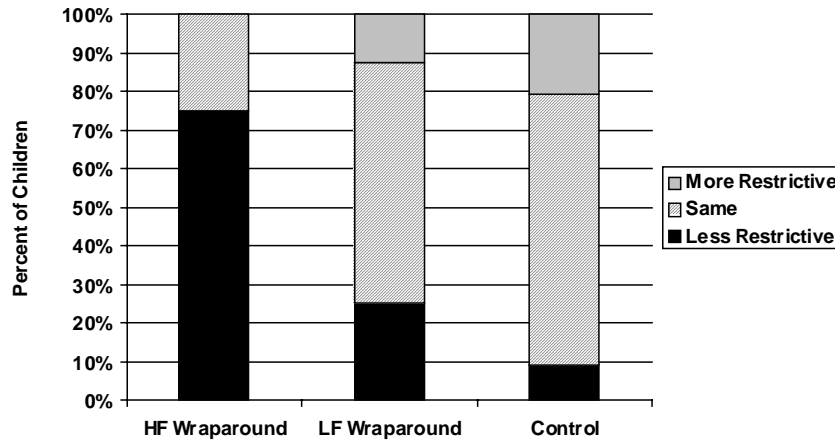


Figure One shows a comparison of residential placement level of the three groups (high fidelity wraparound, low fidelity wraparound, and controls). The data compares the level of restrictiveness of residential placement at the time of study initiation with the level of restrictiveness after six months. The levels are based on the ROLES modified to the specifics of the Nevada continuum of residential placements. The differences between the HF group and both the LF and Control group are significant at the .01 level.

Determining the fidelity of the process is also important for implementation. One function served through the fidelity process is to clearly define the expectations for providing the wraparound process. Providing facilitators with this level of detail serves as an effective form of communication for initial orientation and training. As training and coaching progresses measuring fidelity and using this assessment to prioritize and manage the training and coaching process can improve the impact of coaching and training and lead to improved fidelity of the process. Supervisors can use the fidelity measures to guide ongoing staff training and professional development. Wraparound as a process is based on a collaborative community-based partnership that can only be effectively provided within the context of a collaborative community system of care. Measures of fidelity of the process can be used to identify and correct system barriers and challenges to the effective implementation of high quality wraparound.

Initial work to develop fidelity measures for wraparound focused on quality assurance (Bruns, 1999; Rast 1999). These tools were based on the values of the wraparound process and consisted of case review of wraparound plans, interviews with staff, interviews with families, satisfaction surveys for child and family team members, and direct observation of team meetings. Two fidelity tools were developed and tested for reliability and validity. The Wraparound Observation Form (WOF) was adapted from earlier QA forms to assess the fidelity of the wraparound team meeting process to meet the core wraparound principles (Epstein, et. al. 2002). The wraparound fidelity index (WFI) was developed by Burchard and colleagues as a set of phone interviews for the primary facilitator, caregiver and youth over 11 to assess how well the process meets the eleven wraparound principles.

The WOF provides a good indication if the process of facilitating child and family team meetings is being done in a way that meets the practice principles for wraparound but offers no information about the other seven steps of the wraparound process. The WFI provides a good overview to the fidelity of the wraparound process for research but does not provide the supervisor, coach, or staff person the detailed information needed to implement the wraparound process. For these reasons, the coaching and supervisory wraparound tools were developed. This paper describes the process of developing these tools and some examples of how they have been used.

Method

The initial work to develop the VVDB quality improvement tools for wraparound was done in Michigan. A large (over 125 individuals) group of Michigan stakeholders representing parents, youth, staff and supervisors from the primary child serving agencies, and state officials first developed a set of thirteen values to support implementation of Systems of Care and Wraparound. Through the second phase of this process the group developed performance indicators for each of these values at the direct practice, supervisory, and community levels (Rast, 1998). A series of tools were developed from these performance indicators. After three years of pilot and full implementation of these tools and replication of this process in five other states, VVDB assessed the overall impact of the use of these tools. It was clear that each of the communities using the tools had seen consistent improvement in the quality of services but there were some consistent needs that were not being met. An analysis of these needs identified areas of fidelity that were not covered by the tools. The approach to developing the tools was reviewed and it became apparent that the initial focus on values had not resulted in covering all critical elements in the steps of wraparound. Using the values as the primary determinants of the performance indicators had not resulted in a shared vision of the practice model or the necessary community supports. The eight steps of wraparound (see Table One) are listed below.

Steps of the Wraparound Process

- Step 1 Engagement of the Child and Family
- Step 2 Immediate Crisis Stabilization and Safety Planning
- Step 3 Strengths, Needs, and Culture Discovery
- Step 4 Child and Family Team Formation and Nurturing
- Step 5 Creating the Child and Family Team Plan
 - Preparing for the Meeting*
 - Facilitating the Meeting*
 - The Wraparound Plan*
- Step 6 Ongoing Crisis and Safety Planning
- Step 7 Tracking and Adapting (the Wraparound Plan)
- Step 8 Transition (Out of Formal Services)

The performance indicators from the values were cross walked to the steps of wraparound and several key omissions were identified. Performance indicators were developed for these missing steps and reorganized to match the steps. Each of the seven steps and the three sub-steps of the actually plan development process has a sheet with 10

to 15 standards. These are separated into three basic skills and seven to twelve advanced skills.

The tools are used in initial training and orientation to communicate details of the practice model to the staff and supervisors providing the process and can be used to communicate the service process model to others in the community. Initial coaching and training focuses on mastering the 30 standards that are identified as basic. Once a facilitator has mastered these standards they are “certified” to provide wraparound. The supervisor, coach and staff then use the tools to prevent process creep and to focus efforts at personnel development on the advanced skills. Table Two shows a sample of one of the worksheets from the coaching and supervision tools.

Crisis Stabilization

	Standard	Rating
B A S I C	Facilitator asks about ongoing potential crisis situations and safety concerns from referring agency and during first visit.	M MM MU U DNA
	If family is in crisis, facilitator completes brief functional assessment to predict, prevent and plan for crisis during the first visit.	M MM MU U DNA
	Facilitator communicates crisis stabilization and initial safety plans to CF Team members and others as needed.	M MM MU U DNA
A D V A N C E D	Facilitator works with family and others as necessary to determine what needs to be in place to satisfy safety concerns.	M MM MU U DNA
	Facilitator determines if crisis and/or safety plans have already been developed.	M MM MU U DNA
	Initial crisis stabilization and safety plans build on family strengths and available natural supports.	M MM MU U DNA
	The initial plan includes signs and symptoms of impending crisis and ways to deescalate these situations.	M MM MU U DNA
	Facilitator works with family to develop a crisis response (ways to respond to the crisis if they occur).	M MM MU U DNA
	Facilitator takes action to stabilize immediate crises during the first visit.	M MM MU U DNA
	Based on the crisis stabilization plan, the family can better recognize, prevent and respond to crisis situations.	M MM MU U DNA
	Based on the crisis stabilization plan the family can better recognize, prevent and respond to crisis situations.	M MM MU U DNA

These were then piloted in fourteen communities in five states. In three of these states the previous value oriented quality improvement tools had been previously used (some of which were retained and are still in use) and in two these were the first quality improvement tools to be used to measure wraparound fidelity. Staff and supervisory were interviewed on the use and impact of the tools. The quality of wraparound was monitored using the WFI as a comparison for the pilot project in Nevada.

Results

Figure two shows the comparison of four staff who were trained in the wraparound process using the value based indicators and those using the steps related indicators. There were many confounding variables that may account for the differences in these two approaches and additional research is needed to assess this impact but those trained and coached with the steps based tools scored at significantly higher levels on overall fidelity to the wraparound model.

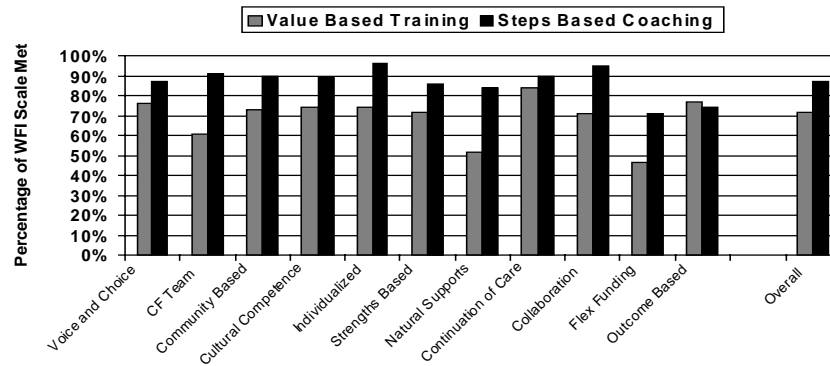


Figure Two shows the comparison of scores on the Wraparound Fidelity Index (WFI) for the two groups of wraparound facilitators in the Nevada pilot study. The scores have been converted from the eight point scale to a hundred point scale for ease in interpretation.

Reports from staff and supervisors in five states reported multiple use of the tools. When new staff began to provide wraparound the tools were used to describe the process and to define the thirty critical standards to be met. Supervisors used the tools as focus for staff meetings and staff training to assess the overall quality of the process being provided in a program. Supervisors used the data from the tools to show community teams overall fidelity measures for wraparound and to support identification of system problems that were barriers and challenges to providing good wraparound. Supervisors reported that the focus on the individual steps made individual work with staff much easier to focus because this organization allowed them to focus on the work of the staff one step at a time.

Discussion

Wraparound is a complex process with multiple practice principles and steps. Wraparound was initially developed as a flexible process and much of the variation in what is currently called wraparound is based on interpretation of the critical elements of the process. The development of standard measures to use to determine fidelity for research purposes and for implementation purposes and their use across multiple sites should provide an opportunity to determine the relative efficacy of the different elements in the process. It may be that a simplified version of the process will yield the same or better results than the whole enchilada, or it may be that without certain elements being consistently implemented there is little consistent impact to the process.

Defining and measuring the fidelity of wraparound is critical for both successful research and implementation of the process. The functions and uses of fidelity measures for research and implementation are not identical and use to guide successful implementation requires more detail in the description of the process. While a limited number of key elements may be sufficient to determine if the process being provided can be considered wraparound for research purposes, it does not provide the level of detail necessary to teach, coach and develop quality wraparound process. The coaching and supervision tools described in this paper are a first effort at providing this level of detail. The field needs this level of detail to ensure consistency and quality of the process.

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