

WRAPAROUND COACHING MANUAL

Wraparound Florida Training
& Coaching Video Companion

Module 4:
Crisis Planning

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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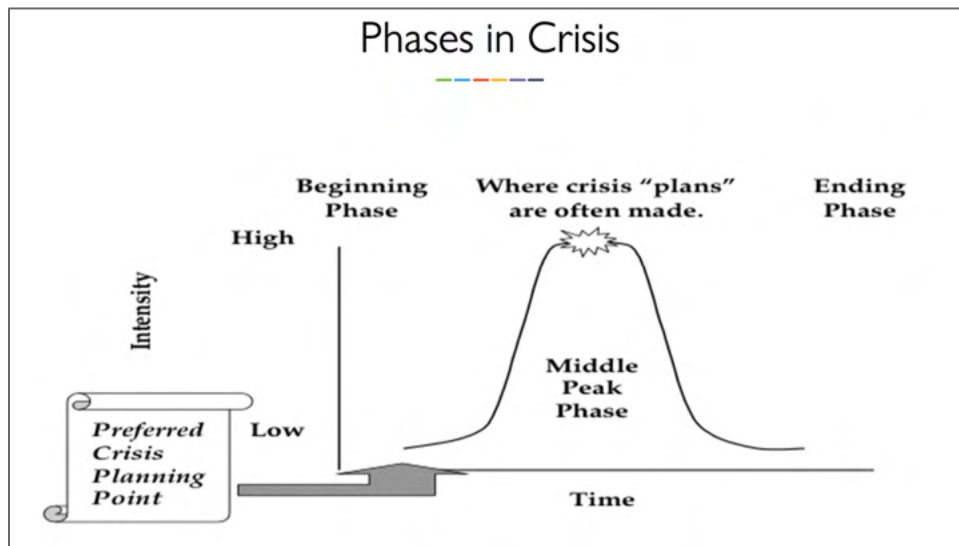
MODULE 4

CRISIS PLAN

One of the important components in the Wraparound process is crisis planning, because everyone experiences crisis at some point in their life. Experiencing crisis does not mean that someone must feel powerless. Because most individuals and families involved in the Wraparound process experience crisis, case managers need support in developing crisis plans. The Wraparound approach to crisis planning is a proactive approach which is designed to predict the crisis, so a plan can be put in place to prevent the crisis from ever occurring. Every individual in Wraparound should have a crisis plan. The crisis plan is developed early in the process and is implemented throughout the process based on the identified need. The individual identifies the crisis and what they can do to prevent the crisis from occurring. The plan is continuously monitored during service delivery to ensure that the needs of the individual and their family continue to be met. The plan should be revised as necessary. The plan must be signed and approved by the individual and family and a copy is provided to all participants involved in the plan. The goal is that every person involved in preventing the crisis knows their contribution to the process.

It is important to help individuals and families understand that crisis planning is not difficult. In fact, people have been instinctively planning to prevent crisis for years. Some examples of how society prevents crisis includes having infants sleep in cribs, baby proofing homes, teaching children to look both ways before they cross a street, and teaching youth to not drink and drive. These activities are designed to prevent crisis from ever occurring.

Figure 4.1 Phases in Crisis



Unfortunately, many families do not naturally use this same predictive philosophy when planning for behavioral health crisis. Typically, families seek help only when the crisis behavior is at maximum intensity—the top of the crisis bell curve. At this point there is not much that anybody can do to resolve the crisis. Wraparound works with families to teach them to intervene in potential crisis situations at the low beginning phase of a potential crisis so they can provide support to prevent the crisis from occurring.

A coach should work with the case manager to help the case manager understand the purpose of a crisis plan and how to effectively complete one with an individual and their family. A crisis plan is a shared plan with multiple supports. The plan should be a mix of formal and natural supports, with an emphasis on natural supports and interventions. When coaching case managers on crisis planning, coaches should utilize the Wraparound coaching video.

Discussion Activity 4.1: Crisis Plan

As noted above crisis planning is something that all humans do to one extent or another. The focus here is to assist the practitioner to learn to explore the family's culture as a foundation for the crisis plan. Several helpful aspects of reflective coaching/supervision are relevant here.

- Forming a trusting relationship between coach and case manager in order to explore their feelings and thoughts regarding safety issues and the crisis with these participants.
- Paying attention to all the relationships is important and how each of these relationships affects the other.
- Ask questions that encourage exploring details about the types of crisis the family experiences, potential team members that can help, and emerging relationships of those involved.
- Listen and ask open ended questions.
- Be patient and allow the case manager to discover solutions on their own perhaps by using Motivational Interviewing.
- Remain emotionally present.
- Teach and guide regarding specific aspects of the functional assessment/crisis plan and the Wraparound process.
- Use role playing to help in increasing the comfort level and skill building of the case manager.
- Nurture, support, and encourage the case manager.
- Apply the integration of emotion and cognition (head and heart).
- Foster the reflective process to be internalized by the case manager.
- Attend to how emotional and cognitive reactions to the content affect the process.

The Wraparound Coaching video acts as an initial guide to the coaching tool. Coaches should ask case managers to review the video and take notes. There will be a short role play at the end of the video. It is best to provide case managers with the coaching tool to review while watching the role play. Coaches should instruct case managers to look for the action steps being completed. Case managers will not see every step being completed due to this being a short example, but the case manager will be able to obtain an idea of what should take place during a crisis planning meeting. A typical crisis planning meeting may take up to an hour. Sometimes the planning session is completed with just the family or it may include other team members. After watching the Wraparound coaching video, ask the case manager the questions found in Discussion Activity 4.1 (located on previous page) for further understanding.

During the coaching process, the coach should go over the coaching tool in detail with case managers. This is helpful so case managers know what is expected of them when they are being scored for proficiency. This practice will help case managers feel more comfortable when they are being shadowed by their coach and better prepared to support the client during the crisis planning process. Next, the coach should review the actual crisis plan form with the case manager and provide a detailed summary of what is being asked in each section on the plan (review the Sample Child and Family Crisis Plan).

Figure 4.2 Child and Family Crisis Plan

Child and Family Crisis Plan	
Detailed summary of Potential crisis or safety situations (How would someone know a crisis is happening? What does it look like?)	
Warning signs/Triggers	What is likely to set off a crisis? (Triggers) What warning signs are seen before a crisis happens? (Verbal and physical signs; internal and external signs)
What / Who is Helpful?	
What / Who is Not Helpful?	
Intervention Steps to be Taken Clearly identify who, what, when, where and how will each action step be completed?	

Detailed Summary of the Crisis

- The case manager should provide a detailed summary of the crisis that is identified by the client. The information about the crisis in this section should be specific enough that everyone on the team will recognize when the crisis is occurring. The summary should specify behaviors, fears and actual past events that are displayed during the crisis. We should know how often the crisis occurs and what are some of the consequences of past crisis behaviors.

Warning Signs and Triggers

- In this section the case manager should document what is likely to start the crisis behavior, commonly known as triggers. Triggers could be certain situations, people, places and things. The information in this section should be clear and list as much detail about the trigger as possible. By knowing what is likely to trigger a crisis, a plan can be put in place to prevent encountering that trigger or lessen the impact of that trigger. Next, this same section should include external and internal warning signs. External warning signs lets others know when actions need to be taken to prevent

the crisis. This could be the client raising their voice, pacing, shaking their leg, getting quiet and so forth. Internal warning signs are felt by the client and lets the client know that they need to act before they go into crisis mode. This could be racing thoughts, faster heart rate, breathing faster, sweaty hands and more. By documenting the external and internal warning signs, the plan is more likely to be effective. Being aware of these warning signs ensures that there is a better chance of the plan being implemented at an earlier stage on the crisis bell curve.

What/Who is Helpful

- In this section the case manager should work with the client to understand who and what has been helpful in past crisis situations. The case manager should identify important people in the client's life and how they help the client in difficult situations. The case manager must also take time to understand the client's interests, hobbies and other activities that they utilize as coping mechanisms. Once the case manager understands who and what is helpful to the client, the plan should include those people and things in the action steps of the crisis plan. This supports the client with a plan that they are familiar with and are more likely to follow.

What/Who is Not Helpful

- In this section the case manager will need to identify who and what is not helpful in a crisis. These tend to be actions that escalate the situation. By understanding what is likely to escalate a crisis, the case manager can develop a plan that will avoid actions that will likely place the plan in jeopardy of failing.

Interventions/Action Steps

- The action steps should be clear and easy to follow. There should be a mix of formal and natural supports with an emphasis on natural supports. Natural supports are people, places and things that are found naturally in the environment and are used to support the client and deescalate the situation. This can be a friend, an emotional support animal or going for a walk. The action steps should be in the

correct order of action with timeframes. The action steps should be from least restrictive to most restrictive. The client, family and their team should know when to transition from one action step to another and to identify when one action step is not working. The action steps should be clear in determining who will do what, when they should do it, and how they should do it. The plan should include all names and phone numbers for team members involved on the crisis plan as well as information for the Mobile Response Team.

It is helpful for new case managers to review sample crisis plans written by more seasoned case managers. Another effective way to coach crisis planning is by allowing the case manager to practice writing effective crisis plans. Ask the case manager to review a flawed crisis plan (utilize Thomas Flawed Crisis plan in this manual) and have the case manager rewrite the plan to be more effective to support the client. After the case manager works on the flawed plan for Thomas, the coach should review the material with the case manager. The coach should go through each section on the plan and use the coaching tool to score it. Make sure that the new plan provides enough detail to be able to effectively support the client in the event of an actual crisis. The coach should also provide the case manager with a sample crisis plan for future reference for their toolkit (see Thomas Effective Crisis Plan in this manual).

Unfortunately, sometimes crisis plans fail. When a crisis plan fails and the case manager does not know what interventions to put in place next, a functional assessment is helpful. The case manager can ask a therapist to complete a functional assessment with their client. The functional assessment is simple to complete; therefore, any therapist can assist the case manager. The therapist will meet with the individual and complete the functional assessment

form (see functional assessment example and key components of a functional assessment in this manual) to get an understanding of why the behavior is occurring in the first place. Sometimes understanding the function of the crisis behavior will allow the individual, family and team to develop a new plan. Once we know the function of the crisis behavior, the appropriate intervention will deter the crisis behavior from occurring. For example, if a person is using drugs sporadically because they enjoy the camaraderie of the friends that they use drugs with, when an intervention is determined it must address an opportunity to spend time with peers. If instead the intervention that is put in place is that the client will be checked in for detoxification, is that going to meet the needs of the client that is recreationally using substances? Probably not; because the function of the behavior was to be around peers, detoxification is neither indicated nor will it result in lasting decrease in substance use behavior. Perhaps a more effective intervention would be pro-social activities with non-drug using individuals. Once a rapport is built with the client, they would decide which activities they would want to plan to decrease their substance use. Understanding the function of the behavior helps us find the right intervention to support the crisis.

Figure 4.3 Steps in a Functional Assessment

Steps in a Functional Assessment



Key points for coaches to use when instructing case managers on how to complete a crisis plan include:

- Complete a functional assessment when necessary.
- Explain what a crisis plan does (prevents a crisis).
- Develop a crisis plan with the family utilizing their identified crisis, stressor or situation. This should be something they identify as a stressor for their family.
- Include detailed triggers; what is likely to set off a crisis.
- Warning signs should be external and internal warning signs. These are signs that others can see, and the individual will know what identifies that a crisis is about to start.
- Identify what is helpful and use what is helpful in the action steps.
- Identify what is not helpful and implement action steps that avoid those areas.
- The steps should be in the correct order with timeframe and persons responsible for the action step.
- Be detailed to ensure that the team knows what to do, how to do it and when to do it.
- Have the family sign the crisis plan, leave a copy with the family that day. If there isn't a duplicate form, take a picture of the plan and email it for printing and placement in the individual's file.

EXAMPLE 7: INDIVIDUAL CRISIS PLAN

Client Name:	Medical Record #:
Applicable Emergency #'s:	Date:

<p>Detailed summary of Potential crisis or safety situations</p> <p>(How would someone know a crisis is happening? What does it look like?)</p>	
<p>Warning signs/Triggers</p>	<p>What is likely to set off a crisis? (Triggers)</p> <p>What warning signs are seen before a crisis happens? (Verbal and physical signs; internal and external signs)</p>
<p>What / Who is Helpful?</p>	

<p>What / Who is Not Helpful?</p>	
<p>Intervention Steps to be Taken</p> <p>Clearly identify who, what, when, where and how will each action step be completed?</p>	

Mobile Crisis Team Available 24 hours / 7 days a week
 Insert crisis team information here

 Client Signature & Date

 Guardian Signature & Date

 Guardian Signature & Date

 CM Signature & Date

 CM Supervisor Signature & Date

 Other Signature & Date

EXAMPLE 8: THOMAS FLAWED CHILD AND FAMILY CRISIS PLAN

Client Name: Thomas Mark	Date: 1-25-2017	Medical Record #: 12345
Detailed summary of crisis (Concerns / Issues/ what does a crisis look like)		
He becomes aggressive. He has a difficult time with redirection and the parents get frustrated. Everyone starts yelling and property is typically destroyed. There have been physical altercations in the past.		
Warning signs		
<p style="text-align: center;">What is likely to set off a crisis?</p> <p>Thomas becomes upset when he is told no. When he is playing a game and he loses he gets upset. When he cannot go out with his friends, he becomes upset.</p> <p style="text-align: center;">What happens before a crisis?</p> <p>He starts yelling and makes inappropriate comments.</p>		
What / Who is Helpful?		
<p>It is helpful if he is given space to calm down or when he can do an activity that he enjoys?</p> <p>Talking to his friends is helpful.</p>		
What / Who is Not Helpful?		
He gets upset when he is given restrictions or has things taken away.		
Intervention Steps to be Taken		
What, who, when, where and how?		
<ul style="list-style-type: none"> • When Thomas gets upset, he will go to his room. • The parents will call the therapist. • The parents will call the crisis team number for assistance. • If the crisis occurs and Thomas becomes aggressive, the parents will call 911. 		

Mobile Crisis Team Available 24 hours / 7 days a week
555-141-2222, option 2 or 555-142-2223

Client Signature & Date

Guardian Signature & Date

Guardian Signature & Date

Support Signature & Date

Support Signature & Date

WCM Signature & Date

EXAMPLE 9: THOMAS EFFECTIVE CHILD AND FAMILY CRISIS PLAN

Client Name: Thomas Mark	Date: 1-25-2017	Medical Record #: 12345
Detailed summary of crisis (Concerns / Issues/ what does a crisis look like)	<p>Thomas tends to become upset when he does not get his way and is told no. He starts to yell, slam doors, throw things at his parents and hits his mother with his fist. He has a difficult time with redirection and the parents get frustrated. When the parents get frustrated, they start to yell at Thomas in a loud tone and an argument occurs. This typically last 1-2 hours. When an argument occurs, Thomas makes threats to harm himself or his family. This happens at least 2 times per week. The goal of the plan is to ensure safety, to prevent fighting and destruction of property.</p>	
Warning signs	<p style="text-align: center;">What is likely to set off a crisis?</p> <p>Thomas becomes upset when he is told no. He gets upset when his parents yell at him or when his sister makes comments. When he is playing a game and he loses he gets upset. When he cannot go out and with his friends, he becomes upset.</p> <p style="text-align: center;">What happens before a crisis?</p> <p>He will start by being quiet and you will see him breath heavier. He will become louder in his tone and make inappropriate comments (whatever, who cares, shut up). He will stare at the wall, shake his leg and ignore being spoken to.</p>	

What / Who is Helpful?	<p>It is helpful if he is given space to calm down or when he can do an activity that he enjoys?</p> <p>It is helpful if he is given space to calm down or when he can do a different activity that he enjoys such as fishing, listening to music, playing video games or just being alone.</p> <p>Talking to his uncle Jim is helpful.</p>
What / Who is Not Helpful?	<p>He becomes more upset when he is yelled at and told that he is doing something wrong. He gets upset when he is given restrictions. He gets upset when mom ask him numerous times what's wrong. He gets upset when his siblings make fun of him for getting in trouble.</p>

<p>Intervention Steps to be Taken</p> <p>What, who, when, where and how?</p>	<ul style="list-style-type: none">• If Thomas starts to show signs that he is getting upset, Mom will remove his siblings from the room and Dad will take the lead and interact with Thomas. If the father is not home, the mother will take the lead but will not raise her voice or repeat herself numerous times.• When Thomas is getting upset, he will ask to go to his room and play video games. He will be allowed to play his video games for 15 minutes.• Thomas will be redirected to an activity such as fishing, talking to his friend or going for a walk. The parents will allow Thomas to do an activity of his choice for a time limit of 30 minutes.• If Thomas is still upset after engaging in a choice activity for 30 minutes, his parents will suggest Thomas call his Uncle Jim. Uncle Jim will talk to Thomas. If needed, uncle Jim will come to the home and go for a walk with Thomas.• If uncle Jim is unable to come over for a walk or not available, Thomas will ask to go to his room for alone time. The parents will allow Thomas time alone, undisturbed for 30 minutes.• If Thomas is unable to be calm or is a danger to himself, others or property within 30 minutes, the family will call the Mobile crisis team.
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Mobile Crisis Team Available 24 hours / 7 days a week
555-141-2222, option 2 or 555-142-2223

Client Signature & Date

Guardian Signature & Date

Guardian Signature & Date

Support Signature & Date

Support Signature & Date

WCM Signature & Date

EXAMPLE 10: SAMPLE FUNCTIONAL ASSESSMENT BLANK

Therapist: _____		Wraparound Facilitator: _____	
Date: _____		Individual: _____	
Step	Question/Answer		
1	Clearly describe the potential crisis behavior:		
2	What happens before the behavior occurs (triggers)? Are there times/situations where the behavior does not occur? Why?		
3	What happens during the behavior?		
4	What happens after the behavior occurs?		
5	Best guess about why the behavior occurs? (function)		
6	Select a positive replacement behavior		

EXAMPLE 11: SAMPLE FUNCTIONAL ASSESSMENT BLANK

Key Components of the Functional Assessment

1. Define the behavior:
 - In a few simple sentences describes the behavior of concern.
 - Be specific enough that everyone on the team will recognize it if it occurs.
2. What happens before the behavior? What are the triggers?
 - When does the behavior occur?
 - Look for exceptions. The brief strategic school of systemic therapy and behaviorists remind us to find out about a time when the challenging behavior DOES NOT occur. What's different about these times? What triggers the behavior to NOT occur? Or striving for better grammar, what triggers the alternative behavior we would like to see occur more frequently?
3. What happens during the behavior?
 - What happens specifically? Who does what?
 - How often does the behavior occur?
 - How long does it last?
4. What happens after the behavior?
 - What are the consequences of the behavior? How do people feel afterward? Does the behavior result in the child getting something or doing something he/she wants to do?
 - Does the behavior result in the child not doing something?
5. What's the best guess as to why the behavior is happening?

- This element of the functional assessment involves suggesting hypotheses for what need is being met by the behavior. Get key informants best guesses on this and select the one that is most plausible.

6. Select a positive replacement behavior:

- This part of the functional assessment involves looking at strengths, culture, and vision to identify a positive behavior to serve the same function as the problem behavior.

See the following Functional Assessment of Sara's running away and drug use behavior:

Sample Functional Assessment	
Wraparound Facilitator: Diane Miller Date: 7.31.16 Family: Sara Rodriguez	
Step	Question/Answer
1	<p>Clearly describe the potential crisis behavior:</p> <p>Sara runs away on the weekends. It usually happens twice a month. Rosa is unsure of the location and Sara won't tell. When she runs, she goes to raves, parties, and uses drugs. One time she was gone for 9 days and found passed out from drug use in an abandoned building.</p>
2	<p>What happens before the behavior occurs (triggers)? Are there times/situations where the behavior does not occur? Why?</p> <p>Sara's friends call her stating, "I need you." Sara's friends call when they get in fights with their parents or boyfriends. When Sara's boyfriend runs away from his home, she leaves her home and goes to look for him.</p>
3	<p>What happens during the behavior?</p> <p>When Sara runs, she most often uses drugs (Xanax "bars", ecstasy "e", marijuana "weed"). Sara has been arrested for loitering, resisting arrest, and trespassing each when she ran away. Sara has also been date-raped and has overdosed when she has run away.</p>

4	<p style="text-align: center;">What happens after the behavior occurs?</p> <p>Rosa has many concerns about her safety when she runs. When Sara finally gets home, she tries to talk to her about her safety and how worried she is when she runs. Rosa also feeds her a good meal and calls Wendi, the youth minister, to try to get Sara back into church. Sara always takes a long shower when she gets back home.</p>
5	<p style="text-align: center;">Best guess about why the behavior occurs? (function)</p> <p>Mom states, "Sara is so worried about being accepted by friends." Sara states, "if my friends need me, I will do anything."</p>
6	<p style="text-align: center;">Select a positive replacement behavior</p> <ul style="list-style-type: none"> • Help friends over the phone - have them come to the house • Therapist will teach Sara skills, so she can help her friends over the phone - YCM will get a list of phone numbers for YES, Covenant House, and Teen Tapes