

WRAPAROUND COACHING MANUAL

Wraparound Florida Training
& Coaching Video Companion

Module I:
What is Wraparound?

Prepared For:



FLORIDA DEPARTMENT
OF CHILDREN AND FAMILIES
MYFLFAMILIES.COM

This manual has been developed to accompany the Wraparound Florida Training and Coaching video series. The material in this manual will provide coaching support to assist case managers and coaches in achieving certification in the Wraparound process. The purpose of the manual is to provide material to support the coaching process. There is instructional information for coaches in the manual as well as written material that may be shared with case managers to assist them in learning the process. Throughout the manual the terms "case manager" and "Wraparound facilitator" are used interchangeably. The following resources are mentioned throughout the manual and may be found in the locations listed below:

- Wraparound Florida Training and Coaching video series- videos are located on the Collectively website at www.collectivelyus.org under the Wraparound tab.
- Wraparound Coaching Tools are located at the back of the Coaching Manual #10. The same Coaching Tools are also located on the Southeast Florida Behavioral Health Network website in the Wraparound Toolkit: www.sefbhn.org (scroll to the bottom right and click on Wraparound, then go to the Champion Toolkit to access the Coaching Tools).
- Throughout the Coaching Manuals there are several references to forms. This material is also available on the www.sefbhn.org website under the Organizational Toolkit in the forms tab.

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INTRODUCTION COACHING

This manual has been developed to accompany the Wraparound Florida Training and Coaching video series. The material in this manual will provide coaching support to assist case managers/Wraparound Facilitators and coaches in the successful certification of the Wraparound process.

Welcome to the Wraparound coaching process! When case managers become certified in high fidelity Wraparound, there is a requirement to receive coaching towards certification. Further, in order to successfully move forward with the Wraparound process, there should be organizational commitment to the requirements of the process. This may include changes to policies, processes, forms and documentation. A helpful tool to support organizational assessment is the Organizational Wraparound Readiness Assessment Protocol (O-WRAP).

In addition to the organization preparing for the implementation of Wraparound, all newly hired staff are required to attend Wraparound training and participate in the coaching process. Successful organizations create internal infrastructure to support the sustainability of the process. Wraparound will be successful within communities when there is support at the system level through system of care work, at the organizational level through technical assistance with organizations and at the practice level through team intervention with families. Coaching is provided at all levels in order to support successful Wraparound.

Wraparound is a complex process and success doesn't happen overnight. It requires adherence to the fidelity of the Wraparound model. The coaching requirement is a proven way to make sure the process is delivered in the field as designed. An organization will only be successful with Wraparound implementation when there are highly skilled and motivated case managers working with families.

MODULE I

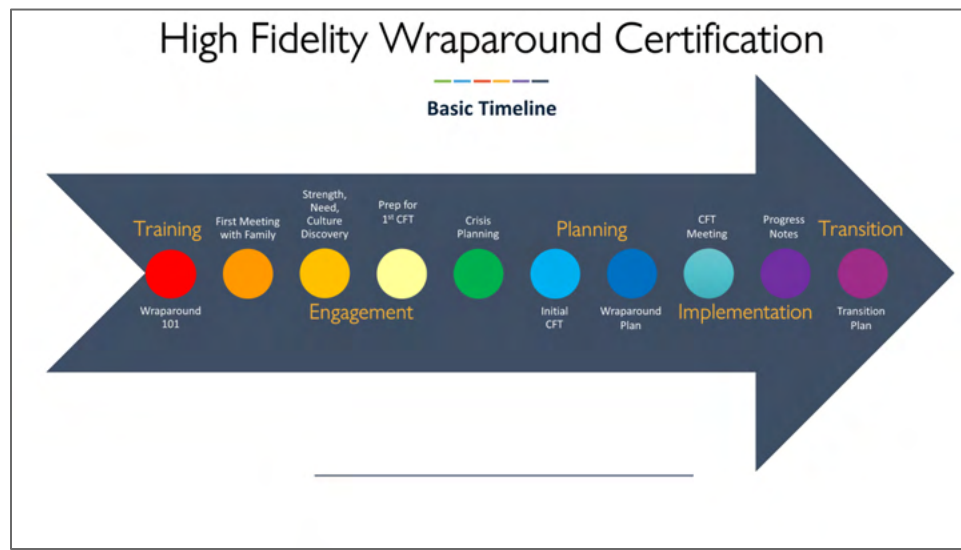
WHAT IS WRAPAROUND?

The state of Florida has made a commitment to mental health transformation. Through a statewide system of care grant Florida has been able to expand System of Care values and the Wraparound process. The relationship between System of Care and Wraparound is easily understood as they share common values and guiding principles. System of Care, however, refers to how systems work together while Wraparound addresses the practice level of care. A Wraparound System of Care is an organized network of formal and natural supports that come together to move as an integrated system. The coordination of this effort is provided through case management activities. The core values of System of Care are youth centered, family focused, community based, and culturally competent. The youth and family have shared decision making in all aspects of the Wraparound process. Services are community based, so that clients remain in their communities with support and services. Culturally competent organizations, programs, schools and services are sensitive to family beliefs, values and expectations.

Wraparound is implemented with clients with serious mental health or behavioral health concerns who need a more intensive team approach. This System of Care approach emphasizes client and family involvement at the highest level. The collaboration between the client, family, case manager and the team drive the process for planning and service delivery. Wraparound is a means of delivering unconditional care to clients and their families. It is a commitment driven process where every member adapts a “never give up”

philosophy and provides unconditional care and commitment to team development. Case Managers help families access services and identify relevant supports through assessment, planning, linkage, advocacy and monitoring activities.

FIGURE 1.1: WRAPAROUND CERTIFICATION TIMELINE



Wraparound uses a coaching model to ensure that each case manager is practicing Wraparound to high fidelity. Case managers participate in the coaching and certification process prior to becoming certified Wraparound case managers. The first step in this process is to attend the Wraparound 101 training, however the coach does not have to wait until a training is available to start coaching. This can be a part of the onboarding process within organizations. Wraparound uses standardized coaching tools. There are nine coaching tools that the case manager will need to pass with proficiency in order to become certified as a Wraparound case manager. The coach will provide the case manager with a copy of the coaching tools upon hire and review the coaching tools with the case manager in enough detail that the case manager has a good idea of the activities in the Wraparound

process. The coach should demonstrate activities through written, verbal and visual modalities. This supports the learning process as individuals learn differently. Coaching and training do not stop at certification. The coach will provide ongoing coaching, training and support to case managers to ensure that drift from high fidelity practice does not occur.

FIGURE 1.2: WHY COACHING IS IMPORTANT

Why is Coaching important for Wraparound Fidelity?			
TRAINING COMPONENTS	OUTCOMES--- % of participants who demonstrate knowledge, demonstrate new skills in a training setting, and use new skills in the field		
	Knowledge	Skill Demonstration	Use in the field
Theory and Discussion	10%	5%	0%
Demonstration in Training	30%	20%	0%
Practice & Feedback in Training	60%	60%	5%
Coaching in Clinical Setting	95%	95%	95%

Coaching is important to the process because if a case manager were merely to participate in a training, research has shown they would change their practice by 0%. If they sat in a training and watched the activities being demonstrated via video or role play, when they went into the field, they would change their practice by 0%. If they sat in a training, observed the practice and even had a chance to practice some of the skills with feedback, they would change their practice in the field by 5%. However, if they sat in a training, observed the skills, practiced the skills with feedback and received field-based coaching, they would change their practice by 95%. That is why Wraparound uses a coaching model.

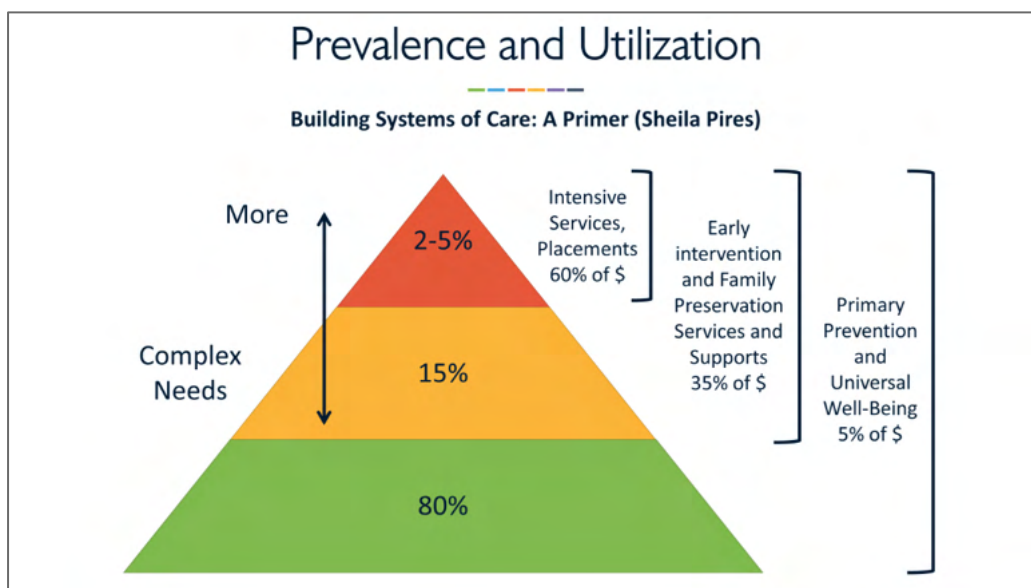
As a coach, it is important to support case managers in the learning process through several methods. First, utilize the Wraparound Coaching video as an initial guide to learning about the Wraparound process. Ask case managers to review the video on Wraparound and encourage case managers to take notes. The coach should provide the case manager with the What is Wraparound? Video Worksheet at the end of the module (see page 27, below). The case manager should answer the questions on the worksheet while watching the video.

Wraparound has been implemented in the state of Florida since the early cohorts of SAMHSA's System of Care process. Since that time Wraparound has expanded across that state of Florida and within the past few years has exponentially grown with the implementation of the statewide system of care grant process. For Wraparound to truly be successful within communities, there must be support at the system level through System of Care work, at the organizational level through technical assistance with organizations to support implementation and at the practice level through team intervention with families. The coach is a part of the organizational level support and the case manager facilitates at the team level.

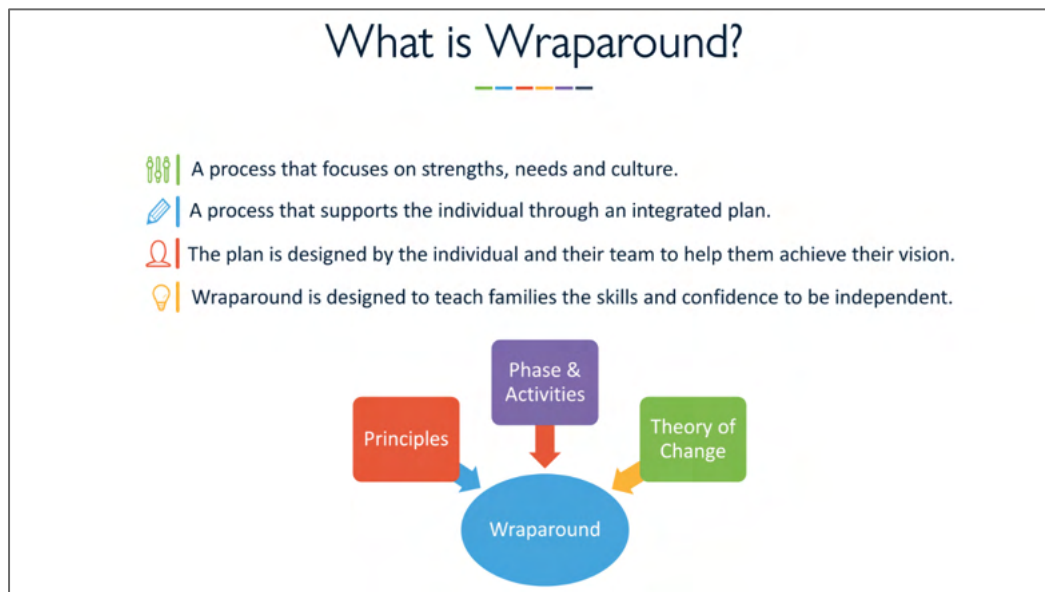
Understanding the prevalence of mental health and substance use conditions provides a framework for determining the utilization of practices such as Wraparound. In the picture below the green part of the triangle represents 80% of the population. This is considered the at-risk population and typically systems spend about 5% of the dollars on prevention efforts for this population. The yellow population represents 15% of the population and this population is considered "emotionally disturbed". Currently most systems spend about 35%

of the dollars on this population. The red top of the triangle represents anywhere from 2-5% of the population. These tend to be the deepest end consumers of service. Unfortunately, most systems spend up to 60% of the service dollars on just 2-5% of the population. The goal with Wraparound is to intervene earlier in people's lives and provide less costly interventions. By doing so the dollars will provide services for more of the population.

FIGURE 1.3: PREVALENCE AND UTILIZATION



The following material in this module is a written overview of the Wraparound process and resources that coaches can share with case managers during the coaching process.

FIGURE 1.4: WHAT IS WRAPAROUND?

So, what is Wraparound? Wraparound is not a service; it is a method of service delivery typically provided through case management activities. Wraparound is a process used to support clients and families by bringing a group of people together as a team to help clients and families accomplish their goals. The process is driven by the client and is a teaching model whereby clients learn new skills so they can navigate challenges in the future. The team comes together to develop a plan to address the client's own identified needs. The responsibilities on the plan are shared among the team members, including the client, to ensure their needs are addressed. Every team member offers different experiences, resources and abilities to ensure the plan is realistic and achievable. The Wraparound process will help the client understand what is available to them in their community, how to access those resources and how to get the right people in the same room to address future needs. The Wraparound team will advocate for the client and ensure their voice is heard. The team will work with clients to help them gain the tools and skills necessary for

long term success, long after the professionals are gone. Case managers should become familiar with Wraparound terminology. Coaches should work with case managers to help them understand Wraparound language. Wraparound language is used when talking to clients, families and systems partners. Wraparound language will also need to be evidenced in documentation. Case managers will need to be comfortable using Wraparound language in their everyday work (Table 1.1, page 30, below). The coach should provide the case manager with documentation outlining Wraparound language for case managers to reference. The coach should also provide the case manager with opportunities to review documentation and shadow events from more seasoned staff where Wraparound language is being utilized. This will give the case manager context in how Wraparound language is used during the process.

FIGURE 1.5: PRINCIPLES OF WRAPAROUND



Wraparound strongly follows ten guiding principles. An easy way to help case managers understand the Wraparound principles is to have case managers practice using them

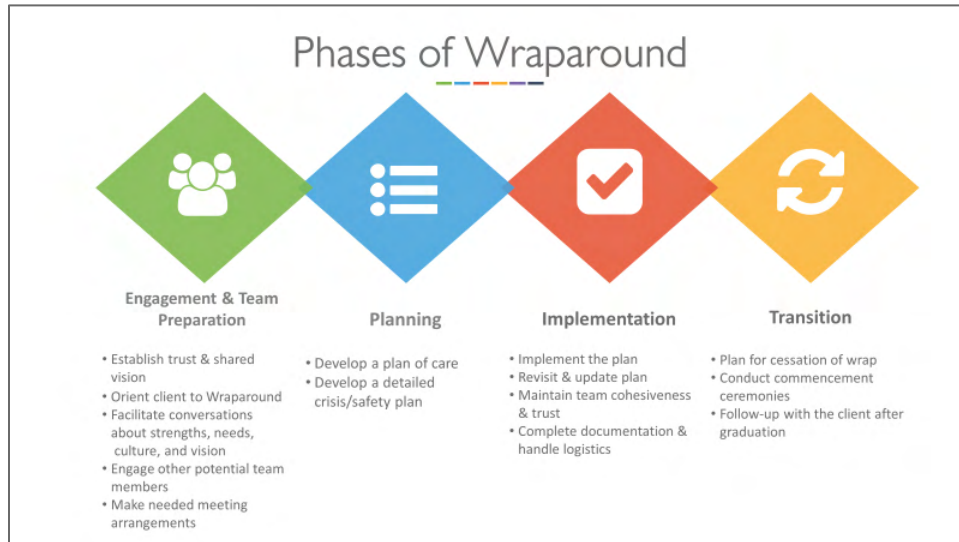
(Activity 1, page 34, below). Have the case manager review the principles of Wraparound cards and state how they would use the principle in their daily work. This can also be done during a group activity. Depending on the size of the group, the coach can use the Wraparound Cards and break the case managers into groups to have them discuss how they operationalize these principles. The coach can also put post it notes around the room and ask case managers to write what these values mean to them. Lastly the coach can just have a conversation about the principles.

Here is a description of each of the principles:

1. **Voice and choice:** Client and family perspectives are intentionally elicited and prioritized during all phases of the Wraparound process. Planning is grounded in family members' perspectives, and the team strives to provide options and choices such that the plan reflects family values and preferences.
2. **Culturally Competent:** The Wraparound process demonstrates respect for and builds on the values, preferences, beliefs, culture, and identity of the client and family, and their community.
3. **Individualized:** To achieve the goals outlined in the Wraparound plan, the team develops and implements a customized set of strategies, supports, and services.
4. **Strength-Based:** The Wraparound process and the Wraparound plan identify, build on, and enhance the capabilities, knowledge, skills, and assets of the client and family, their community, and other team members.
5. **Unconditional Care/Persistence:** Despite challenges, the team persists in working toward the goals included in the Wraparound plan until the team reaches agreement that a formal Wraparound process is no longer required.
6. **Natural Supports:** The team actively seeks out and encourages the full participation of team members drawn from family member networks of

interpersonal and community relationships. The Wraparound plan reflects activities and interventions that draw on sources of natural support.

7. **Community Based:** The Wraparound team implements service and support strategies that take place in the most inclusive, most responsive, most accessible, and least restrictive settings possible; and that safely promote client and family integration into home and community life.
8. **Team Based:** The Wraparound team consists of individuals agreed upon by the client and family and committed to them through informal, formal, and community support and service relationships.
9. **Collaboration and Integration:** Team members work cooperatively and share responsibility for developing, implementing, monitoring, and evaluating a single Wraparound plan. The plan reflects a blending of team members' perspectives, mandates, and resources. The plan guides and coordinates each team member's work towards meeting the team's goals.
10. **Outcome Based:** The team ties the goals and strategies of the Wraparound plan to observable or measurable indicators of success, monitors progress in terms of these indicators and revises the plan accordingly.

FIGURE 1.6: PHASES OF WRAPAROUND

There are four phases in the Wraparound process; engagement, planning, implementation and transition. Typically, case managers will spend most of their time in the engagement phase establishing trust and building a relationship with the client, family and system partners. The case manager will assess the client's strengths and needs and then will work to build a team to support the client in meeting their needs. Once relationships are established and the team is built, planning can begin. The case manager supports the team in developing a plan with the client and their family, based on the needs identified. Once the plan is developed, the team will implement the plan and monitor it. During the implementation phase, the team will work with the client and their family to teach skills and provide tools for the client to be able to meet their own needs in the future. The case managers will maintain contact with all team members, typically weekly, to ensure the plan is moving forward.

The case manager coordinates and facilitates monthly team meetings to formally monitor the plan and make changes as needed to ensure that the plan continues to meet the needs of the client. This monitoring includes looking for progress and assessing for transition readiness. The case manager works with the client to build their natural support system, so they have a support network to assist them after formal Wraparound ends. The case manager completes typical case management activities during this phase, however, allows the client to take the lead. In the beginning the case manager will do more for the family but will soon transition to doing activities with the family and by the end of the process, the case manager will cheer the family on as they do things themselves. The last phase is transition. This is when the family has gained the skills and tools necessary to meet their own needs without or with limited professional support. The team will work with the client and their family to support them as they transition from formal Wraparound to continuing the process with their support network without professional intervention. Every success is celebrated along the way, especially during commencement.

FIGURE 1.7: ACTIVITIES IN THE PHASES OF WRAPAROUND

The activities listed above are provided during the four phases of the process. In the engagement phase the case manager will be meeting the client and their family for the first time and introduces the client to the Wraparound process. The case manager will also engage system partners and natural supports to introduce them to the Wraparound process. Initially, the case manager will complete the strength, needs and culture discovery assessment (SNCD) to obtain a comprehensive understanding of the client, their family and the situation. The SNCD must include information from multiple sources (client, family, providers, natural supports and collateral documentation). The case manager will obtain the information from multiple sources, will analyze the information and then will formalize the SNCD. The SNCD is then taken to the client to review, approve and sign. The case manager will provide a copy of the SNCD to the client and all appropriate team members. The family and the case manager will work together to build a team. The case manager will schedule the first team meeting and prepare the client and team members for this meeting.

Once the SNCD has been completed, the case manager will complete a crisis plan with the client and family. In the planning phase the team will come together for the initial team meeting and the development of the initial Wraparound plan. This meeting will be coordinated and facilitated by the case manager. During the implementation phase the team will implement the plan. The case manager facilitates team meetings every 30 days to review the plan, identify what is and is not working and makes changes as needed to ensure the plan continues to meet the client's needs. The case manager also monitors for transition readiness throughout the process. When the client is ready to transition from the formal Wraparound process, the case manager will guide the team through the transition phase. The case manager will facilitate a transition planning team meeting where the team supports the client in developing a formal transition plan. The case manager will work with the team to plan an appropriate commencement ceremony prior to case closure and document all Wraparound activities using Wraparound terminology throughout the process.

There are different key players in the Wraparound process. Every team member is important to the process as they have valuable insight and strengths to bring to the table. The team will know the responsibilities and mandates of all the team members. Every team member offers different experiences, resources and abilities to ensure the plan is achievable. Team members will share responsibilities on the plan to model positive support for the family. It is the role of the case manager to ensure that information is easily obtainable. The Wraparound process will help the team members be on the same page and

have a more successful working relationship with the client, family and other team members. The key players and responsibilities include:

Client and Family

- The client and their family are the most important team members as they guide the process.
- They are active participants and to guide the Wraparound process using voice and choice.
- They bring historical perspective.
- They are strength-based.
- Families identify natural supports and team members.
- Families are accountable for commitments they make.
- Families should be open to different ideas and options.
- Families should be open and honest about their needs.
- The team should consider all voices on the team, including the youth.

Facilitator/Case Manager

- Responsible to ensure all Phases and Activities of the Wraparound Process are provided to high fidelity.
- Is responsible for engagement throughout the process.
- Facilitates immediate Crisis Stabilization and future crisis planning.
- Completes the Strengths, Needs and Culture Discovery.
- Coordinates and facilitates the team.
- Prepares the team for meetings.
- Manages planning process.
- Writes formal plan developed at the team meeting.
- Case management activities.
- Educates and supports to promote self-reliance of the client and family.

- Maintains the team over time.
- Is responsible for transition monitoring and coordination/development of formal transition plan.
- Provides on-going collaboration and integration with all team members and education about Wraparound.
- Coordinates and facilitates monthly team meetings.

Peer Support Partner

- Engages through education and direct support.
- Helps carry out crisis stabilization.
- Models strengths-based approaches and shares experiences.
- Is a team member as needed; temporary surrogate support.
- Carries out plan strategies.
- Links to natural supports and community resources.
- Is a direct support to client and family.
- Liaisons to school and others.
- Directly encourages FamilyVoice and Choice.
- Supports and encourages graduates over time.
- Helps families with paperwork.
- Provides support in court.
- Models parenting skills.
- Educates about Wraparound.

Therapist

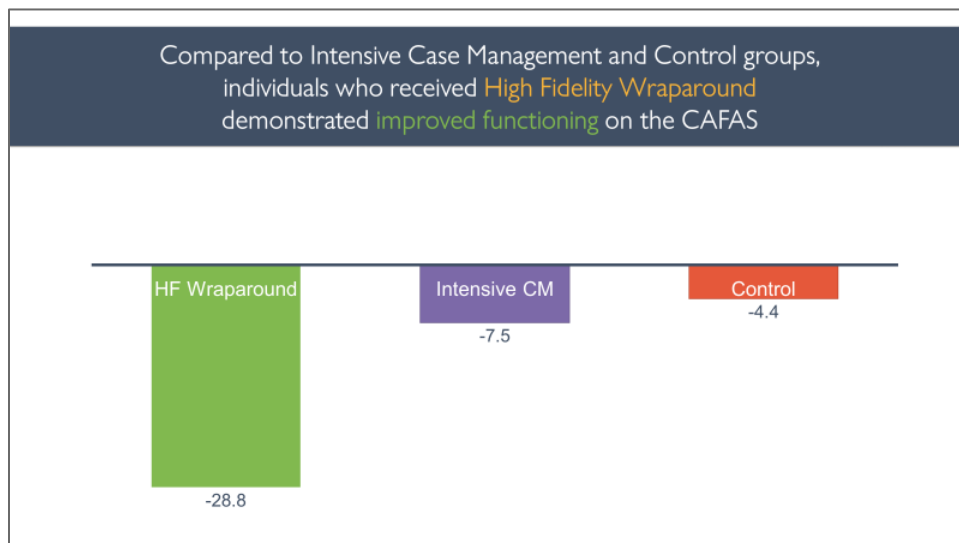
- Provides clinical assessment and service formulation.
- Fulfills functions of the clinical role/direct service provider.
- Is a consultant to the facilitator.
- Is a consultant to the Wraparound process.
- Is an active team participant and shares in the process.
- Is a consultant to other service providers and family members.
- Provides input into case management assessment.
- Provides crisis planning support by completing functional assessments.
- Provides feedback and insight to the day-to-day assessment of the client and family, suggests strategies that may meet the identified needs of the family.
- Assists the facilitator in thinking through clinical issues facing the team.
- Helps the facilitator be a strong leader and support conflict resolution.
- Aids the facilitator in facilitating the Wraparound process in a way that considers clinical aspects.
- Supports the client and family during the team meeting to ensure their voice is heard and respected.
- Helps prepare the client and family for team meetings and phases in the process.
- Informs and educate team members.
- Identifies strengths and needs of the client.

System Partners

- Champion the Wraparound Process in their agency and community.
- They are an active participant in the process.
- Supports the team and process.
- Maintains communication with the team and integrates resources/shares responsibility to ensure needs of all team members are met.
- Understands societal mandates of all system partners.
- Relays vital information.
- Relinquishes the expert role to the family.
- Actively support the youth and family through engagement.
- Recognizes team meetings as an opportunity to plan as a team and attends meetings.
- Actively brainstorms and prioritizes at meetings.
- Helps the team actualize system of care values.
- Is strength based.
- Is open to less traditional options (karate instead of therapy).

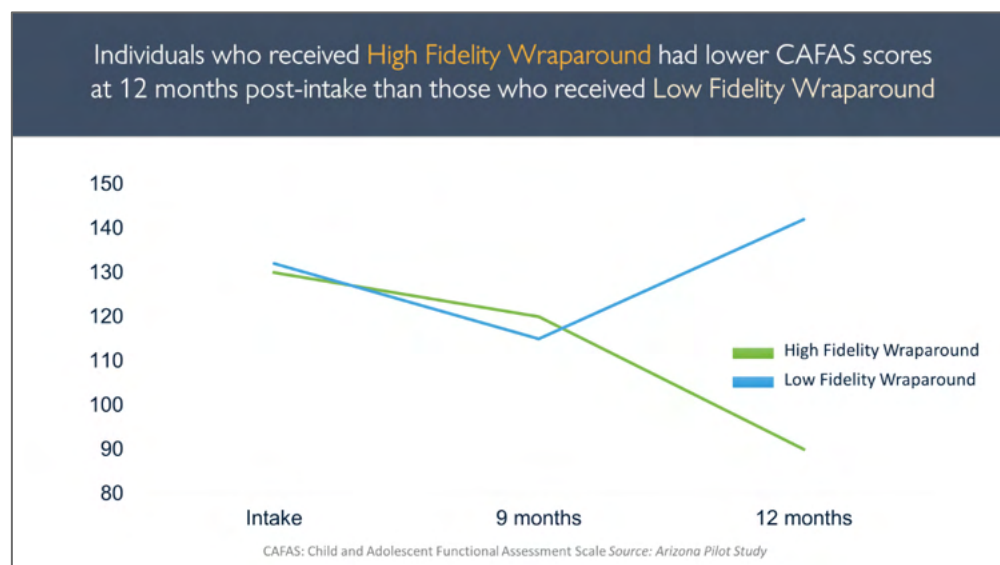
FIGURE I.8: WRAPAROUND RESEARCH

Wraparound has been studied and has shown to provide numerous positive outcomes for families and communities when implemented to high fidelity. On the National Wraparound Initiative website there are resources and research studies to support the above-mentioned outcomes.

FIGURE I.9: HIGH FIDELITY WRAPAROUND RESULTS

This picture explains a comparison study conducted in Nevada. In this study the research team is comparing telephonic case management to traditional targeted case management to Wraparound. The tool that was utilized to support the research was the CAFAS (Child and Adolescent Functioning Assessment Scale). The CAFAS is a 360-assessment tool that is completed by the parent, the child, the case manager and other people on the team. The results are compiled and reports the overall functioning of the child. The lower the CAFAS score the better the functioning of the child. In the picture the control group (telephonic CM) supports improvement in functioning by 4.4 points, intensive CM (Targeted CM) shows even more improvement at 7.5 points. The results of Wraparound show the CAFAS score improves by 28.5 points. This change is considered statistically significant because the difference between at risk youth, children with emotional disturbance and children with serious emotional disturbance is 30 points on the CAFAS. So, by implementing Wraparound children are able make significant changes to their lives.

FIGURE I.10: HIGH FIDELITY VS. LOW FIDELITY WRAPAROUND



In this comparison study High Fidelity Wraparound is compared to low fidelity Wraparound (traditional targeted case management). Wraparound case managers teach clients skills and how to access support systems. In low fidelity Wraparound, case managers are doing most of the work for the clients, (taking them places or completing referrals). This study also uses the CAFAS again as the measurement tool. Both groups begin at roughly the same CAFAS levels however, at the 9 months mark (which is typical commencement in this study), the low fidelity group is functioning a little bit better. However, when looking at the CAFAS score three months later, the low fidelity group is functioning worse than when the study started. The high-fidelity Wraparound group are functioning better. This is because in the low fidelity group the case manager did everything for them so when they had their next crisis, they fell apart. Interestingly, the high- fidelity group learned how to ask for help and seek support when they needed it.

FIGURE 1.11: GOALS OF WRAPAROUND



Case managers need to meet the needs that the client defines (along with legally mandated needs). This requires case managers to listen to the client and then help them prioritize their needs and select the options that will best meet their needs. Professionals won't always be involved in the life of our clients. Real change comes when families learn the skills to meet their own needs. Part of teaching families to meet their own needs is empowering them to have the confidence and skills to advocate for themselves. Case managers should encourage clients to take the lead throughout the process. Clients will face many more challenges after Wraparound ends. Meeting the needs of clients during Wraparound has limited value if case managers aren't helping families to develop the skills they need. Clients need help from their own communities well past formal Wraparound ends. It is the job of the case manager to ensure that clients build and strengthen natural support networks.

Meeting the self-defined needs of clients and families and enhancing the family confidence and skills to get their own needs met is called purposeful transition in Wraparound. It is important to strengthening their natural support network while integrating efforts. The goal of Wraparound is to improve engagement, self-efficacy, social support, and sustainability of positive outcomes. In summary, successful Wraparound involves parents, children, professionals and natural supports working together to meet the individual needs of families.

VIDEO WORKSHEET: WHAT IS WRAPAROUND?

Watch the video and answer
the following questions.

1. What is Wraparound?

2. What are the 10 principles of Wraparound?

1. _____
2. _____
3. _____
4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

3. What are the 4 phases of the Wraparound process?

1. _____

2. _____

3. _____

4. _____

4. What is the role of the Wraparound facilitator?

TABLE 1.1: FREQUENTLY USED WRAPAROUND TERMINOLOGY

Terminology	Definition
Action Steps	A detailed list of specific measurable activities that will be implemented to achieve the family's goals.
Child & Family Team (CFT)	A group of people selected by the family that meets with the child and family to set goals and develop a strengths-based plan of action to meet those goals.
Coach	A person who helps a Wraparound case manager refine his or her skills in leading the Child and Family Team.
Collaboration	Agencies are familiar with each other's missions and roles working with one another at the child/family level but often retain single system decision-making power and planning.
Community Based	The wraparound team implements service and support strategies that promote child and family integration into home and community life.
Crisis Plan	A plan that is developed with the family to identify potential crisis and identify interventions designed to prevent predicted future crisis.
Culturally competent	The Wraparound process demonstrates respect for and builds on the values, preferences, beliefs, culture, and identity of the child/youth and family, and their community.
Family Culture	The unique way that a family forms itself in terms of rules, roles, habits, activities, beliefs, and other areas.
Family Driven	Families have a primary decision-making role in the care of their children.

Family Mentor (Family Support Partner)	An individual who has experience successfully navigating and accessing the social service delivery system and is willing to share knowledge, skills, experiences, resources, time and support to families.
Family voice and choice	Planning is grounded in family member perspectives and the team strives to provide options and choices such that the plan reflects family values and preferences.
Flex Funds	Money used for either one time or occasional services to support service plan goals.
Formal Supports	Services that are provided to the child or family by a person who is a paid professional.
Immediate Stabilization	Situations that cannot wait for formal planning (basic needs, safety, legal).
Individualized Care	Care or services that are sought or designed to meet the unique needs of child and family.
Informal Supports (Natural Supports)	These are resources that already exist in the family, their support network, or in their community (friends, family members, teachers, neighbors, social connections, etc.)
Integration	Key staff from different agencies work with each other, share decision-making in a team format that includes the family and produce a single plan that meets all system mandates.
Life Domains	Areas of daily activity critical to healthy development of a child or successful functioning of a family.
Long Term Vision (Long Term View)	A statement constructed by the youth and family that describes how they wish things to be in the future.
Needs	Something that needs to change for the child and family to have a better life.

Outcomes	Child, family, or team goals stated in a way that can be observed and measured.
Purposeful Transition	Implementing activities that promotes successful transition.
Strengths	Strengths are the assets, skills, capacities, actions, talents, potential and gifts in each team member.
Strengths Based	The plan is based on the unique strengths, needs, values, norms, preferences, culture and vision of the child, family and community.
Strengths, Needs and Culture Discovery (Assessment)	The Strengths, Needs, and Culture Discovery (SNCD) is a strength based comprehensive assessment of the child and family across different life domains.
Systems of Care (SOC)	A comprehensive spectrum of mental health and other support services that are organized to meet the multiple and changing needs of children, youth and families.
Team Mission	A statement crafted by the wraparound team that supports the family vision.
Transition plan (Discharge Plan)	A document developed with the family that will be a guide for the family to move forward after formal Wraparound ends.
Unconditional Care (Persistence)	Despite challenges, the team persists in working toward the wraparound plan until the team determines that a formal wraparound process is no longer required.
Wraparound approach (Wraparound Informed)	When the principles of wraparound are purposefully applied to services or supports that are different from the full wraparound process.
Wraparound Case Manager	A person who is trained to coordinate the Wraparound process for an individual family. (Can also be called Case Manager, Care/Service Coordinator, Navigator, Targeted Case Manager, Youth and Family Advocate)

Wraparound Champion	Is a professional who has demonstrated the knowledge and skills necessary to motivate and support staff, agencies and communities to implement and continually improve the wraparound process and related systems of care issues.
Wraparound Fidelity	How fully the wraparound process adheres to the 10 principles and activities of the wraparound process.
Wraparound Phases	Ten principles of Wraparound are performed during four phases: engagement, planning, implementation and transition.
Wraparound Plan (Plan of Care or service plan)	A document that describes the work to be undertaken to meet the family's needs and achieve the family's long-term vision.
Wraparound Process	An intensive, team-supported, individualized care planning process that follows a series of steps.
Wraparound System of Care	Organized network of formal & natural support providers collaborating to develop an integrated system.
Youth Guided	The youth is engaged as equal partners in the Wraparound process.

ACTIVITY I

10 PRINCIPLES OF WRAPAROUND

There are Wraparound Value Cards associated with each of the Wraparound Principles:

1. Family Voice and Choice
2. Strength-Based
3. Team-Based
4. Persistence
5. Individualized
6. Natural Supports
7. Community-Based
8. Culturally Competent
9. Collaboration & Integration
10. Outcome-Based/Cost Responsible

Instructions:

Break into small groups and select a spokesperson from each group. Assign each group a card with a Wraparound principle. If the groups are large or there aren't enough participants, pass out two cards to each group. Each group should have different Wraparound principles. Instruct groups to discuss their assigned principle for about ten minutes. Ask the groups to come up with examples on how they currently operationalize the principle and how use it on the job.

- After ten minutes of discussion, each spokesperson reports to the larger group how they operationalize and use the principle in their current position.
- Allow time for a large group discussion.

10 PRINCIPLES OF THE WRAPAROUND PROCESS

- **Family voice and choice.** Family and youth/child perspectives are intentionally elicited and prioritized during all phases of the wraparound process. Planning is grounded in family members' perspectives, and the team strives to provide options and choices such that the plan reflects family values and preferences.
- **Team based.** The wraparound team consists of individuals agreed upon by the family and committed to them through informal, formal, and community support and service relationships.
- **Natural supports.** The team actively seeks out and encourages the full participation of team members drawn from family members' networks of interpersonal and community relationships. The wraparound plan reflects activities and interventions that draw on sources of natural support.
- **Collaboration and Integration.** Team members work cooperatively and share responsibility for developing, implementing, monitoring, and evaluating a single wraparound plan. The plan reflects a blending of team members' perspectives, mandates, and resources. The plan guides and coordinates each team member's work towards meeting the team's goals.
- **Community-based.** The wraparound team implements service and support strategies that take place in the most inclusive, most responsive, most accessible, and least restrictive settings possible; and that safely promote child and family integration into home and community life.
- **Culturally competent.** The wraparound process demonstrates respect for and builds on the values, preferences, beliefs, culture, and identity of the child/youth and family, and their community.

- **Individualized.** To achieve the goals outlined in the wraparound plan, the team develops and implements a customized set of strategies, supports, and services.
- **Strength-based.** The wraparound process and the wraparound plan identify, build on, and enhance the capabilities, knowledge, skills, and assets of the child and family, their community, and other team members.
- **Persistence.** Despite challenges, the team persists in working toward the goals included in the wraparound plan until the team reaches agreement that a formal wraparound process is no longer required.
- **Outcome-based.** The team ties the goals and strategies of the wraparound plan to observable or measurable indicators of success, monitors progress in terms of these indicators and revises the plan accordingly.