WV Wraparound Plan of Care (POC) Training

Presented by
Marshall University
Research
Corporation

Before We Begin…

This plan is to be used for all Child and Family Team Meetings (CFTM) by October 1, 2022

This plan is to be used with all WV Wraparound programs:

Safe at Home (SAH)
Children's Mental Health Wraparound (CMHWA)
CSED Waiver (Children with Serious Emotional Disturbance Waiver)

Before We Begin…

We will be using the Matthew vignette during this training that is used in the NWIC (National Wraparound Implementation Center) Wraparound Overview training on the Ideas@TheInstitute training website

The vignette used in this presentation are for training purposes only.

If you haven't, please complete the two online NWIC trainings.

THIS IS IMPERATIVE TO UNDERSTANDING HIGH FIDELITY WRAPAROUND.

Section A.1 – Referral Information

- Date of Eligibility: The date in which the youth is accepted into the program

- Anchor Date: The anchor date is assigned by the ASO (Administrative Services Organization) and is defined as the annual date by which the member's medical eligibility must be recertified and is determined by the anniversary date that is the first day of the month following the date when initial medical eligibility was established by the MECA (Medical Eligibility Contracted Agent).

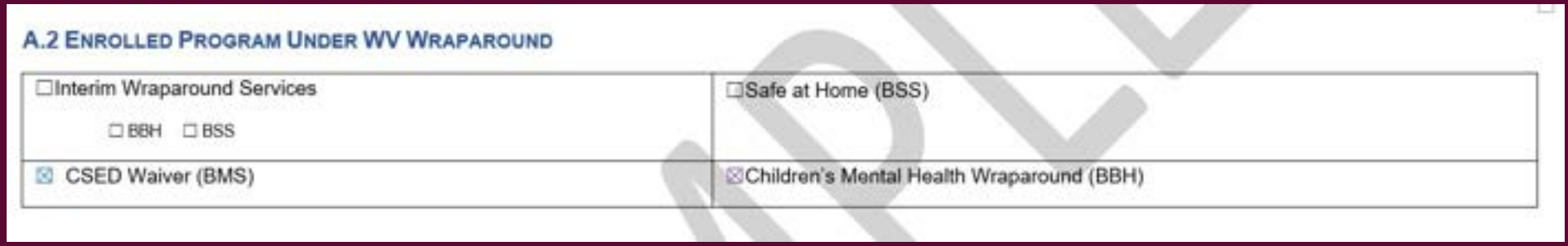
- Date of current POC & POC Type: The date of the most current POC. For CSED, please note type (90, Transfer of Care, etc).
  - If it is a SLE (significant life event), please note what happened and attach additional information (such as incident reports) and indicate such is attached

A.1 REFERRAL INFORMATION

Date of Referral: 1/27/2022	Source/County: Hardy/JPO	Referral Person & Contact Information: Sue – Probation Officer – 304-555-5555
Date of Eligibility: 2/3/2022	Anchor Date: N/A (3/1/22 for CSED)	Date of current POC & POC type: 3/3/2022 (30 Day)

Section A.2 – Enrolled Program Under WV Wraparound

- For interim services, note which program you receive funding under.
  - This will change when the family moves from interim services into a program

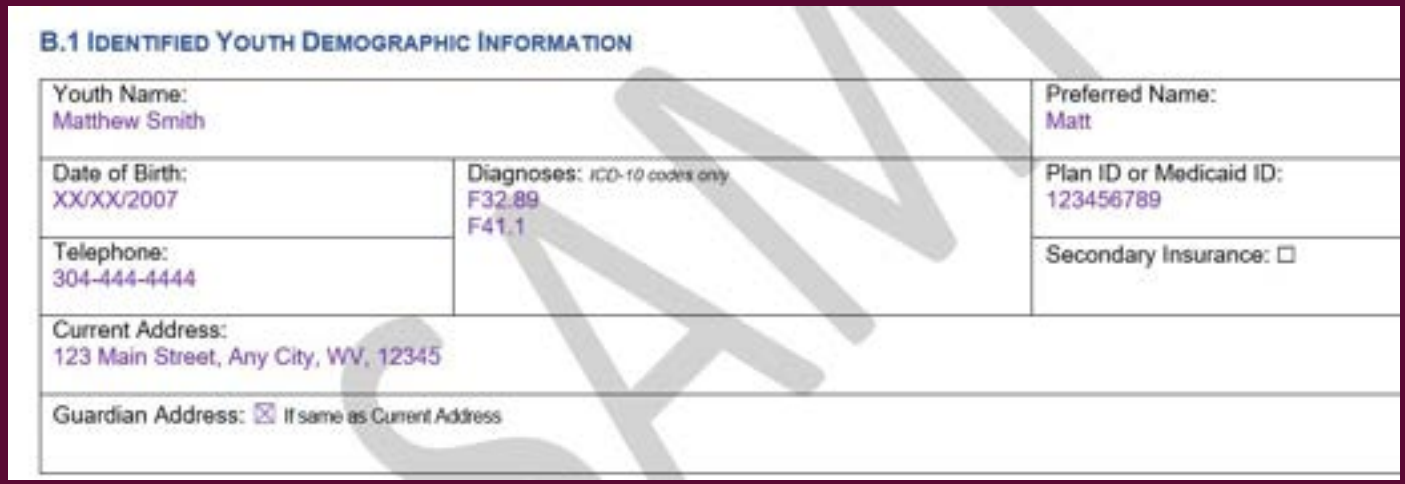


A.2 ENROLLED PROGRAM UNDER WV WRAPAROUND

☐ Interim Wraparound Services ☐ BBH ☐ BSS	☐ Safe at Home (BSS)
☒ CSED Waiver (BMS)	☒ Children's Mental Health Wraparound (BBH)

Section B.1 – Youth Demographic Information

- Diagnoses listed should be documented in the child's record – not assumed by the Case Coordinator.
- If this information is not on the referral form, make sure that you gather it the first time you contact the youth and their family.

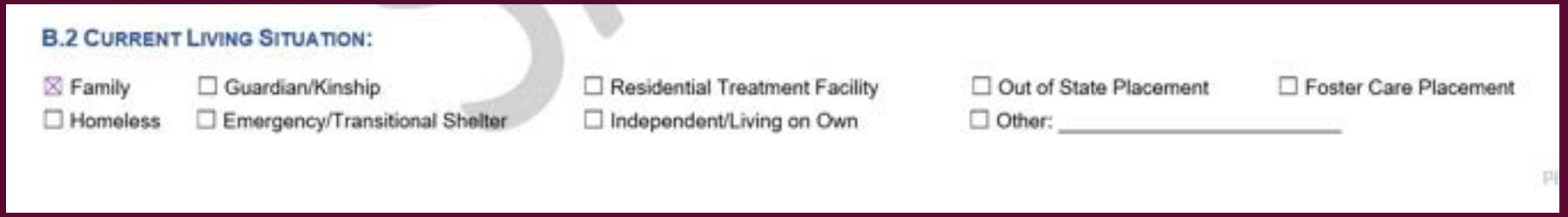


B.1 IDENTIFIED YOUTH DEMOGRAPHIC INFORMATION

Youth Name: Matthew Smith		Preferred Name: Matt
Date of Birth: XX/XX/2007	Diagnoses: *ICD-10 codes only* F32.89 F41.1	Plan ID or Medicaid ID: 123456789
Telephone: 304-444-4444		Secondary Insurance: ☐
Current Address: 123 Main Street, Any City, WV, 12345		
Guardian Address: ☒ If same as Current Address		

Section B.2 – Living Situation

- If choosing "other," note the type of placement on the line provided.



B.2 CURRENT LIVING SITUATION:

☒ Family ☐ Guardian/Kinship ☐ Residential Treatment Facility ☐ Out of State Placement ☐ Foster Care Placement

☐ Homeless ☐ Emergency/Transitional Shelter ☐ Independent/Living on Own ☐ Other: _____

Section B.3 – Academic Information

- Under "Other/Misc.," include:
  - Extracurricular activities, clubs, etc.
  - Any academic referrals and their outcomes
- If information is unknown, gather it from the family.

B.3 Academic Information:

Academic Setting: Regular Education		School Name: Random County School
IEP/504: ☐ Yes or ☒ No	GPA: 3.0	Grade Level: 9th
Date of Recent IEP/504: N/A		Other/Misc.: On football team

Section C.1 – Family Information

- Include biological and identified family
- Family members define involvement status

C.1 FAMILY INFORMATION

Name/Relationship	Involvement Status (fully active, semi-active, other)	Contact Information
Mona Smith/mom	Fully active	304-777-7777

Section C.2 - Other Potential Team Supports

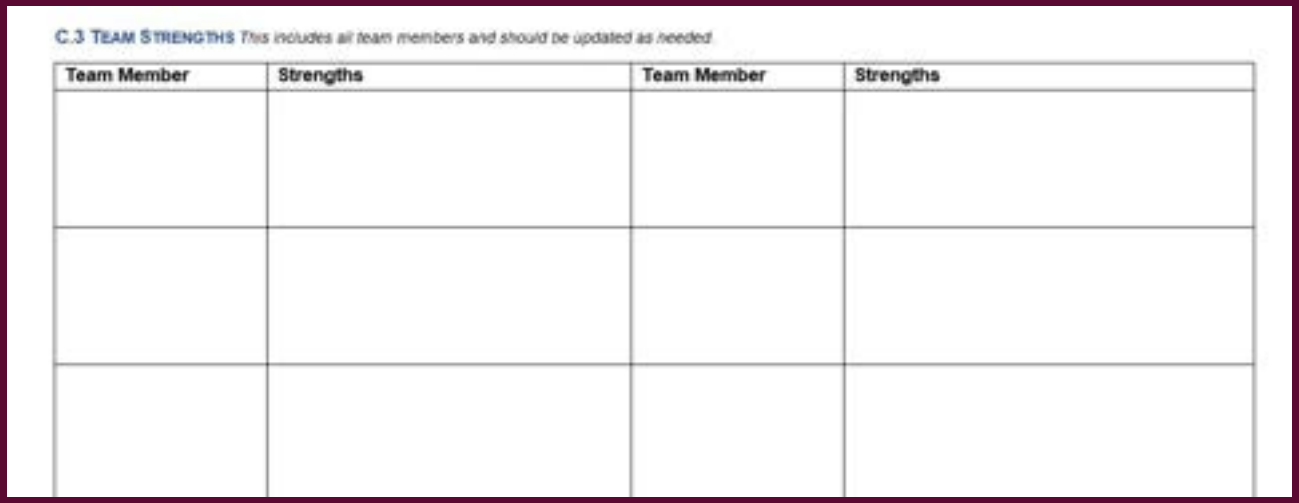
- Include those the team feel may be helpful to join. Individuals may also be identified in Section D: Putting It All Together
- Facilitator should always follow up/continue engagement of potential new team members

C.2 OTHER POTENTIAL TEAM SUPPORTS: *This section should be used to describe additional supports for the youth/family that will assist in reaching their goals.*

Name (Relationship or Position)	What is their current role in the support system?	Who contacts & engages?
Sam Jones	Matt's friend	Grace *(Wraparound Facilitator)* and Matt

Section C.3 – Family Information

- These are the **<u>functional</u>** strengths of each team member, including the facilitator
- Ensure that each team member (person at the table) is on this.
- Strengths can be added at every meeting (particularly for the family, strengths should be added at each meeting).



C.3 TEAM STRENGTHS *This includes all team members and should be updated as needed*

Team Member	Strengths	Team Member	Strengths

Section C.3 – Example

C.3 TEAM STRENGTHS *This includes all team members and should be updated as needed.*

Team Member	Strengths	Team Member	Strengths
Matt	1. He hasn't given up hope of being a permanent member of the family. 2. He steps up to help out with his little brother, is patient with him, and will protect him. 3. He is close to Mona and talks to her about everything. 4. He stands up for himself when he feels others are being unfair and tries to protect himself from getting hurt again. 5. He is able to build relationships with adults he trusts. 6. He is a leader on the football team where he has been voted MVP.	Mona	1. She learns from past mistakes and experiences and builds off of those lessons learned and experiences to help others. 2. She is committed to keeping her family together by always looking out for new things to do and help. 3. She asks for help when needed. 4. She confides in Michelle (her co-worker) and they work out together every other day. 5. She gives herself freely in support of her family's needs by being there any time of the day or night to talk. 6. She sees the good in people when most people would give up by being a long term foster parent. 7. She is the rock of her family who everyone comes to for advice or help.
Sue (Probation Officer)	1. She has connections to the local university and can score tickets to games. 2. She is very active in her community and volunteers at Boys and Girls club and has helped with a neighborhood revitalization project. 3. Sue is a crossword championship! She does them when stressed because solving them gives her a sense of accomplishment and provides encouragement to keep working through what life throws at her.	Grace (Facilitator)	1. She draws in her journal almost every day to express herself on paper and it brings out her creative side. 2. When days are long and Grace feels like she needs to get away for it all, she goes on long runs and clears her head.

Section C.4 – Ground Rules

- Ground rules should be developed so that the team knows what **TO** do – not what NOT to do.
- These rules should:
  - Reflect the wraparound principles
  - Mediate conflict and negativity
  - Address legal and ethical issues (including confidentiality)
- The team should agree on these rules.
- Use family language

C.4 GROUND RULES: *Identify the Ground Rules & Team Process, including how decisions are made. It is important to create a safe, respectful environment where all ideas can be heard. This section should be used to set ground rules for the meeting and describe how the youth/family will participate in their care.*

Everyone needs to talk respectfully to each other; what's said in the meeting stays in the meeting, Matt and his family carry the most weight in decision making; code word "foul" for a break if needed before coming back

Section C.5 – Family Vision

- This is determined by the family with the assistance of the facilitator prior to the first child and family team meeting.
- This is shared with the team at the first meeting, in additional to the discussion of the family story.
- The rating scale is determined by the family. Progress towards that vision is documented in each meeting and is determined by the family (not the whole team).

C.5 FAMILY VISION: *This is determined by the identified youth and their family, with the facilitator's help, prior to the first team meeting. The rating scale is decided by the family to look at progress and outcomes.*

Life will be better when we live together happily and healthy and calmly
Rating Scale: 1 (bad) – 5 (good) **Progress towards family vision:** 3/1/22 – 1; 4/1/22 - 2

Section C.6 – Team Mission

- This is determined by the team and how everyone will work together to help the family reach their Family Vision (C.3).
- The rating scale is determined by the team. Progress towards that mission is documented in each meeting and is determined by the whole team.

C.6 TEAM MISSION: *This is determined by the team as a whole in the first team meeting. The rating scale is determined by the team to look at progress and outcomes.*

First downs together lead to touchdowns
Rating Scale: 1 (bad) – 5 (good) **Progress towards team mission:** 3/1/22 – 1; 4/1/22 - 1

Section D – Putting it all together

- Bulk of the plan is here. This is where you bring the decided-on needs (which are decided on PRIOR to the meeting). You will have two needs – one for the youth and one for the caregiver/family. (and a potential third in certain circumstances).
- The rating scale is determined by the family. The whole family rates progress on the need.
- Outcome statement(s) and Baseline(s) should relate to reason for referral and how it impacts them.
- Facilitators should have the baseline measurements prior to the meeting

Need 1: relate to how the reason for referral impacts them Matt needs to know people can be permanent parts of his life.	
Rating Scale: 1 - 5	**Rating of Need Being Met:** 3/1/22 – 1; 4/1/22 - 2
Outcome Statement(s) and Baseline(s): Relate back to reason for referral Increase in positive days at home (baseline: 2 days out of 7); Decrease in office referrals at school (baseline: 3 days out of 5)	**Progress Towards Outcome Statement:** In last month, positive days at home average 4 out of 7; office referrals at school 2 out of 5 days; 4/1/22 – positive days at home 5 out of 7; office referrals 2 out of 5

Section D – Putting it all together (continued)

- Mark any and all areas where the identified need falls
- Transition to Adulthood is marked for youth is 14 and up if the goal is related to/linked to their transition to adulthood.

Life Domain Area of Need:

☐ Physical Health ☐ Social Health ☒ Behavioral Health ☐ Transition to Adulthood

Timeline (include start date and targeted completion date/duration)

March 3, 2022 – January 3, 2023

Section D – Putting it all together (continued)

- Strength-based strategies are brainstormed to meet the need. Strategies/tasks should incorporate strengths and team members.
- Tasks are very specific – who will do what? When?
- Frequency – How often?
- Duration – How long?
- Progress – How is it going?
- Completed strategies can be moved to the bottom of the need.

STRENGTH-BASED STRATEGIES	TASKS (include who is responsible for completing the task)	FREQUENCY	DURATION	START DATE AND PROJECTED END DATE	PROGRESS

Section D – Putting it all together (continued)

STRENGTH-BASED STRATEGIES	TASKS (include who is responsible for completing the task)	FREQUENCY	DURATION	START DATE AND PROJECTED END DATE	PROGRESS
John will take Matt back to his old neighborhood, show him around, and share stories of how he grew up.	1. John will check his work schedule and find a Saturday within the next three 3 weeks to take Matt around his old neighborhood. 2. Mona will check in when they get back to see how it went. 3. Matt will ask questions when he wants more information.	One per three weeks. Once per three weeks Once per three weeks	15 minutes 15 – 30 minutes Time of trip (approx. 1 hour)	March 3 – March 24, 2022	John was able to find time and take Matthew. Mona was out of town and unable to check in when they returned, but did when she returned. Matthew didn't have many questions, but stated it helped him see where his father is from, and wanted to go again. He stated he felt more able/willing to ask questions. To extend another 3 weeks (4/24/2022)

Section D – Putting it all together (continued)

STRENGTH-BASED STRATEGIES	TASKS (include who is responsible for completing the task)	FREQUENCY	DURATION	START DATE AND PROJECTED END DATE	PROGRESS
Mona and John will create a behavior chart for Matthew by the next team meeting on 4/3/22	1. Tina and Mona will go shopping for behavior chart supplies on 3/5/22 2. Tina, Mona, and John will create a chart on Tina's next visit (3/14). Only family members will agree on what goes on the chart (includes behavior, outcome, rewards). 3. Matthew will write down possible rewards and share with his parents by 3/13. Rewards should be items that can be purchased as well as activities the family can participate in. 4. Mona will let Grace know by 3/15 what rewards need to be purchased. 5. Grace will help fund rewards and will purchase by 4/1. Sue will talk to ice cream shop to get coupon donations by 4/1.	One per month One per month One per month One per month One per month	Approx. 2 hour Approx. 1 hour 10 – 15 minutes 10 – 15 minutes 30 – 60 minutes	March 3 – April 3, 2022	

Section E –Crisis Plan

- Simple – meant to be useable by family
- Will be a more comprehensive plan than what is created in the first face-to-face
- Put strategies to avoid in the Action Steps section
- Include proactive and reactive (Back Up Plan) strategies

E. WRAPAROUND CRISIS/SAFETY PLAN *This is the completed/expanded version from the initial crisis/safety plan created by the facilitator and family in the first face to face meeting. This is to be reviewed and updated as needed, and at least at every meeting.*

Current Medications: Vyvanse 70 mg, Fluoxetine 20 mg, Abilify 10 mg.	**Brief History:** Matt enjoys hanging out with his family. He is a strong leader. He likes to know people have his back. He has a history of trauma and was in foster care until age 13. Within the last year, he has been aggressive and disobeying rules. He is aggressive towards his parents and other figures of authority. He calms down if his little brother is present. He apologizes after an incident.
Triggers Matt says he feels angry "all the time". Usually, a command to do something is a trigger (such as unload the dishwasher). Mona and John have trouble identifying triggers.	**Potential Crisis:** Matt will hit Mona and/or destroy furniture/punch walls. At times police have been called by neighbors and he could end up in the hospital or detention for probation violation.

Section E – Crisis Plan

Actions Steps for All Areas (including proactive steps):

1. Matt will start the day with relaxation exercises. When he wakes up in the morning, before he gets out of bed, he will take 10 deep breaths and then get in the shower.
2. While Matt is at school, his parents will make a sweep of his room to ensure no dangerous objects are present.
3. During first period (PE), Matt will practice tightening and releasing muscles while warming up. He will also do this at practice.
4. When teachers/coaches/parents see Matthew squint his eyes/scowl/get red-faced, they will remind him to breathe. Matthew will practice his deep breathing when prompted.
5. If he does not start to breath, they will offer for Matt to take a walk (alone or with them) and remind him they have his back.
6. If the breathing and walking do not work, they will tell Matt they are walking away for 5 minutes and will be back.

Back Up Plan:

7. If Matt becomes aggressive, Mona and John are to ensure they are in a safe place as well as the younger child in the home. They are to remind Matt to use his coping skills, such as breathing or muscle relaxation.
8. If Matt does not engage in the coping skills, John is to redirect him to his bedroom. If John is not home, Mona is to contact him for assistance and verbally request Matthew goes into his room. If Matt is at school, his coach is to be contacted to direct Matt into the locker room.
9. If Matt goes into his room/locker room, he will be given space and time to calm himself using coping skills. He can request a walk to a designated space if needed.
10. If Matt does not go into his room/locker room and/or continues to escalate and becomes destructive or physically aggressive on himself or another person, Coach Johnson or Jimmy John, the neighbor, are to be contacted to touch base with Matt in person or through FaceTime.

Section E – Crisis Plan

- Follow Up Tasks – what to do when the crisis is de-escalated
- Put all people and their phone numbers on this sheet

Follow Up Tasks after Crisis:

Mona and/or Matt are to contact the Wraparound Facilitator to alert them and discuss how it went within 24 hours.

Mona, John, and Tina are to sit down (Matt must have the option to attend) to discuss the situation and to identify any potential triggers

Person's Responsible and phone numbers:

Mona – 304-555-5555
John – 304-555-5554
Coach Johnson – 304-555-7789
Jimmy John – 304-555-8520
Children's Mobile Crisis Response: 1-844-435-7498

Section F – Transition to Adulthood Plan

- This strategy should be overtly connected to an identified need even if it is reiterated/copied for this section of the plan

F. TRANSITION TO ADULTHOOD PLAN: *For identified youth aged 14 and up, this section is used to discuss goals as they start to transition into adulthood, also available service connections and community supports.*

Matt and Coach Johnson are to explore electives at school to help Matt identify something that interests him.

Available connection/community support – DRS, WorkForce

Section G – Monthly Celebration of Successes and Accomplishments

- This is a general overview of what has happened since the last team meeting.

G. MONTHLY CELEBRATION OF SUCCESSES AND ACCOMPLISHMENTS

4/1 - Matthew feels like he and his parents have connected more lately because they were able to go camping twice this month. Mona feels less stressed because she has been able to exercise more with her coworker, Michelle

Section H – Discharge Plan

- Think of what things will look like when the family no longer needs Wraparound/needs are met. Start with end in mind.
- Score of the CANS will likely decrease to show less need for WV Wraparound, and the discharge would be reflective of those scores on the CANS.
- Support Summary is how are they going to maintain
- Further recommendations are things for the family to consider/continue in the future when you get in transition.

H. DISCHARGE PLAN

Support Summary *(how will the identified youth and family continue after Wraparound?)*
The family can handle a crisis situation on their own. Natural supports have replaced most, if not all, formal supports. Formal supports are needed less. Family vision will be at 5/5.

Further Recommendations *(what else will be helpful for the identified youth and family after Wraparound?)*
Matt to reach out to post-secondary education opportunities (college and/or trade schools) as he gets to that age to prepare for an easy transition.
Parents to reach out to supports as needed.

Section I: Contact List

Include all team members and any other individuals that having contact information for would be important (such as the Aetna Care Coordinator, if they are not on the team)

I. CONTACT LIST

NAME	ROLE	CONTACT INFORMATION

Signature Page

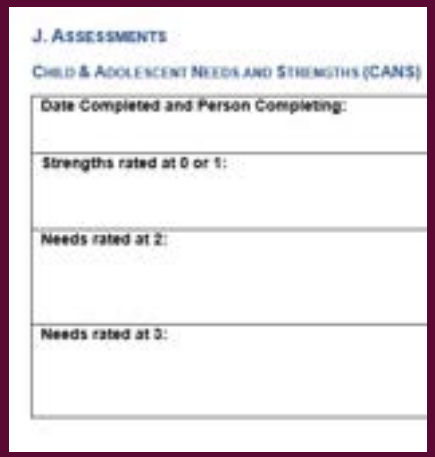
If the meeting is virtual, please put "verbal agreement – virtual meeting" in the signature line

SIGNATURES

Name & Relationship	Phone Number	Date	Signature	Do you agree with the POC update?	Date POC Sent:
				☐ Yes or ☐ No	
				☐ Yes or ☐ No	
				☐ Yes or ☐ No	
				☐ Yes or ☐ No	
				☐ Yes or ☐ No	
				☐ Yes or ☐ No	
				☐ Yes or ☐ No	
				☐ Yes or ☐ No	
				☐ Yes or ☐ No	

Sections J – Required Assessments

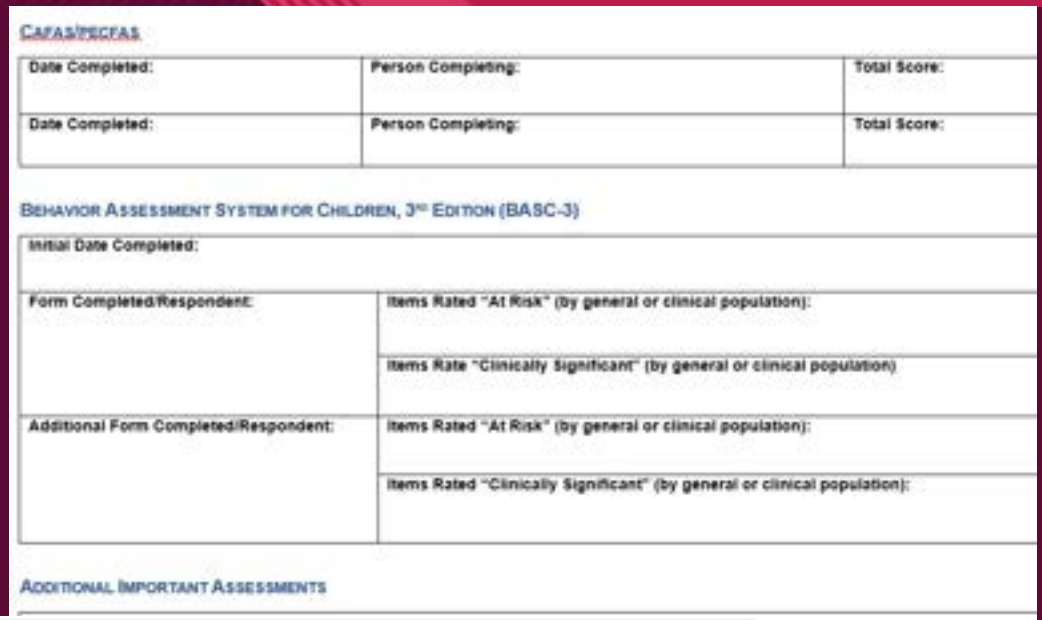
- CANS required for all individuals
- Add more spaces as needed.
- "Additional Important Assessments" section for anything you feel is helpful to have.
- This section, and the "CSED Waiver Services Needed to Support ME" sections are not to be sent out with the plan to all team members. They may be sent to the family if they so wish. All services will be noted in Section D: Putting It All Together



J. ASSESSMENTS

CHILD & ADOLESCENT NEEDS AND STRENGTHS (CANS)

Date Completed and Person Completing:
Strengths rated at 0 or 1:
Needs rated at 2:
Needs rated at 3:



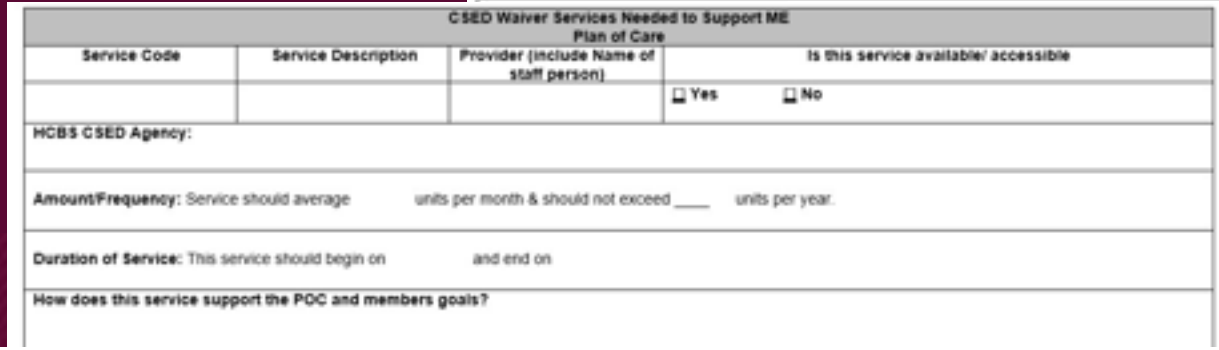
CAFAS/PECFAS

Date Completed:	Person Completing:	Total Score:
Date Completed:	Person Completing:	Total Score:

BEHAVIOR ASSESSMENT SYSTEM FOR CHILDREN, 3RD EDITION (BASC-3)

Initial Date Completed:	
Form Completed/Respondent:	Items Rated "At Risk" (by general or clinical population):
	Items Rate "Clinically Significant" (by general or clinical population)
Additional Form Completed/Respondent:	Items Rated "At Risk" (by general or clinical population):
	Items Rated "Clinically Significant" (by general or clinical population):

ADDITIONAL IMPORTANT ASSESSMENTS



CSED Waiver Services Needed to Support ME
Plan of Care

Service Code	Service Description	Provider (include Name of staff person)	Is this service available/ accessible
			☐ Yes ☐ No

HCBS CSED Agency:

Amount/Frequency: Service should average units per month & should not exceed ____ units per year.

Duration of Service: This service should begin on and end on

How does this service support the POC and members goals?

Wraparound Local Coach Contacts

Laken Bowens
bowensl@marshall.edu

Wraparound Local Coach Contacts

Heather Cummings
cummingsh@marshall.edu

COMPASS COUNSELING
Together, We'll Get There

HomeBase Inc.

PRESSLEY RIDGE

Southern Highlands
community mental health center

Wraparound Local Coach Contacts

Ashley Fizer
ashley.fizer@marshall.edu

BRALEY & THOMPSON
A STEPSTONE AGENCY

Crittenton Services, Inc.
Believe Achieve Empower

NATIONAL YOUTH ADVOCATE PROGRAM
Caring for People, Connecting Communities, Promoting Peace

YOUTH SERVICES SYSTEM INC. YSS

Wraparound Local Coach Contacts

Gabbi Lambert
lambert224@marshall.edu

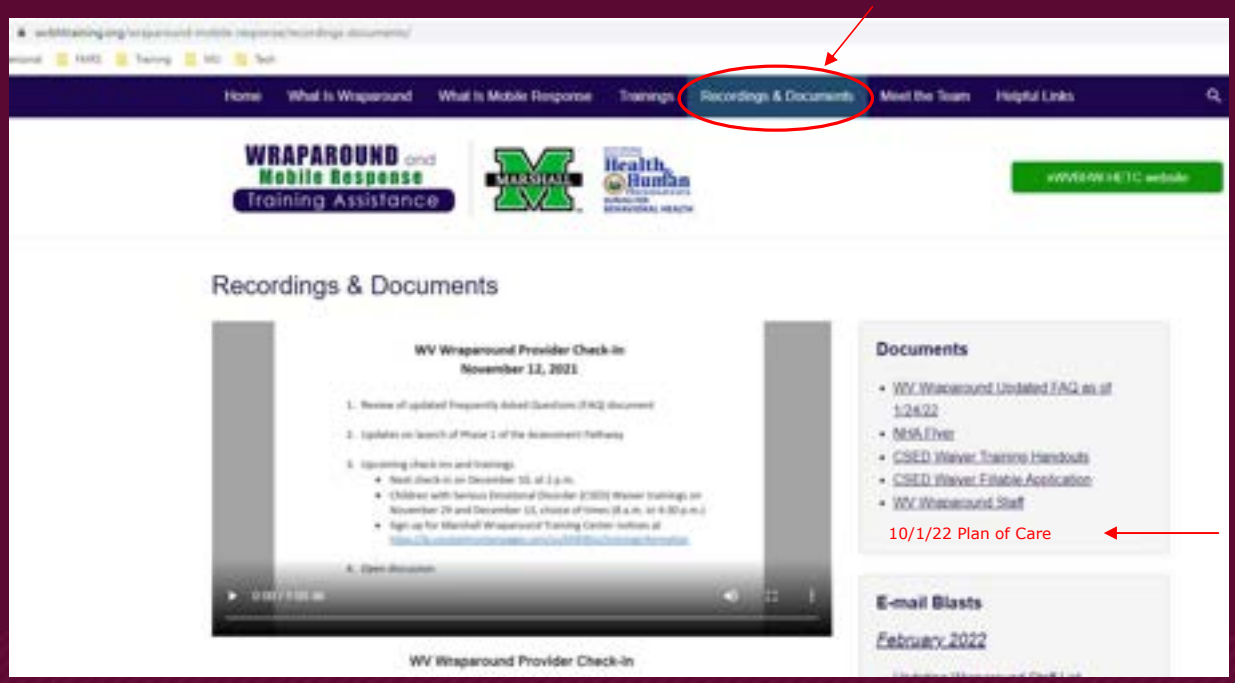
Wraparound Local Coach Contacts

Holly Glick Sly
glick4@marshall.edu

KVC West Virginia

Other Information

- Updated POC and desk guide to be found on the website under "Recordings and Documents" after the last training has concluded



Other Information

- Any changes/updates to this document in the future will be noted:
  - Via the listserv
  - On the website
  - Through WV Wraparound Provider Check-Ins
- Monthly POC Review/Questions meeting will be scheduled for anyone who wants to attend.
  - September 28th at 10am
  - October 19th at 10am
  - November 16th at 10am
  - December 15th at 10am
- Please reach out to your local coach with any questions or concerns or for assistance at any time!