

“An Introduction to Wraparound and its Role in CBCB”

In the spirit of the popular belief, “It takes a village to raise a child,” Wraparound is an intervention strategy in which families are supported and encouraged toward their goals through the joint efforts of the people who are professionally or socially involved in their lives. The wraparound model is based on individualized, needs driven planning and services. It is not a program or a type of service. It is a value base and an unconditional commitment to create services on a "one kid, one family at a time" basis to support normalized and inclusive options for youth and families with complex needs.

Wraparound is not something that you "get", it's something you "do"; it's a process, not a program or a service. These fundamental principles merge with a "whatever it takes" philosophy that embodies an unconditional commitment to team development, family empowerment and outcome based interventions.

Many times children and their families have needs that crossover agency boundaries. Therefore, interagency coordination is an integral part of the Wraparound planning process. It is essential that all services are developed cooperatively and become integrated into the Care Planning process.

A wraparound team shares responsibility, expertise, ownership and mutual support while designing creative services intended to meet an individual's strengths and needs across all domains of life. Historically, families' needs had to fit into categorical “one size fits all” types of available services. In wraparound planning, the needs of the family drive the services.

A Wraparound Plan is continually reviewed and modified based on the child and family's developing strengths and evolving needs. Wraparound interventions are flexible non-categorical services and supports because the approach is multi-faceted, taking all aspects of the child and family history and current life situation into account.

Families, who are referred to Family Team Conferencing/ Care Planning, benefit from services that are carved out to meet their specific needs. These supports and services are non-categorical, community based and allocated by frequency and duration based upon team consensus.

In the new CBCB SOC, the family works together with CBCB and community providers to identify their strengths, needs, and desired outcomes. The team, including the family, develops a plan based on the unique strengths, values, norms, and preferences of the child, family and community. Meetings are regularly scheduled as a means of monitoring outcomes and services and to reshape the plan as needed and/or required.

The initial meeting is referred to as the Family Team Conference. At this meeting a predetermined team of individuals meets with the family, the Care Manager and the CBCB Care Coordinator in an attempt to draft a Care Plan that fits the family's needs. Family members are welcomed and encouraged to attend this meeting, and are encouraged to invite any persons who they perceive as supportive. Meetings should always begin with a focus upon the family's strengths, needs and goals. Appropriate services are identified, a plan written and distributed, and supports coordinated. At the close of the meeting a follow up meeting referred to as the Utilization Review meeting is scheduled. Any meeting following the development of a care plan is referred to as the UR meeting.

Why is FTC from a wraparound approach important? Wraparound outcome studies clearly indicate improvement in family functioning, reduced residential placement rates and a reduction in recidivism. Wraparound proponents adhere to CASSP values, which are attributed to the improvement of families within the child welfare system. Evidence indicates when families have access, voice and ownership in the planning process; they are more likely to improve.

Wraparound is:

- Strengths Based
- Family Centered
- Needs Driven
- Community Focused
- Team Driven
- Inclusive of Natural Supports
- Culturally Competent
- Unconditional
- Outcome Oriented

Wraparound is a planning process designed to help people meet their needs. One of the key products of this process is coming up with a plan designed to meet those needs identified as most important by the child and family. Wraparound Plans that work include the following:

- Ground Rules for the team such as: Everyone to focus on the positive, share good ideas, encouragement of thinking "out of the box", no blaming, commitment, confidentiality, share tasks, etc.
- A written list of the family, team members and community strengths.
- A mission/vision statement and goals set by the family.
- Identification of needs before services.
- Concrete tasks that will be carried out.
- The person responsible for carrying out each task (Ideally all members of the team will agree to carry out tasks, not just family members and facilitator).
- The time frame for completing those tasks.
- An outcome, which describes when life is better.
- A match between the strategies and strengths used.
- Facilitator's role is to help coordinate the team's activities in this process.

A person functioning in the role of Wraparound Facilitator guides team development and oversees the process and tasks of the team in order to develop a comprehensive plan. In the CBCB system this is generally the Care Coordinator. While this may sound similar to other case management roles, it is different in that a facilitator works within a team structure that guides collaboration and consensus decision-making rather than coordinating services. Different individuals may take on the process of facilitation, depending on the child/family and referral circumstances. Likewise, the facilitator or team members may take on some functions of case management. The person in this role facilitates the development of a child and family team and plan, insuring the presence of mutual respect, teamwork, shared responsibility, and decision making which is family driven.

Child/Family Care Teams - Commonly Asked Questions:

- **Who's on the team?** Simply stated the team consists of the Parent(s), the child(ren), (if appropriate), and 4-8 people who know the family best. Ideally, the team should include a mix of natural supports in addition to professionals. There is a 51% rule whereby the majority of team should consist of natural supports that will remain as a support network to the family to sustain them beyond discharge.
- **Who determines who's on the team?** The facilitator works with the family to determine who knows them best and who is most likely to help the family meet their needs. Mandated professionals are always members of the team.
- **Where does the team meet?** Wherever it is most comfortable for the family.
- **How often does the team meet?** FTC's are scheduled based upon acuity of the family. After a plan is put together, the meeting may drop to monthly and eventually maybe only quarterly. There is no set answer to this question; it really depends on the needs of the family.
- **What does the team do?** The team develops and implements an individualized plan to help the family meet their goals and needs. The process they use will be consistent with the *Wraparound Philosophy/Values*.
- **What happens if the plan isn't working?** Wraparound is a blame free process. Consequently, if the family isn't improving, the plan isn't working and needs to be rewritten and the team reconvened. Crisis occurs when adults don't know what to do. Crisis planning is a critical element of good wraparound planning.

CBCB has designed a System of Care to ensure wraparound is incorporated and available for the children and families entrusted to our care. Consequently, each Care Center has a Care Coordinator assigned to work collaboratively with the Care Managers to facilitate and coordinate the family care team meetings and authorize service referrals.