

WRAPAROUND COACHING MANUAL

Wraparound Florida Training
& Coaching Video Companion

Module 6:
Initial Child and Family
Team Meeting

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 6

INITIAL CHILD AND FAMILY TEAM MEETING

Wraparound team meetings are strengths-based, and the client is supported by the team to help them meet their needs. Planning and decision making are done as a team and never without the client. During every meeting the relevant members of the team should be present. Although some team members may not attend a meeting, the case manager should continue to relay the information from any meeting to the team members that were not present.

When determining who will be on the family's team, the case manager wants to ensure that the appropriate people are included. The case manager helps the family identify people in their lives that care about them and that will play a role in their success. Once the team is determined, the team should make a commitment to work together, share ideas, resources and be held accountable to each other. The goal is to ensure that the team members will support the client in reaching their vision. Every team member will play an active role in the process and share responsibility for the success of the plan.

It is the responsibility of the coach to support the case manager in the learning process. When it comes to team meetings, the Wraparound Coaching video is an initial guide to the Coaching tool. Case managers should review the video about the initial team meeting and be encouraged to take notes. There will be a short role play at the end of the video. Please provide case managers with the coaching tool to review while they are watching the role

play. Encourage case managers to look for the action steps being completed. Case managers will not see every step being completed due to this being a shortened example, but the case manager will be able to obtain an idea of what should take place during an initial team meeting. A typical initial team meeting can take between one hour and an hour and a half to complete, depending on the participation of the team. After watching the video, discuss the following questions below with the case manager.

Discussion Activity 6.1: Initial Team Meeting

- What strengths do you think the case manager brought to the planning process?
- What were the biggest challenges?
- What would you do differently as the facilitator?
- What is one thing you think the family walked away with?

It is the responsibility of the coach to help case managers become effective Wraparound case managers. Whether it's a big or a small meeting, someone must guide the process so that the team accomplishes what they have set out to do. While a group of people might come together to work towards a single vision, one person needs to concentrate on how the team is going to move through the agenda and address the goals of the meeting effectively. This is the person that is called the "facilitator." The meeting facilitator will need to

focus on how the team participates in the planning process, not just on what is achieved. A meeting facilitator is neutral and never takes sides. The most important role of the meeting facilitator is to ensure that everyone's voice is heard and that the meeting is a safe place for all participants. The meeting facilitator should pay attention to how the meeting is structured and how well the participants are prepared to participate. This includes:

- Making sure that everyone feels comfortable participating.
- Developing a structure that allows for everyone's ideas to be heard.
- Making members feel good about their contribution to the meeting.
- Making sure the group feels that the ideas and decisions are theirs.
- Supporting everyone's ideas and not criticizing anyone for what they say.

As a coach, it is important that case managers are instructed to follow the action steps on the coaching tool in detail to show proficiency and to ensure that the client is fully prepared to be an active participant. As a coach, going through each action step on the coaching tool is important. This allows for the case manager to grasp the concepts being taught and what is expected of them. It is the responsibility of the coach to help the case manager understand the following information.

The information below should be copied and shared with the case manager.

Every team and every team meeting are unique. The Wraparound case manager should be fully prepared for each meeting. The case manager needs to ensure that they have engaged each team member and fully explained the process. It is also important that every team member understands their role prior to the team meeting. The case manager must have all documents and materials with them when they arrive for the meeting. Some case

managers have found it beneficial to arrive a few minutes early to set up. This also allows the case manager to check in with the family to ensure they are comfortable.

The agenda should have been reviewed with all team members prior to the team meeting. By doing the groundwork in advance, the case manager sets the meeting up for success. The case manager wants to ensure that the team sticks to the timeframe that is set for the meeting. It is important to respect everyone's time by adhering to the agenda. The case manager also wants to ensure that the meeting starts and ends on time and sticking to the agenda will assist in doing this. A successful meeting is one where everybody feels that participating in the meeting was beneficial for them and the family.

The agenda will be the guide for the planning process. It is the role of the case manager to follow the agenda as much as possible to ensure that the meeting is productive and stays on track. It is necessary to inform the team members that the team will be following the agenda. If a team member has something they would like to address, it will be placed on a parking lot until after the meeting. If there is time after the agenda has been completed to discuss other topics, the team can choose to address additional items.

During the meeting the case manager should clarify the family vision and solicit the team commitment to helping the family reach their vision. The case manager should spend time identifying family and team strengths, then use these strengths to meet needs on the Wraparound plan. The team should discuss the prioritized needs of the family and facilitate team brainstorming of ideas to meet those needs. The family will choose what interventions best match their family as they have the final say in the plan development. By the end of the

meeting, the case manager should check in with the team to ensure satisfaction with the process and allow for suggestions for future meetings.

During coaching it is helpful to review a typical agenda with the case manager. This is an opportunity to model the process because a case manager is responsible for reviewing the agenda with the family. This review ensures that the case manager understands the agenda and what is expected of them during the team meeting. During the team meeting the case manager will stand up in front of the team with a flip chart and lead the team through the brainstorming process. Every item on the agenda will be written on a page on the flip chart. The case manager will document everything the team comes up with on the flip chart.

When working with new case managers, the coach may need to model the process by going over the agenda with the case manager using a flip chart. Because Wraparound is a visual process, it may be helpful for the case manager to see the process during coaching. This may include pre-populating the flip chart paper with different agenda items on each page. It is also helpful to discuss every item in detail and provide examples as if the coach were facilitating a meeting. For example, the coach should pretend they are holding a team meeting and are presenting an agenda item to a team. Modeling action steps will help prepare case managers for when they are facilitating their own team meeting. Here are the components of a typical agenda (Review Example CFT Agenda included in this module).

Introductions:

This is the opportunity for everyone on the team to introduce themselves and state their role on the team. This allows for all team members to know who they will be working

with and those connected to the family. Typically, case managers have used this as an opportunity to have the team members state strengths about the client and the family.

Confidentiality

Confidentiality is important to any team. The case manager must address confidentiality with the team at the beginning of the meeting, it is important that everyone understands confidentiality and its consequences. The case manager must discuss times when confidentiality may be broken and ensure team members understand. Typically, the case manager will pass out a sign in sheet for the team to sign that has a statement of confidentiality written on it (See Sample CFT Sign in Sheet).

Ground Rules

Sometimes team meetings are challenging because team members may come with their own ideas of what should be discussed. Case managers can avoid friction by coming up with ground rules as a team. Everyone should have a say in the development of the ground rules. When a situation arises, the team will refer to the ground rules to keep the meeting strengths-based and on track. To ensure participation and commitment to the rules, it is best to have the team develop ground rules as one of the first steps in the process. This builds investment in following the rules. Some common ground rules are:

- One person speaks at a time.
- Listen to what other people are saying.
- No shame, no blame.
- Use inside voices.

- Respect each other.
- Put cellphones away during the meeting.

Family Vision/Team Mission:

The long-range vision is what the family strives to achieve by the end of the Wraparound process. This is the goal everyone is working towards. The family knows what they want to focus on, and the team will work together to help the family achieve their goal. The team should keep this vision in mind when making decisions. Everything the team does is designed to achieve the family vision. The family vision is the starting point for planning.

Family Strengths including Natural Supports:

The first item on the agenda is introducing the team members. It has been found to be very effective to have family members introduce team members and list why they are included on the team. It is also helpful when every team member can identify a strength about the client and family. These strengths will then be used for the planning process. The case manager should make sure that the strengths are tangible (such as talents, interests or skills) so that they can be included on the plan. Making a list of the strengths as they are stated is helpful because:

- This sets a strengths-based tone for the meeting.
- It shows that each team member and their contributions are valued.
- It is an easy way for the family to take the lead in part of the meeting.
- Preparing this in advance will help the family and team members identify strengths.

The Family and Child Needs and Prioritized Needs:

The case manager will lead the team in identifying client and family needs. The case manager should always start with the client. After asking the client what they feel they need to do to achieve their vision, the case manager should then ask every team member to add input into what they think the client and family needs to reach their vision. Once the list is solidified, the case manager will then ask the client what they want to work on first. This will be the priority need.

Ways to Meet the Priority Needs including Who will do What:

Once the client identifies what needs they want to address first, the team will actively brainstorm ways to meet that need. The client will have the final say regarding what they will do to reach their goals. Every team is unique, and every team member brings with them different ideas, resources and skills. By working together as a team, every team member will share what they know. Because every team member has a toolkit of resources that can meet different needs, together they can solve complex challenges. By working as a team, many different options will be identified to meet the needs. Through this collaboration, the family will have creative options to work with when trying to solve their prioritized need.

Short-term goals are any goals set that can be accomplished soon. The facilitator should guide the team in developing short term goals that are achievable. In the beginning the team should look for the low hanging fruit that can be completed quickly. This will allow the client, family and team to see progress being made and they will be motivated to continue

the forward progression towards the family vision. The team should break each action step into smaller steps until the goal is achieved.

When trying to identify measurable goals, objectives and action steps, ensure that the goals and interventions that are put in place are easy to follow and specifies who will do what, when and how it will be done. Make sure that the interventions are achievable and that the plan is what the family really wants. Develop plans that are time-framed so the team knows what the target date is. The plan should be measurable so that we know when goals have been accomplished.

The plan is developed during the team meeting; however, the case manager will take the plan back to their office to put the information into a formal document (See example of a completed Wraparound Plan in this manual). Once the document is formalized, the facilitator will bring a copy to the client for review. The client can make corrections to the plan and once they approve the plan, they will sign it. The case manager should make attempts to get as many team members as possible to sign the plan. The client, family and team should receive a copy of the plan and the case manager should maintain communication with the team members to monitor progress of the plan until the next meeting.

Ideas for the Next Team Meeting

This is where the case manager should solicit feedback from the team regarding how they felt the team meeting went. It is important that the team provides feedback regarding their satisfaction with the meeting and offers suggestions for the next team meeting.

Open Floor/Parking Lot:

If time permits, the team will discuss all parking lot topics that were mentioned but were not on the initial agenda. If time does not allow for the items on the parking lot to be discussed or the items are not appropriate to be discussed in a team meeting, the case manager will schedule a separate meeting to address these topics with the appropriate team members.

After reviewing the coaching tool in detail with the case manager, the coach should practice team facilitation through a mock role play. This should take place as a group activity, but if necessary, can be done individually with the coach. Role plays are a great way for case managers to practice the skills and to become comfortable with facilitation. The coach should get as many people involved as possible to play team members during the mock role play. The SNCD example for Kevin may be utilized for this role play. The coach should have the group read the SNCD for Kevin as a large group, making note of strengths, culture and needs. Team members may be assigned roles from the SNCD. The case manager will facilitate the team meeting using the typical agenda. The team should use strengths and needs identified in the SNCD for the team meeting. The facilitator and coach should prepare for the role play in advance and ensure all materials and the flip chart is prepared. The coach should support the case manager during the preparation process. During the mock team meeting, the coach should support the case manager as needed. The coach should provide the team with a copy of the coaching tools to utilize when observing the case manager and they should be encouraged to provide constructive feedback to the case manager. The case manager should go through every agenda item, and after the team

meeting, the group will hold a group discussion. Constructive feedback should be given at this time. The case manager should take the constructive feedback and continue to practice their facilitation skills.

When case managers perform this skill set for the first time with a live team, the coach will be there to offer support if needed. The coach should let the case manager know that they are not alone, and this is not a pass or fail test. This is something that they can do again if they need to. The coach should recognize that the case manager may be nervous with the coach scoring them. The coach should provide the case manager with the on-going support they need and answer any questions they may have prior to the shadowing event.

Key points to remember when facilitating an initial team meeting are:

- The case manager should call the team members prior to the team meeting to remind them of the meeting time and date.
- The case manager should come to the meeting with all materials prepared ahead of time (flip chart, agenda, copies of documents to be shared).
- The case manager should thank everyone for attending.
- The case manager should explain the purpose of the meeting and remind the team that the meeting is strength based.
- The case manager should explain confidentiality and the times that it may be broken (safety or legal mandates).
- The case manager should have everyone sign a sign-in sheet agreeing to maintain confidentiality.
- The case manager should pass out the agenda and any documents the family feels comfortable passing out (SNCD, Crisis plan).

- The case manager should explain that the team will keep to the agenda to ensure that there is time for the plan to be developed and to respect everyone's time. The parking lot should be explained to the team.
- The case manager should do introductions and ask each team member to say a strength about the client and/or the family. The case manager should explain to the team that strengths should be concrete so that they can be used in the planning process. Write the strengths on a flip chart for a visual. After all introductions are done, ask if there are any other strengths the team would like to add.
- The case manager should work with the team to develop ground rules for the meeting (ex: no cell phone, one person talking at a time, no blaming, etc.).
- The case manager should review the family long range vision and obtain agreement from the team to help the family meet their vision and the team mission.
- The case manager should write the client and family needs down on the flip chart. Every team member should have input in identifying needs. Allow the family to identify their needs first. The needs should relate to the long-term vision. Remember—needs are not services.
- After the needs have been identified, the case manager should ask the client if there is something that they do not feel is a need and mark it off the list. The client and family have the final say regarding what needs they want to focus on. Some needs can be addressed later.
- The case manager should explain to the family that if legal mandates were not identified as a need, they will need to be addressed on the plan due to legal requirements.
- The case manager should have the client prioritize their needs starting with what they want to work on first.

- Once the priority needs are identified (typically 1-3 needs), the case manager should have the team brainstorm all options/interventions to meet the needs. Write everything on the flip chart.
- The case manager should typically focus on one need per team meeting.
- The case manager should have the family choose which interventions they want to focus on.
- The case manager should identify who will do what, how and by when for each option selected.
- After the plan is developed, the case manager should ask the client again if they feel this plan is achievable and if they feel it's a good plan for them. If they say no, plan again.
- The case manager should ask the team about their thoughts and feeling on how the planning process went and if they have any suggestions for the next meeting.
- The case manager should schedule the next meeting before everyone leaves.

(Review Tips and Tools for Child and Family Team Meetings)

EXAMPLE 16: INITIAL CFT AGENDA



Plan Development Team meeting for _____

Date: _____

Topics:

1. Introductions:
 - (The purpose of the meeting is to develop goals and a plan)
2. Confidentiality:
 - (Everything discussed here stays here. We need to protect the confidentiality of the family.)
3. Ground Rules:
 - (All team members will create together.)
4. Family Vision/Team Mission:
 - (The family long term view and the team's commitment to support the family.)
5. Family Strengths including natural supports:

- (What the child/family is good at; positives, hobbies and what is unique about the family. All team members will provide input.)
6. The family and child needs and prioritize needs:
 - (The family determines what they feel are their needs and what they want to work on first.)
 7. Ways to meet the priority needs including who will do what:
 - (The team will brainstorm ways to meet the needs that the family determines they want to work on. The family will have the final say on what they will do to reach their goals.)
 8. Ideas for the next team meeting?
 - (Suggestions/ideas for improvement/desired topics.)
 9. Open floor:
 - (All topics that were not on the agenda but can be covered in the meeting. If time allows, discuss as a group or schedule a time separate from this meeting to address these topics.)

EXAMPLE 17: SAMPLE CFT SIGN-IN SHEET

Add your logo here

Team Meeting

Agreement on Confidentiality and Attendance

Name of Individual: _____

Medical Record #: _____

Name of Family: _____

Case Manager: _____

Location: _____

Date: _____

Pursuant to the confidentiality laws and policies of the State of Florida, we the undersigned, agree to keep confidential all personal identifying information and records regarding the above-named individual. For a description of this meeting, please check off all boxes below that apply.

EXAMPLE 18: COMPLETED WRAPAROUND PLAN

Child & Family's Name: Kevin Smith	Case Manager Name: John Doe	Date: 2/7/2017	Med rec #: 12345			
Long Term Vision (in client's words): "For the family relationship to be stronger"						
Life domain & family goal statement	Measurable goals/objectives	Measurable objectives: referrals, services, community & natural supports, measurable action	Persons responsible & target date	Goal met	Goal cont'd/revised & target date	Date goal closed
Education						

<p>Kevin will improve in school.</p>	<p>I want to go to 9th grade with my friends.</p>	<p>1. Kevin will attend school daily and he will be prepared for school with all required materials.</p> <p>2. Kevin will maintain a communication log that his mom and teacher, Ms. Shelby will use weekly. Kevin will provide it to his Ms. Shelby on Monday, the Ms. Shelby will give it back to Kevin on Friday and mom will send the communication log back on Monday.</p> <p>3. Kevin will complete all homework assignments within 1 hour of returning home from school. Kevin will meet with his tutor, Ms. Karen 3 days per week to complete missed assignments.</p> <p>4. Kevin will not have new charges at school.</p> <p>5. The JPO, Mr. Hardwick</p>	<p>1. Kevin-Daily</p> <p>2. Kevin, mom, Ms. Shelby-Every Friday and Monday</p> <p>3. Kevin-Daily Ms. Karen-Monday, Wednesday, Friday for 3 months (5/7/2017)</p> <p>4. Kevin-On-going</p> <p>5. JPO, Mr. Hardwick-1x per week</p> <p>6. TCM-Request made by 2/12/17</p>	<p>—</p>	<p>Review and update as needed but no later than 7/7/2017</p>	
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Legal

<p>Kevin will complete his probation successfully,</p>	<p>I want to get off probation.</p>	<p>1.TCM will locate a program for Kevin to complete his community service hours.TCM will start looking for an activity that involves soccer. TCM will make a list of community service opportunities.</p> <p>2.The parents will ensure that Kevin is transported to the community service program.</p> <p>3.The JPO, Mr. Hardwick will request that the court fees be waived at the next court hearing.</p> <p>4.Kevin will write an apology letter to the school and provide it to his JPO, Mr. Hardwick.</p> <p>5.Kevin will remain drug free and pass his next drug test.</p> <p>6.TCM will attend the next court date and</p>	<p>1.Wraparound Case Manager- By 2/20/17 Kevin-Until completed</p> <p>2.Parents and Uncle Jim- As scheduled</p> <p>3.JPO, Mr. Hardwick- As needed upon request</p> <p>4.JPO, Mr. Hardwick-3/10/17</p> <p>5.Kevin-On-going until completed Start 2/8/17</p> <p>6.Wraparound case manager-Court: 3/10/17 Report: Monday</p> <p>7.Kevin- Saturday and Sunday</p>		<p>Review and update as needed but no later than 7/7/2017.</p>	
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Behavioral

<p>Kevin will enhance his coping skills.</p>	<p>The team would like Kevin to improve his anger; make better decisions and enhance his coping skills.</p>	<p>1.TCM and therapist, Ms. Tammy will make a request for a male therapist. If a male therapist is unable to be assigned within 2 weeks,TCM will make a referral to a different agency.The current therapist, Ms. Tammy will continue to meet with Kevin until a male therapist is assigned. Kevin will meet with his therapist weekly and comply with the treatment plan.</p> <p>2.Kevin will try out for the soccer team. If he gets on a team the parents will take him to practice. If he does not follow his wraparound plan, he will be kept from practice or a game.The family will inform the soccer coach of the plan. Uncle Jim will practice soccer skills with Kevin twice per week, if</p>	<p>1.TCM/ Therapist, Ms.Tammy- by 2/10/17 Kevin-As scheduled</p> <p>2.Kevin-2/17/17 Parents- As scheduled Uncle Jim-twice per week.</p> <p>3.Kevin/Uncle Jim-as needed</p> <p>4.Dad-On-going Mom- On-going Kevin-On- going</p> <p>5.TCM-2 weeks Kevin-1x per week</p> <p>6.Parents-1x per week</p>		<p>Review and update as needed but no later than 7/7/2017.</p>	
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*TCM will monitor the progress of the wraparound plan during face to face visits twice per month and maintaining communication with the team members through phone calls, in person meetings, and scheduled CFT meetings. The plan will be revised as needed to ensure the plan meet the needs of the child and family.

By signing below, I agree that I have participated in the development of this wraparound plan and agree to confidentiality:

Client: _____ Date: _____ Supervisor: _____ Date: _____

Guardian: _____ Date: _____ Team Member: _____ Date: _____

Guardian: _____ Date: _____ Team Member: _____ Date: _____

Facilitator: _____ Date: _____ Team Member: _____ Date: _____

EXAMPLE 19: SNCD KEVIN

Client Name: Kevin Smith	Medical Record #: 12345	Date: 1/15/2017
Facilitator Name:	D.O.B.: 1/1/2003	Initial:
<p>Presenting problem/Need: Kevin was referred by his parents due to them feeling that Kevin needs a locked residential treatment facility. They reported that they feel this will help Kevin become more stable. The parents report that Kevin is having mental health needs that have been unmet and he needs services. Kevin is having behavioral concerns including being verbally and physically aggressive, legal involvement and leaving the home without permission. He is reported to be disruptive in school and recently was caught vandalizing the school.</p> <p>Long term goal: "For the family relationship to be stronger"</p>		

I. FAMILY

Kevin Smith is a 14-year-old male. He was adopted when he was 3 years old by Ron and Karla Smith after being placed in foster care due to physical abuse and severe neglect. He has 2 siblings (Brian 10 and Cindy 11), who are the biological children of Ron and Karla. The family currently resides in Palm Beach County. Kevin reports that he likes his siblings but feels that they get “special treatment” from his parents. He stated that he tries to help his siblings, but they destroy his stuff. The parents reported that the siblings use to be close in the past. He stated that Cindy looks up to Kevin. The family has a pet dog, Rocky, that Kevin spends time with. Rocky sleeps with Kevin and Kevin stated that Rocky is the only one who cares about him. The family stated that Kevin is “extremely” kind to Rocky and they don't understand why Kevin is kind to the dog but not to his family. The family reported that they used to be close with the maternal grandmother Karen and the uncle, Jim. In the past, the maternal grandmother watched the kids on the weekends and uncle Jim used to play soccer with Kevin. The parents report that it was Kevin's behaviors that caused the distance between them and their family. The family reported that they do not have any other supports.

Kevin's biological mother was unable to care for Kevin due to being homeless and unemployed. The biological mother was reported to have become involved in a violent relationship and Kevin was physically abused. When Kevin was placed in foster care, he was one year old and “extremely” underweight. The biological father has not been in Kevin's life since birth. The biological father is currently serving time in prison for attempted murder. Kevin is reported to have one older brother and one older sister from his biological parents. It is reported that both siblings are still in foster care. Ron and Karla stated that they considered adopting all 3 but were unable at the time. Kevin had contact with his siblings before the adoption but not since the adoption was finalized. Kevin reported that he knows his paternal side of the biological family but does not have contact with them after the adoption. Kevin was initially placed with his paternal aunt Holly after being removed from his mother however Holly was unable to keep Kevin long term. Kevin was eventually placed up for adoption. The paternal aunt was unable to adopt Kevin, so Kevin was placed with Ron and Karla for adoption.

The parents reported that they feel that life would be better when the family can communicate with each other in a positive way. Kevin stated that his life would be better when his parents will listen to his feelings and not dismiss him. He also stated that he wanted his parents to “show

2. FAMILY

The parents reported that Kevin started having behavioral concerns two year ago. The mother reported that when Kevin is upset, he will start raising his voice and he will breathe fast. He will become sarcastic and slam doors. She stated that not too long after that he will start using profanity and threaten people. The mother stated that when this happens, she does not know what to do and there is usually a "screaming match" in the house. Kevin stated that he does not like when his mom keeps asking him "what's wrong with you" or telling him that he "needs to relax." He also stated that he gets mad when his younger sister makes comments when he is already annoyed. Kevin leaves the house without permission and the parents are unable to locate him. Kevin typically returns home about 12:00 am.

Kevin and his parents are unable to talk to each other without yelling and Kevin will use profanity towards his parents and siblings. Kevin has thrown things at his sister but has not caused any physical harm. He has punched his younger brother in the mouth and busted his lip. Kevin stated that he hit his brother because his brother was breaking his video games and his parents didn't do anything about it. Kevin made comments about wanting to hurt himself and his parents but has never acted on those statements. The parents have called the police on Kevin several times during arguments. Kevin has made threats of harming himself or others however the police were always able to deescalate the situation and he was not arrested, or baker acted. He stated that he can talk to his dad more than his mom however he feels that his dad no longer has time for him. The father reports that he does not want to "reward" Kevin's behaviors with positive attention.

The parents report that they used to discipline the children by taking away privileges, but that does not work with Kevin any longer. The parents reported that it still works for his siblings. The parents are not sure what to do for Kevin. The parents report that they must go to their room and close the door when they are stressed because they do not want to "say things we don't want to say."

It is unknown if either of his biological parents had any mental health or substance abuse concerns. His adoptive parents report that they do not have any mental health or substance abuse concerns. The family denies any sexual abuse.

3. FINANCIAL/PHYSICAL NEEDS

Kevin's financial and physical needs are being met by his parents. Kevin has Medicaid and the family receives an adoption subsidy. Both parents are employed full time. The mother works as a secretary and the father is an accountant. The family has two cars. The mother stated that if there is an emergency, she can call her mother Karen for help.

4. SPIRITUAL/CULTURAL

The family reports that they believe in God but have not attended church in over a year. They reported that they used to be active members of Mount Bethel Church. Kevin was baptized at that church when he was ten. The family reports that they celebrate all traditional holidays except Halloween. The parents reported that Halloween is too dangerous, and the candy is not good for the kids. They typically spend Christmas with extended family. The family reports that they eat together as a family for dinner and on the weekends. The family reported that they enjoy camping but have not gone in several years. The family also reported that in the past they used to have movie nights and the mother stated that she would like to have that happen again. Kevin stated that he spends most of his time, when he is not in school, in the house playing video games in his room. The father stated that the home is a "busy home" with his siblings having extracurricular activities daily, ensuring dinner is served and "arguing" with Kevin.

The family speaks English, but the father is fluent in Spanish. The parents stated that education is important to them, as this is the only way one can get ahead in life. The mother stated that she wants the family to be able to laugh together daily and not have so much arguing in the home. The parents reported that they make decisions as a couple and they are always on the same page. The parents reported that the home used to be quiet and that they went on vacations every summer. The family stated that their favorite spot was Gatlinburg, TN. They were able to hike and camp in the mountains.

5. SOCIAL/FRIENDS

Kevin enjoys playing soccer and, he used to play on a team. He won several trophies for playing soccer. His parents took him off the team when Kevin's grades started to drop in school as they felt he needed to focus more on school. He stated that playing soccer calmed him down when he was upset. He stated that he also likes listening to music and going fishing at a lake near the house. Kevin has two friends and they reside in the neighborhood. The parents report that "those kids are bad influences" on Kevin and that he engages in harmful behaviors with them. Kevin stated that his friends listen to him and they do not make him do anything he doesn't want to do. He stated that his parents refused to meet his friends.

Kevin used to be close with his uncle Jim and they would practice soccer together. Kevin stated that he wished he could live with his uncle. After Kevin was no longer allowed to play soccer, the relationship with his uncle became strained. He stated that his parents did not allow him to spend time with his uncle doing sports. He stated that he had to spend most of his time doing schoolwork and he was "sick of" doing schoolwork all the time. Kevin is reported to be able to make friends easily. He reports that he doesn't want to make friends because he isn't "allowed" to spend time with them anyway.

6. VOCATIONAL

Kevin is not involved in vocational activities at this time. Kevin stated that he wants to be a video game developer when he grows up. He also wants to do something on the side with animals. Both parents are employed.

7. EDUCATIONAL

Kevin is in the 8th grade at Palm Beach Middle School. He is one year behind due to failing last school year. Kevin is attending school daily however he is not completing his assignments. He is at risk of failing this grade as well. He has a history of getting all A's and B's. He has been getting suspended frequently from school for fighting, not following directions and vandalizing the school after school hours. Kevin reports that he likes his PE coach and that they both like soccer. The school offered to have Kevin stay after school for tutoring, but Kevin reported that he refused but did not state why. Kevin stated that he does not have a favorite subject, but he does enjoy spending time in the computer lab. Kevin is in mainstream classes without any accommodations.

8. LEGAL

He is currently on probation for the vandalism charge. It was reported that Kevin was high on weed when he caused damage to the school. Kevin has recently smoked marijuana and did not pass his last drug screen. The JPO, Mr. Carlton stated that if Kevin continues to display these behaviors, he may recommend a DJJ residential placement. Kevin must complete community service hours, write a letter of apology and pay restitution for the damage he caused at school. This is Kevin's first charge. The JPO stated that Kevin has been on probation for 5 months and he has not started to complete any of his stipulations. The next court date is 3/10/17.

9. RESIDENCE/NEIGHBORHOOD

Kevin and his family reside in 4-bedroom home in a mixed neighborhood. He has his own room and he has decorated it with posters. The home has all necessary furnishings for comfort. The home has a fenced yard and a pool. Kevin's windows are fixed with alarms from the outside. The parents wanted to ensure that they would hear if Kevin was to sneak out at night. If Kevin opens his window after hours, an alarm will sound in their bedroom. The home has an alarm system however the parents have learned that Kevin knows the code. The home is located near a park and a shopping center. The home is also a half mile away from a lake that Kevin likes to fish in.

10. MEDICAL

Kevin is up to date with his physical and immunizations. He is also up to date with his dental. Kevin has asthma and uses an albuterol inhaler when needed. The medical doctor is Dr. Johnson from Pediatric Associates. He goes to Sage Dental. The parents reported that it is unknown if his biological parents have any medical concerns. Kevin has glasses for reading, but he does not wear them. Kevin is 5'9 and has an average build.

II. BEHAVIORAL

Kevin had an assessment with a psychiatrist from ABC Psychiatry last year and he was diagnosed with Oppositional Defiant Disorder and a mood disorder. Risperdal was recommended at that time. Kevin is not currently on any medication because he refuses to take them. Kevin stated that he does not "need crazy pills." His parents are unable to get him to understand the need for medications. Kevin has been participating in therapy with Ms. Tina for the past 3 months, but little progress has been made. The therapist stated that Kevin is just now starting to share with her. Kevin stated that he would prefer a male therapist, as a female cannot understand him. The agency currently does not have an available male therapist.

Kevin stated that he gets angry when "everyone" tells him what to do. Kevin stated that no one listens to him and that no one cares about what he wants. He stated that he has expressed his feelings to his parents many times, but he is "always" dismissed. He stated that if "my parents don't care, why should I care." The parents report that they can't handle Kevin's behaviors anymore and that they want him to go to a residential treatment program or they will place Kevin back in "the system." Kevin reported that his parents use "the system" as a threat often and he "really doesn't care anymore if they do send me away." The parents report that they are exhausted trying to "deal" with Kevin. They reported that they do not have the ability to care for him and to protect his siblings from him. The family reports that they do not have anyone who can help them, because they have "burned their bridges" with family and friends. Kevin stated that when he is mad, he just wants to be left alone.

Family Strengths:

The parents report that they care about Kevin and want the best for him. Kevin is attending school and can make passing grades. Kevin is good at soccer and technology. The family enjoys hiking and camping. The family has their basic needs met. The family has extended family members to call in case of an emergency.

Family Identified priority needs:

The parents report that their primary need currently is for Kevin to make better decisions in the home and community and to improve in school. Kevin stated that his priority is to get off probation and be allowed to do things again.

<p>Potential Team Members Including Natural Supports:</p> <p>The team members identified are the mother Karla, father Ron, Kevin, Maternal grandmother Karen, Uncle Jim, therapist Tina, JPO Mr. Carlton and Case Manager.</p>	
<p>Date of initial home visit: 1/10/2017</p>	
<p>If no home visit was completed explain why: N/A</p>	
<p>If no home visit, date of first Face to Face visit: N/A</p>	
<p>My signature below indicates I understand that all information being released to me under Florida Statute 394.459(a) and Florida Administrative Code 10.E.38 (Confidentiality of Client Records) is confidential. I further affirm this information is being used for the sole purpose of case planning and/or treatment for the family identified. I have participated in the formulation of this assessment.</p>	
<p>_____</p> <p>Guardian Signature</p>	
<p>_____</p> <p>Date</p>	<p>_____</p> <p>Case Manager</p>
<p>_____</p> <p>Guardian Signature</p>	<p>_____</p> <p>Date</p>
<p>_____</p> <p>Date</p>	<p>_____</p> <p>Client Signature</p>
<p>_____</p> <p>Case Manager Supervisor</p>	<p>_____</p> <p>Date</p>
<p>_____</p> <p>Date</p>	

EXAMPLE 20: TIPS AND TOOLS FOR WRAPAROUND

CHILD AND FAMILY TEAM MEETINGS

The Child and Family Team Meeting should occur in the family home or in a location that the family chooses. In your first Child and Family Team Meeting the case manager should explain the Child and Family Team process and encourage everybody to participate in the process.

During the first Child and Family Team you should:

- Explain your role as the Wraparound case manager so all team members understand what you are going to do and how you are going to do it.
- Have all team members should introduce themselves by taking turns explaining who they are and why they are at the team meeting.
- It is very important for case managers to stand up and use a flip chart to conduct all Child and Family Team meetings. All team members need to see the options during the brainstorming process.
- Pass out the agenda (previously discussed with family and team members). This can be a hand-out, or an agenda written on the Flip chart for everybody to see.
- Make meeting rules with input from the team. Make sure that everybody has a chance to state their rules about how they want the team conducted. If you have a larger team it is helpful to assign one of the children with the role of rule keeper to make sure that everybody follows the rules.
- During the first meeting the case manager should pass out copies of the Strengths, Needs, and Culture Discovery (if the family is comfortable with that).

- Based on the Strengths, Needs, and Culture Discovery identify the needs of the family and list them on the flip chart. Make sure you list them all, even if you as the case manager do not feel that it is a priority need- remember, this is their team meeting. Prioritize those listed needs and choose the top two or three to begin planning.
- Brainstorm solutions to solve each prioritized individual issue (ask the questions: what would have to happen to make this problem go away, what are possible interventions, what has worked in the past to help with this problem, ask the child what they think would be the best solution). There are no silly options, as the case manager your job is to simply write each option that the team identifies.
- Now look at the brainstormed options and prioritize based on what the child and family say are the interventions that they want to use. The team should come up with two or three prioritized interventions per needs. It is your job to steer the family towards feasible options without telling them what they must do or that something cannot happen.
- For each issue identified there should be two or three interventions and this becomes your plan.
- Talk about who is going to do what and when it will be completed
- Schedule the next meeting.
- End with positives and make sure to thank everybody for their participation.