

WRAPAROUND FIDELITY REVIEW
Oceana County WSA # XXXXX

Indicator / Evidence	Degree to Which Standard is Met			Findings/Comment
	Full	Partial	Inadequate	
W-1 A Strength and Culture Narrative is completed and includes each member of the family, and the family as a whole. (evidence: the Strength and Culture Narrative is completed and maintained in the record initially and updated annually)		XXXXX		Not in a narrative form. Very brief. Could be describing many individuals and families.
W-2 The Strength and Culture Narrative is holistic and crosses life domain areas. (evidence: the Strength and Culture Narrative addresses skills, abilities, values, traditions, interests, preferences, etc.; across life domains)		XXXXX		Very brief. Not a holistic view of the individuals or the family as a whole. Doing a more complete strengths discovery will increase your ability to develop strength based plans.
W-3 Results of the Strength and Culture Narrative are incorporated in the WA Plan/Plan of Service (POS). (evidence: planned interventions and strategies are built upon individual / family strengths and culture)			XXXXX	Strengths should be used to develop specific strategies. Just having strengths listed on the document is not sufficient. CMHSP Response: See responses at bottom
W-4 People that support the child and family across various areas of their lives are identified. (evidence: meeting minutes, notes of discussions, and/or WA Plan /POS documents identify family, friends, neighbors, professionals, school personnel, etc.)		XXXXX		
W-5 The child, youth or family chooses who participates on the wraparound team. (evidence: WA Plan/POS paperwork; meeting minutes; progress notes)	XXXXX			Well documented
W-6 Wraparound team meetings and attendance at meetings are documented. (evidence: minutes document each meeting and attendance)	XXXXX			Well documented
W-7 Wraparound team meetings are held at least weekly until the plan has been developed and is being implemented and subsequently no less than twice monthly while enrolled in Wraparound/ SEDW unless otherwise documented in a transition plan. (evidence: minutes of meetings)	XXXXX			Well documented
W-8 A mission statement is developed / articulated for each Wraparound team. (evidence: the WA Plan/POS; minutes)	XXXXX			Good

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W-9 A needs assessment across life domain areas is completed. (evidence: the entire brainstormed needs list is maintained in the record)			XXXXX	XXXXX: No needs brainstorm list located in record CMHSP Response:
W-10 Needs are prioritized by the family. (evidence: method for prioritization that gives preference to the family is clearly identified in minutes, notes, and/or WA plan/ POS)			XXXXX	XXXXX: No needs brainstorm list located in record CMHSP Response:
W-11 The Wraparound team develops an action plan that identifies alternative strategies (various ways) to meet identified needs. (evidence: meeting minutes; alternative strategies are outlined in the plan)	XXXXX			
W-12 The Wraparound plan contains strategies or interventions that pertain to natural supports and other community resources, in addition to Medicaid services. (evidence: the WA Plan/POS)		XXXXX		XXXXX: Work with families to increase the support they have in the community. This can be addressed through helping them to make connections in the community through activities sports, clubs etc. CMHSP Response:
W-13 The Wraparound plan is written in the language of the family without the use of clinical jargon (evidence WA Plan/POS)		XXXXX		
W-14 Outcomes are written in the language of the family and are the result of families identifying their vision of how their lives will be different when the Wraparound process is completed (evidence: outcomes statements in record)			XXXXX	Outcomes are not being developed consistent with the model requirements. CMHSP Response:
W-15 Outcomes are measurable and method of measurement is identified for each outcome, baseline and goal measurements are identified. (evidence: measurement format, meeting minutes and/or POS)			XXXXX	Outcomes are not being developed consistent with the model requirements. CMHSP Response:
W-16 Outcomes are monitored at least monthly by the Child and Family Team, and are formally scored and documented in the record quarterly. Community Teams review outcomes at least every 6 months. (evidence: meeting minutes, outcome tool, Community		XXXXX		

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Team 6-month Review format)				
W-17 The Community Team reviews the WA plan, Crisis/Safety Support Plan and budget on a regular basis. This means at least initially, every 6 months and at graduation; crisis and safety plans may be reviewed more frequently – as appropriate to need. (evidence: signatures / dates on the budget and plan or in the Community Team meeting minutes)	XXXXX			Well documented
W-18 The plan and budget are updated to reflect new interventions and services. (evidence: progress notes, meeting minutes, budget reflects the plan)	XXXXX			Well done
W-19 Flexible funds are used as a last resort and after community outreach efforts to meet needs of the child and family (evidence: Community Team authorization of budget; budget form identifies other community resources)	XXXXX			Do not have flex funds
W-20 The Child and Family Team identified and addressed crisis/safety risks. (evidence: each record must have a crisis/safety support plan)			XXXXX	The safety plan is not developed at first contact. The initial meeting with the family was 1.13.15 support plan is dated 11.24.15. CMHSP Response:
W-21 The Crisis / Safety Support Plan identifies both proactive and reactive steps / interventions. (evidence: the Crisis / Safety Support Plan)		XXXXX		There are minimal proactive strategies that are not comprehensive or likely to be helpful. The rest of the document is a list of phone numbers that the family likely already had. CMHSP Response:
W-22 The Crisis / Safety Support Plan includes interventions that are culturally relevant and strength-based. (evidence: the Crisis / Safety Support Plan is consistent with the results of the Strength and Culture Narrative)			XXXXX	Remember to utilize strengths as strategies, for instance drawing when beginning to feel stressed or going out to swing. Support plans need to be developed at the very first contact. Initial plans will not be as strength based

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				as your final plan but should be developed to keep everyone safe until a better plan can be developed. CMHSP Response:
W-23 All team members have a defined role in implementing the Crisis / Safety Support Plan. (evidence: roles of each team member are specified in the crisis / safety plan)			XXXXX	Remember to utilize community and natural supports in safety/ support planning. Plans should not rely solely on youth or their families. CMHSP Response:
W-24 All contacts are documented in the file. (evidence: Progress notes; team meeting minutes)	XXXXX			
W-25 A transition plan is developed and it outlines how the family will continue to get their needs met after the child / youth end Wraparound/SEDW and is approved by the Community Team. Community Team (evidence: plan, outcomes measurement format and/or transition plan)				NA
W-26 A graduation summary identifies overall progress on outcomes and transition to other services / supports. (evidence: the graduation summary)				NA
W-27 The child / youth and his/her family have identifiable connections to their community. (evidence: included in the graduation summary)		XXXXX		
W-28 The Community Team supports the graduation plan. (evidence: signature of Community Team members on the graduation plan or in Community Team meeting minutes)				NA
W-29 Weekly individual supervision is provided to Wraparound facilitators (evidence: supervision log and individualized supervision plan)	XXXXX			
W-30 Case loads are consistent with the Michigan Medicaid manual requirements.	XXXXX			
W-31 Wraparound evaluation tools (Family Status Reports and Michigan Wraparound Fidelity Survey) are complete and up to date as requested by MDCH (evidence review of RedCap records)	XXXXX			

This child was initially denied service at the CMHSP. An initial CAFAS completed August 13, 2015 when the family came in to request services was rated a 70 with a severe rating for *behavior towards others*. The family was provided with a list of outpatient therapists in the community. The child welfare worker advocated for the youth to be reconsidered and on October 27, 2015 the CAFAS score was 100 with an additional severe rating for *school/work*. The family was subsequently referred for Wraparound and admitted to the SED Waiver.

SUMMARY

Areas of strength:

- Discussion around team membership was clearly documented
- A mission statement is in the record
- Frequency of contact meets requirements
- Weekly individual supervision requirements met by program

Areas of concern that should be addressed but will not require a Corrective Action Plan:

- Facilitators should continue to explore potential team members with families throughout the process.
- Plans and all other documentation should be written in the language of the family. Children/youth and their families should not have to struggle to determine what the words in their plan mean.
- Children/youth and their families must have a comprehensive strength based safety /support plan. This plan will include both proactive and reactive strategies that are based on the strengths interests of the child/youth and their family.
- Utilize the strengths and interests of family members to connect them back to their communities in a positive way.

Areas of concern that will require a Corrective Action Plan:

W-3 Results of the Strength and Culture Narrative are incorporated in the WA Plan/Plan of Service Pasting the information from the strengths narrative does not meet this standard. Strengths are to be utilized in the development of strategies in order to develop an individualized, relevant plan.

W-9 A needs assessment across life domain areas is completed. This needs assessment will be brainstormed and documented in its entirety in the record.

W-10 Needs are prioritized by the family. The method of prioritization and who participated in the prioritization of needs will be clearly documented in the record.

W-14 Outcomes are written in the language of the family and are the result of families identifying their vision of how their lives will be different when the Wraparound process is completed The Outcomes are not being developed in accordance with the model. Rather they are currently a means to measure progress toward goals in the plan.

W-15 Outcomes are measurable and method of measurement is identified for each outcome, baseline and goal measurements are identified. The program needs to develop a process for tracking outcome measurement across time.

W-20 The Child and Family Team must identified and address crisis/safety risks. Crisis/safety support plans must be developed at the initial contact and this must be clearly documented. A more comprehensive strength based plan will be developed as part of the planning process when the strengths and culture of the family are known.

W-22 The Crisis / Safety Support Plan must include interventions that are culturally relevant and strength-based. The inclusion of strategies that reflect the family's culture and strengths is what makes a plan individualized and unique. Plans that are relevant to who individuals are will be more effective and more likely to be implemented.

W-23 All team members have a defined role in implementing the Crisis / Safety Support plan. Plans should not rely heavily or solely upon either the individual who is in crisis or their family. Utilize community and natural supports to assist families in increasing their confidence and competence in handling crisis /safety risks.