Ramsey County:
Building a 21st Century Continuum of Services
for At-Risk Youth

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<u>Acknowledgements:</u>

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I. Executive Summary

In March 2014, Ramsey County unveiled an 11-point strategic plan aimed at boosting economic prosperity throughout the county. One of those initiatives calls for improving the continuum of services available to Ramsey County's youth and their families.[1] The initiative follows a report commissioned by the Ramsey County Community Corrections Department to assist in the creation of its 10 year plan for the delivery of juvenile services.[2] Prepared by Huskey & Associates,[3] the report recommended establishing an expanded continuum of services. The report concluded that the services currently available for youth focused on the extreme ends of the programmatic spectrum (prevention or detention) and offered few other service interventions.

The Huskey & Associates report made several recommendations for Ramsey County to consider to: 1) enhance its current service continuum, 2) adopt new policies to reduce the reliance on secure confinement, and 3) fill gaps in the county's service continuum.[4] The Capstone Project Consultants report focuses on one set of recommendations for establishment of "wraparound" services for youth engaged in more than one service delivery system (e.g. corrections, protective services, children's mental health, chemical dependency system). Research conducted by Huskey & Associates found that 68 percent of youth housed at Boys Totem Town (BTT) met the criteria for services provided through a wraparound approach.[5] BTT is a residential program for adolescent boys who have been adjudicated delinquent by the Juvenile Court and is a part of Community Corrections. It is important to explore the wraparound approach for alternative interventions given the finding by Latessa et al (2004) that low and moderate risk youth have higher recidivism rates when they are placed in "self-contained correctional environments or in intensive electronic monitoring without services."[6] Clearly, less restrictive options should be considered.

Ramsey County identified in its 11-point strategic plan it will begin research, system design and implement efforts for an improved continuum of services in 2014.[7] To provide a starting point, the Capstone Project Consultants conducted research into the process of creating wraparound service programs for youth in order to identify critical information and key lessons learned. In this process, the Capstone Project Consultants benefited significantly from the sophisticated work done by the National Wraparound Initiative, based at Portland State University, and their various partner organizations. This report examines: the driving and restraining forces encountered in the wraparound program establishment; the initial steps taken to establish these wraparound programs; the services offered through these wraparounds, how they are delivered, and by whom; the policies and practices that are the most efficient and cost effective with the best outcomes; how the other

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[1] Cultivating Economic Prosperity and Eliminating Concentrated Poverty, Ramsey County (March 20, 2014). Pg. 5
[2] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013). Pg. 1.4
[3] Huskey & Associates are juvenile justice and criminal justice consultants based in Chicago, IL.
[4] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013). Pg. 3.4
[5] Ibid, Pg. 3.20
[6] Ibid, Pg. 3.20
[7] Cultivating Economic Prosperity and Eliminating Concentrated Poverty, Ramsey County (March 20, 2014). Pg. 5

wraparound programs are funded and supported; pitfalls encountered by other programs and possible strategies to avoid them. The report concludes with a set of recommendations related to the research in these areas.

Several research methods were used to collect information for this report. A stakeholder analysis was conducted to identify the individuals or groups that are likely to affect or be affected by implementation of a wraparound in order to assess how the interests of those stakeholders should be addressed in the process. A "racial equity impact assessment" was used to examine how different racial and ethnic groups have been or will be affected by actions and decisions. A literature review focused on the current knowledge related to implementation of wraparound programs. An environmental scan and comparative program review was conducted to identify events and trends important to implementation of a wraparound program.

The stakeholder analysis identified a strong interest based on a number of perceived benefits (e.g. reduced costs, increased services, reduced recidivism, etc.) among key stakeholders such as the six departments identified as the key organizational leads in the 11-point strategic plan, specifically the County Manager's Office, Community Corrections, Community Human Services, County Attorney's Office, Workforce Solutions (Employment and Training), and Public Health.[8] It also highlighted the need to engage in a substantial way with secondary stakeholders, such as community groups and nonprofit service providers. Most importantly, it emphasized the need to understand youth and their families as the primary stakeholders and involve them in significant ways.

An important dimension of the stakeholder analysis involves recognizing racial disparities within youth services. Each day, about one in five Ramsey County residents are served by Community Human Services. Although people of color were 30 percent of residents in 2007, at least 53 percent of service recipients were people of color.[9] Black youth represent 14 percent of the Ramsey County youth population, but were 45 percent of children in out of home placement in 2008 and more than one-half of the juvenile arrests during 2006-2010.[10] Since 2003, CHS has used the Minnesota Collaborative Anti-Racism Initiative as a guide for "establishing a common conceptual foundation and language around systemic power and race."[11] A racial equity impact assessment approach could prove useful in evaluating proposed policies and procedures as implementation of a wraparound process moves forward.

This report's literature review specifically focused on the wraparound model and implementation. Wraparound is an intensive, holistic method of engaging with individuals with complex needs so that they can continue to live in their homes and communities. The term "wraparound" has been defined in different ways since it was coined in the 1980s. Described as a philosophy, an approach,

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[8] Cultivating Economic Prosperity and Eliminating Concentrated Poverty, Ramsey County (March 20, 2014). Pg. 5
[9] The Ramsey County Community Human Services Anti-Racism Initiative (9-23-09). Pg. 2, 5 and 7
[10] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013). Pg. 1.32
[11] LOOKING BACK, MOVING FORWARD: Anti-Racism Initiative Narrative Timeline (Ramsey County Community Health Services, ARLT Communication Workgroup, 12/2010). Pg. 3

and a service, in recent years, wraparound has been most commonly conceived of as "an intensive, individualized care planning and management process."[12] The literature review provides some basic definitions and evidence as well as the three important initial steps of implementation: adopting a set of core principles for the wraparound approach; assessing and establishing readiness on the team, program, and system levels; and planning carefully for the six essential components of a wraparound process.

In 2007, 91 percent of U.S. states had some type of wraparound initiative and 62 percent had implemented some type of initiative statewide.[13] There are, therefore, many examples available to include in an environmental scan and comparative program review. The Capstone Project Consultants conducted research into four other communities suggested by Ramsey County staff that have created wraparound service programs for youth. These included programs in Milwaukee (WI), King County (WA), Jefferson County (CO), and the State of Oregon. Although not originally intended, these communities offered an interesting variety of programs for comparison: a city program, a city-driven county program, a large county program, and a statewide program.

There are numerous lessons to be learned from the experience of other communities. However, both in spite of these lessons and because of them, the primary challenge the Capstone Project Consultants see lying before Ramsey County is one of leadership. There are many technical challenges that will require the application of authoritative expertise in establishing a wraparound model and a new service continuum. As this report will make clear, there are many existing resources including the report prepared by Huskey & Associates and the National Wraparound Initiative that can provide experience, guidance, and direction in crafting a new system. However, adopting a new service delivery model and integrating a range of departments into will require a deeper and more profound change that leadership scholar Ron Heifetz defines as "adaptive leadership." In addition, the change process will require detailed and comprehensive planning activities, but creating a strategic plan will not be enough. The indicated strategies will need to be incorporated throughout the system for them to be brought to life. This requires thinking just as strategically about implementing and managing the process of change. This report suggests ways of approaching this profound leadership challenge and developing a shared commitment for moving forward.

As a result of this research, the Capstone Project Consultants are offering the following recommendations for effectively implementing a wraparound model for Ramsey County youth and their families:

a) Engage with the community at large, including youth, families, community organizations and nonprofit service providers, as well as other key stakeholders

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[12] Bruns, E. J. & Walker, J. S. (2010). The wraparound process: An overview of implementation essentials. In E. J. Bruns & J. S. Walker (Eds.), *The resource guide to wraparound.* Portland, OR: National Wraparound Initiative. http://www.nwi.pdx.edu/NWI-book/Chapters/Bruns-5a.2-(implementation-essentials).pdf

[13] Ibid

b) Create a core wraparound implementation task force made up of county departments, community leadership, youth, and families to span the boundaries between groups

c) Adopt core principles for the wraparound approach, connect with the National Wraparound Initiative for guidance

d) Assess and establish readiness for implementation on the implementation team, program and system levels, remembering that strategic planning is not effective without also using strategic management

e) Research funding options from foundation and government grants through Medicaid

f) Plan carefully for each of the essential components involved in implementation, accept that this is an adaptive challenge and needs more than a technical solution

g) Adopt and implement a "racial equity impact assessment" system for evaluating possible actions and decisions

h) Remember that the work is for and about the families you serve

II.   Introduction

This report, *Ramsey County: Building a 21ˢᵗ Century Continuum of Services for At-Risk Youth*, draws together past examinations and current approaches to the delivery of youth services in Ramsey County and adds the Capstone Project Consultants' scholarship. Previously, the Ramsey County Community Corrections Department retained Huskey & Associates to assist in developing the department's 10 year plan for juvenile services, particularly options for the Boys Totem Town and the Juvenile Detention Center. The Huskey & Associates report confirmed that Ramsey County should "continue to operate the Boys Totem Town and, at the same time, modify and expand its service continuum to better meet the needs of youth, families, and communities." It concluded that other approaches are required to "more effectively meet the needs of youth and families and to control costs to the community and the county."[14]

The county has also recognized the need to approach its service delivery differently based on racial disparities. Although people of color were 30 percent of residents in 2007, at least 53 percent of service recipients were people of color.[15] Ramsey County leadership paved the way for confronting diversity work beginning in 1999. By 2005, the county had laid the foundation for its anti-racism initiative through its diversity and cultural responsiveness work. Since 2009, the county's Anti-Racism Leadership Team has had a set of organizational change strategies designed to eliminate institutional racism.[16] However, racial disparities can still be documented in Human Services and Community Corrections. For example, Black youth represented 14 percent of the Ramsey County youth population, but were 45 percent of children in out of home placement in 2008[17] and more than one-half of the juvenile arrests during 2006-2010.[18]

In March 2014, Ramsey County unveiled an 11-point strategic plan aimed at boosting economic prosperity throughout the county. One of those initiatives calls for improving the continuum of services available to Ramsey County's youth and their families. According to the plan, Ramsey County services currently available to youth (who are disproportionately youth of color) skew towards the ends of programmatic spectrum (prevention or detention) with few program intervention options available in between those ends. The plan points to research and case studies on the experience of other communities using community services provide better outcomes for youth.   The plan argues that youth and families within Ramsey County and the county's departments would benefit from improvements to the current services continuum. Beginning in 2014, the plan authorizes hiring a staff person to coordinate the research, system design, and implementation efforts across six departments: Community Corrections, Community Human

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[14] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013). Pg. 1.4
[15] The Ramsey County Community Human Services Anti-Racism Initiative (9-23-09). Pg. 5
[16] LOOKING BACK, MOVING FORWARD: Anti-Racism Initiative Narrative Timeline (Ramsey County Community Health Services, ARLT Communication Workgroup, 12/2010). Pg. 3
[17] The Ramsey County Community Human Services Anti-Racism Initiative (9-23-09). Pg. 5
[18] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013). Pg. 1.32

Services, Workforce Solutions, County Attorney's Office, Public Health, and County Manager's Office.[19]

Figure 1. The implicit theory that underlies most public sector-oriented strategic management literature.[20]
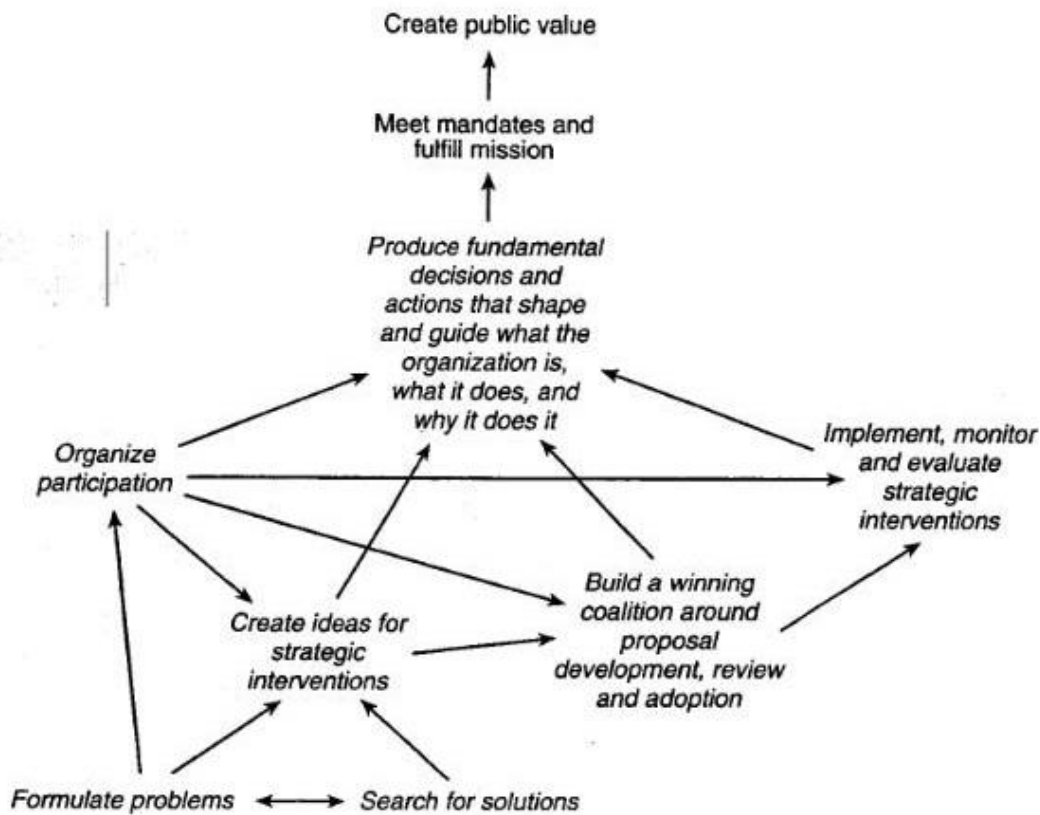
In June, the County Manager's Office brought on a team of consultants through the Humphrey School of Public Affairs's Capstone Workshop Projects in Public Affairs. The research conducted by the capstone group has been defined and conducted with scholarly independence from any representatives of Ramsey County. Based on conversations with the Ramsey County manager's Office, the scope of the research project was defined by the Capstone Project Consultants as follows:

Problem – Only a small number of the youth that come into Ramsey County's Human Services or Corrections departments with emotional, behavioral and/or mental health needs pose a threat that requires detention, which is costly, ineffective and negatively impacts the future course of youth. However, there may not be appropriate diversion services in place, which creates the possibility of needs not being met and potential risk factors going undetected.

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[19] Cultivating Economic Prosperity and Eliminating Concentrated Poverty, Ramsey County (March 20, 2014). Pg. 5
[20] Bryson, John M., What To Do When Stakeholders Matter: Stakeholder Identification and Analysis Techniques. Vol. 6 Issue 1 2004 21-53 Public Management Review ISSN 1471-9037 prinViSSN 1471-9045 online. Pg. 15

Goal – The County will better meet the needs of youth and their families by delivering more effective services that produce better long-term outcomes for youth that come into the county's Human Services or Corrections departments.

Strategy – The County will design and implement a continuum of services to provide appropriate alternatives to meet the range of potential needs for youth with emotional, behavioral and/or mental health problems.

Project Tasks – The Capstone Project Consultants will research other communities that have created (or are in the process of creating) an expanded community services continuum for youth, in order to identify critical information and key lessons learned, specifically:
   a) The driving and restraining forces encountered in their establishment.
   b) The initial steps taken to establish these continuums.
   c) The services offered through these continuums, how they are delivered, and by whom.
   d) The policies and practices that are the most efficient and cost effective with the best outcomes.
   e) How the other continuums are funded and supported.
   f) Pitfalls to avoid.

Deliverables – The Capstone Project Consultants will conduct the following:
   1. Gather information from communities that have created (or are in the process of creating) a continuum in the form of a case study review, literature review and/or meta-analysis.
   2. Analyze and synthesize this information in order to respond to the research questions.
   3. Develop a set of recommendations for policy and program development.
   4. Prepare a written report covering points 1, 2 and 3.
   5. Make a presentation to the Ramsey County Manager, Policy and Planning Division, leadership and staff from six participating departments, and, potentially, to the Ramsey County Board of Commissioners, based on the mutual interests of the Ramsey County supervisor(s) and the consultants.

III.   Background on Ramsey County Juvenile Services

Based on extensive analysis of juvenile justice trends in Ramsey County, the Huskey & Associates report made several recommendations for Ramsey County to consider to: 1) enhance its current service continuum, 2) adopt new policies to reduce the reliance on secure confinement, and 3) fill gaps in the county's service continuum.[21] The program options recommended in that report were selected based on an attempt to fill some of the service gaps. Among those options, Huskey & Associates recommended the establishment of "wraparound" service for youth engaged in more than one service delivery system (e.g. corrections, protective services, children's mental health, chemical dependency system).

Research conducted by Huskey & Associates found that 68 percent of youth housed at Boys Totem Town (BTT) met the criteria for services provided through a wraparound approach.[22] BTT is a residential program for adolescent boys who have been adjudicated delinquent by the Juvenile Court and is a part of Community Corrections. It is important to explore the wraparound approach for alternative interventions given the finding by Latessa et al (2004) that low and moderate risk youth have shown to have higher recidivism rates when they are placed in "self-contained correctional environments or in intensive electronic monitoring without services." [23] Clearly less restrictive options should be considered.

A focus population emerged in discussions with Ramsey County personnel oriented toward youth with risk factors likely to enter the system and those who have just entered the system (see Figure 2). For two other perspectives on this focus population, this report also looks at the rate of cases charged based on tiers of behavior (see Figure 3) and a framework for a coordinated system to promote mental health in Minnesota that seemed similar (see attached appendix).

Figure 2. Focus Population for Wraparound Services

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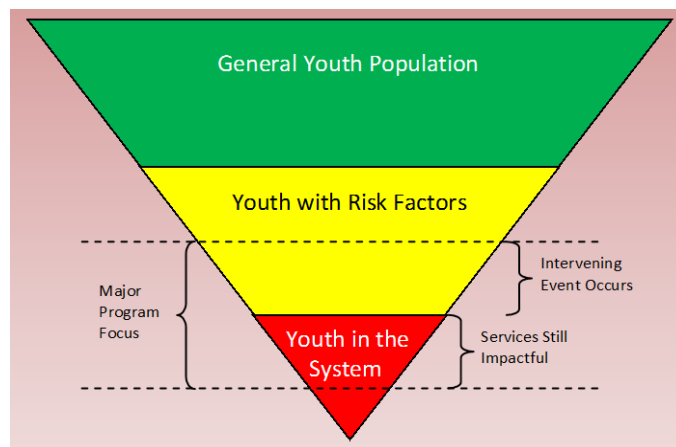
[21] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013). Pg. 3.4
[22] Ibid, Pg. 3.20
[23] Ibid, Pg. 3.20

Figure 3. Selected Indicators of Risk:
Total Rate of Cases Charged From 2008-2013
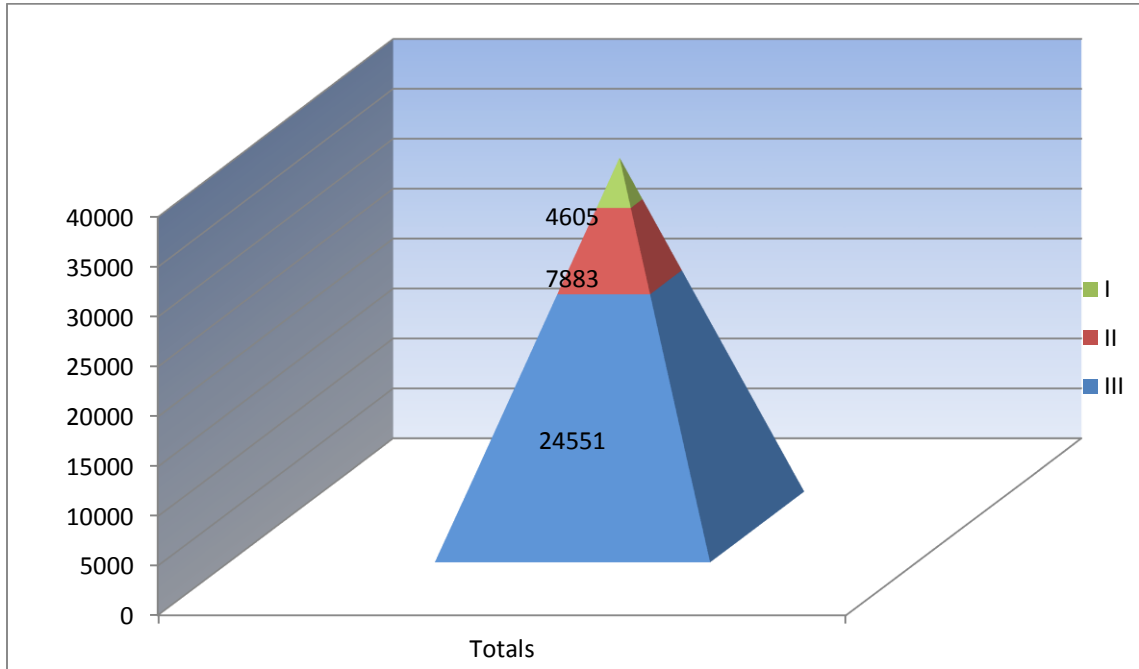
Tier III Behaviors	Tier II Behaviors	Tier I Behaviors
Curfew	Assault 4	Agg. Robbery 1
Offensive Conduct Ordinance	Assault 5	Agg. Robbery 2
Alcohol	Domestic Assault	Simple Robbery
Runaway	Burglary 4	Assault 1
Disorderly Conduct	Trespass	Assault 2
Obstructing Legal Process	Criminal Damage to Property 3	Assault 3
Theft	Criminal Damage to Property 4	Burglary 1
Truancy/Ed Neglect Parent Mtgs.	Theft (Gross Misdemeanor)	Burglary 2
	Truancy/Ed Neglect SARTs	Burglary 3
		CDP 1
		MV Theft
		Theft (Felony)
		Truancy/Ed Neglect Court Petitions

Wraparound services can be funded as a mental health service under Medicare. Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) is the child health component of Medicaid. Children 21 years old and under are entitled to any "medically necessary" services through Medicaid. In Minnesota, the EPSDT Program is known as the Child and Teen Checkups (C&TC) Program. From birth through 20 years of age, children who are enrolled in Minnesota Health Care Programs (MHCP), Medical Assistance (MA), and MinnesotaCare are eligible for the C&TC Program. Minnesota is obligated to provide health, dental, mental health and "other medically

necessary" services to Medicaid-eligible youth even if those services are not actually listed in the state plan.[24] The services can include a broad array of screening, assessment, case management, and rehabilitation services. As described by Huskey & Associates, EPSDT can fund a variety of wraparound services as mental health services under Medicaid, including:[25]

- Strengths and needs assessments

- Crisis stabilization

- Wraparound team formation

- Wraparound plan development

- Wraparound service plan implementation

- Engagement of the child and family

- Ongoing crisis and safety planning

- Tracking and adapting the wraparound service plan

- Transition

Figure 4. Current Service Continuum vs. New Service Continuum.[26]
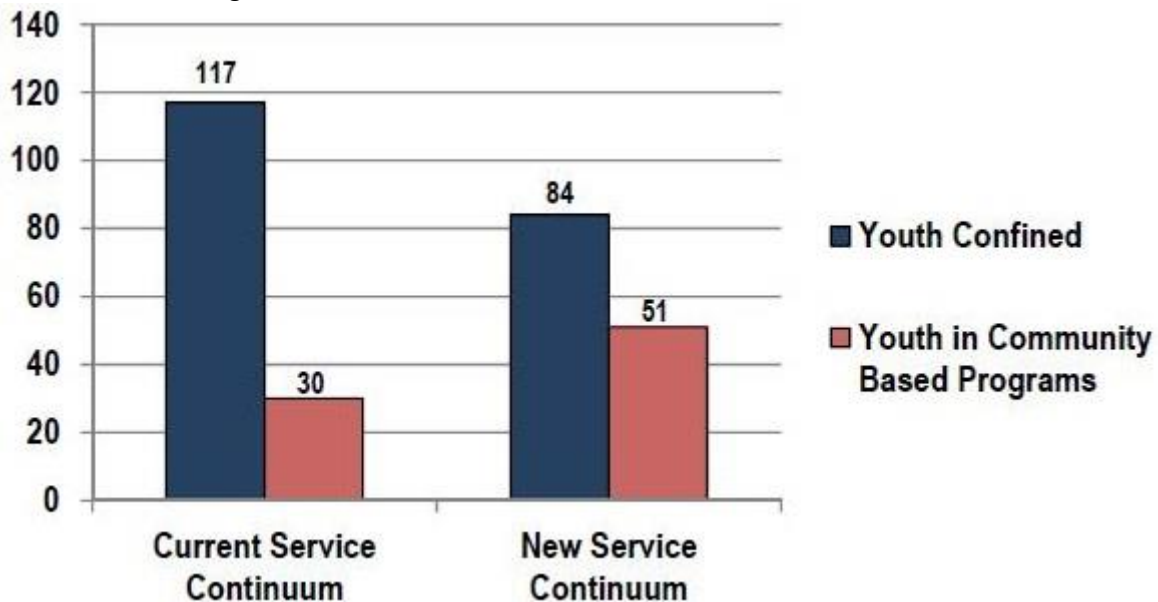
[24] Minnesota Department of Human Services. 2011 C&TC Provider Guide. Chris Koyangagi, Policy Director of the Bazelon Center, September 2, 2005. http://ww.bazelon.org/issues/Koyanagi_declaration.htm. www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Early-Periodic-Screening...
[25] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013). Pg. 3.61
[26] Ibid, Pg. 1.10

IV. Research Questions and Methods

In its 11-point strategic plan, Ramsey County committed to a multi-departmental, multi-year effort to expand its youth services. This initiative will require research, system design and implementation efforts set to begin in 2014.[27] To provide a starting point, the Capstone Project Consultants conducted research into the process of creating wraparound service programs for youth to identify critical information and key lessons learned. The consultants examined the following questions:

- The driving and restraining forces encountered in the wraparound program establishment.
- The initial steps taken to establish these wraparound programs.
- The services offered through these wraparounds, how they are delivered, and by whom.
- The policies and practices that are the most efficient and cost effective with the best outcomes.
- How the other wraparound programs are funded and supported; and pitfalls encountered by other programs and possible strategies to avoid them.

The following combination of methods were used to produce this report's findings and recommendations:

Stakeholder Analysis
- A stakeholder analysis identifies the individuals or groups that are likely to affect or be affected by implementation of a wraparound approach. It also helps to assess how the interests of those stakeholders should be addressed in the process. This paper used a Power/Interest Matrix as a simple tool to categorize project stakeholders with increasing power and interest in the project.

Impact Assessment of Racial Disparities
- An important dimension of stakeholder analysis involves recognizing racial disparities. A Racial Equity Impact Assessment is a systemic examination of how different racial and ethnic groups have been or will be affected by an action or decision.

Literature Review
- A literature review focused on the research questions in an attempt to identify, appraise, select and synthesize the current knowledge including substantive findings regarding wraparound implementation.

Environmental Scan and Comparative Program Review
- An environmental scan is a way of studying and interpreting the political, economic, social and/or technological events and trends which influence a particular area of endeavor.

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[27] Cultivating Economic Prosperity and Eliminating Concentrated Poverty, Ramsey County (March 20, 2014). Pg. 5

v.   Stakeholder Analysis

A stakeholder analysis was used to identify the individuals and groups that are likely to affect and be affected by implementation of a wraparound process. Stakeholder analysis is the process of analyzing the attitudes of stakeholders. Frequently this occurs during the preparation stage of a project to assess stakeholders' positions regarding potential changes.

Stakeholder analysis has the goal of promoting cooperation between stakeholders and the project team and increasing the likelihood of a successful outcome. It is important to identify all the stakeholders in order to identify how they measure success and develop appropriate goals. The first step is to develop a categorized list of the members of the stakeholder community. The potential list of stakeholders for any project will always exceed both the time available for analysis and the capability to sensibly display the results. The challenge is to focus on the right stakeholders, those who are most critically important, and to use a tool such as the Power/Interest Matrix to visualize this critical sub-set of all stakeholders.

In general, a stakeholder analysis consists of weighing and balancing the competing demands from each of those who have a claim on the outcome. Such an analysis does not mean that certain interests will not override other interests, but it ensures that all interests will be considered. This report used a Power/Interest Matrix as a simple tool to categorize project stakeholders with increasing power and interest in the project.

There are at least three types of stakeholders:

- **Primary stakeholders:** Those persons or organizations ultimately affected, either positively or negatively by an organization's actions. The Capstone Project Consultants see these as youth and their families.

- **Secondary stakeholders:** The persons or organizations who are indirectly affected by an organization's actions. The consultants see these as community groups and nonprofit service providers.

- **Key stakeholders:** Those persons or organizations who have significant influence upon or importance within the process. The consultants see these as the County departments, the County board, and other relevant policy makers.

A stakeholder analysis can assist in the process of deciding who should be involved, how and at what point. "In general, people should be involved if they have information that cannot be gained otherwise, or if their participation is necessary to assure successful implementation of initiatives built on the analyses (Thomas 1993, 1995)."[28] Strategic planning scholar John Bryson identifies five potential levels of stakeholder involvement phrased in the form of "promises":

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[28] Bryson, John M., What To Do When Stakeholders Matter: Stakeholder Identification and Analysis Techniques. Vol. 6 Issue 1 2004 21-53 Public Management Review ISSN 1471-9037 prinViSSN 1471-9045 online

- Inform – "Promise: We will keep you informed"

- Consult – "Promise: We will keep you informed, listen to you, and provide feedback on how your input influenced the decision."

- Involve – "Promise: We will work with you to ensure your concerns are considered and reflected in the alternatives considered, and provide feedback on how your input influenced the decision."

- Collaborate – "Promise: We will incorporate your advice and recommendation to the maximum extent possible."

- Empower – "Promise: We will implement what you decide."

Figure 5. Power – vs. – Interest Grid

High

Power

Keep Satisfied – "Subject"	**Manage Closely – "Players"**
MN Department of Health MN State Legislature MN Governor	County Commissioners County Manager County Corrections County Human Services County Attorney County Courts County Public Health County Workforce Annie E Casey Foundation
Monitor – "Crowd"	**Keep Informed – "Context Setters"**
Families not in system Schools Taxpayers	Community Organizations Families w/ children receiving care Juveniles Service Providers

Low ←————————— **Interest** —————————→ High

VI. Impact Assessment of Racial Disparities

Bolman & Deal, in *Reframing Organizations*, write that, "Explosive technological and social changes have produced a world that is far more inter-connected, frantic, and complicated" and understanding it requires evaluating situations through different perspectives. It became clear to the consultants during the stakeholder analysis that an important dimension of the stakeholder analysis involves recognizing racial disparities within youth services.

Nationally, Brown (2007) argues that the historical origins of the juvenile justice system as a product developed to address perceived delinquency by urban youth has led to a racially biased system, rather than decisions made by individuals who may have racial bias. This is the reason, she states, that efforts to create standardized assessments of "at risk" youth have not decreased racial or ethnic disparities.   Brown posits that the criteria used to assess "at risk" youth are determined by the difference from a "normal" youth routinely seen as a middle-class, suburban, and white. Therefore risk assessments result in reinforcing racial and social differences already apparent between suburban and urban youth, and institutionalize that inequality.[29]

Overall County Population
While the population is projected to decrease by 10,000 from 2005 to 2020, Ramsey County continues to grow in diversity. People of color increased from 7 percent of residents in 1980 to 30 percent in 2007.[30] By 2020, 40 percent of county residents are projected to be Latino or residents of color. The white and American Indian populations are projected to decrease and other race ethnic groups are expected by 25 percent or more (White/non-Hispanic -13.3 percent, Black/non-Hispanic +30.7 percent, Asian/non-Hispanic +24.4 percent, American Indian/non-Hispanic -5.4 percent, two or more races +25.7 percent, Hispanic any race +36.4 percent).[31]

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[29] Brown, E. (2007). 'It's Urban Living, Not Ethnicity Itself': Race, Crime and the Urban Geography of High-Risk Youth. Geography Compass, 1(2), 222-245.
[30] The Ramsey County Community Human Services Anti-Racism Initiative (9-23-09). Pg. 3
[31] Ibid, Pg. 3

Figure 6. Proportion of Residents of Color Compared to White Residents.[32]

	1980	1990	2000	2010	2020
Residents of Color	7%	13.3%	24.7%	32.4%	40%
Residents - White	93%	86.7%	75.3%	67.6%	60.2%
	N= 459,784	N=485,765	N=511,035	N=495,320	N =490,100

☐ Residents - White   ■ Residents of Color
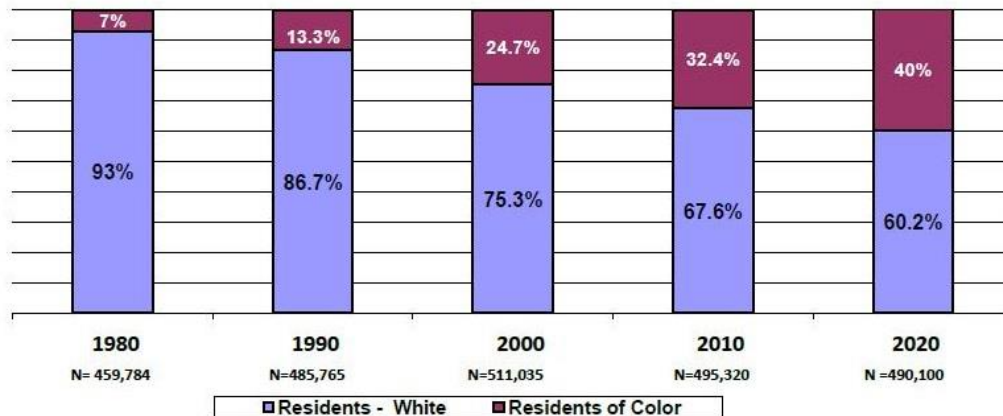
Racial Disparities Identified by Human Services

Each day, about one in five Ramsey County residents are served by Community Human Services. Residents of color are overrepresented in the human service population. Across all Community Human Service programs serving children, adults, and families, at least 53 percent of service recipients are persons of color.[33]

The disparities raise questions about whether services are being provided equally and effectively across racial and cultural groups. For example, African America children are 17 percent of the county population but 39 percent of children identified in maltreatment reports during 2008.[34] In 2008, 45 percent of children in out of home placement were African American. American Indian children are 1.2 percent of the county population but are involved in 3.4 percent of the maltreatment reports and 5.6 percent of the children who are placed out of home.[35]

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[32] The Ramsey County Community Human Services Anti-Racism Initiative (9-23-09). Pg. 3
[33] Ibid, Pg. 5
[34] Ibid, Pg. 7
[35] Ibid, Pg. 7

Figure 7. African American and American Indian 2008 Child Maltreatment Reports, Children in Out of Home Placement compared to the Ramsey Child Population.[36]

	2008 RC Child Population Projection	2008 Child Maltreatment Reports	2008 Children in Out of Home Placement
■ American Indian	1.20%	3.40%	4.70%
■ African American	17.00%	39.00%	45.00%
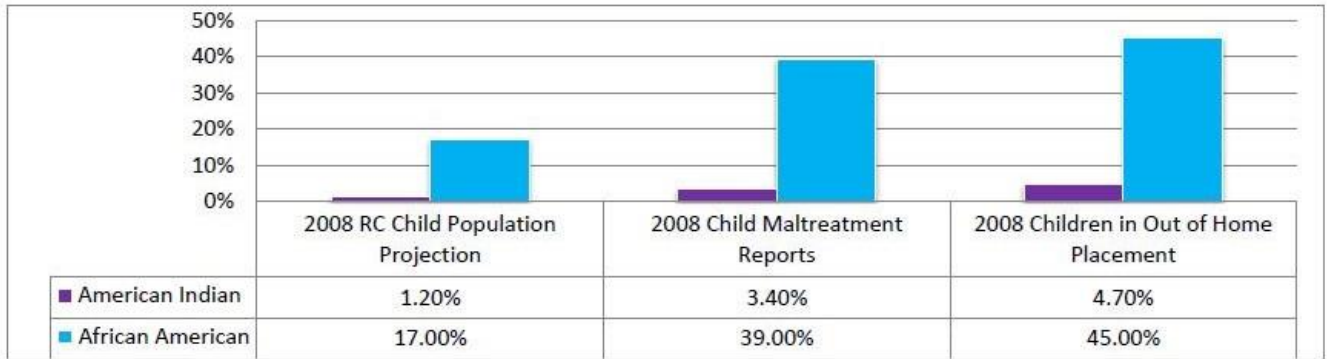
Racial Disparities Identified by Community Corrections

The Ramsey County population declined while the youth population age 10 – 19 years old grew at an annual rate of 1.6 percent during 2005-2010. Two-thirds of youth brought into detentions are detained and 53.6 percent of the youth referred to the County Attorney's Office are formally charged. While juvenile arrests went down in Ramsey County by 12.6 percent during 2006-2010, the arrest rate for Hispanic and mixed-race youth increased. In addition, during 2006-2010, more than one-half of the juvenile arrests within the county were black youth, who only represent 14 percent of the Ramsey County youth population.[37]

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[36] The Ramsey County Community Human Services Anti-Racism Initiative (9-23-09). Pg. 7
[37] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013). Pg. 1.8, 1.18, 1.31, 1.32

Figure 8. Percent of Juvenile Arrests by Race (2006-2010).[38]

Youth 10-21 yrs. old in Ramsey County

Native American 1%
Other 5%
African American 14%
Asian 18%
Hispanic 9%
Caucasian 53%

Source: U.S. Census Bureau, 2010 Census. 2010 SF1 100% Data.
Note: All races exclude Hispanic. Other includes Native Hawaiian/Pacific Islander, Other and 2+ Races

Ramsey County
Percent of Juvenile Arrests by Race
2006-2010
N = 30,334

American Indian/ Alaska Native 1.7%
Asian 10.2%
Other/Mixed 1.5%
White 29.7%
Hispanic or Latino 6.3%
Black or African-American 50.7%

Source: Criminal Justice Statistics Center; Arrest and Apprehension Data, Uniform Crime Reports; Ramsey.dmc.2006-2010

Anti-Racism Initiative Timeline

From 1999 to 2002, Ramsey County leadership responded to changing demographics through its Model Employer Initiative, which included cultural competence education and a racial harassment response system. From 2002 to 2005, CHS laid the groundwork for an anti-racism initiative through its diversity and cultural responsiveness work. From 2006 to 2009, CHS's Anti-Racism Leadership Team created and implemented organizational change strategies to eliminate institutional racism. From 2010 to present, CHS has renewed its commitment to eliminate racism at the institutional level. Since 2003, CHS has used the Minnesota Collaborative Anti-Racism Initiative (MCARI) as a guide for establishing "a common conceptual foundation and language around systemic power and race."[39]

Racial Equity Impact Assessment

A Racial Equity Impact Assessment is a systemic examination of how different racial and ethnic groups have been or will be affected by an action or decision. REIAs are used to identify unanticipated adverse consequences in policies, institutional practices, programs, plans, or budgets decisions.   REIAs can be used to reduce, eliminate, and prevent racial discrimination and inequities. REIAs are best conducted during the decision-making process, prior to enacting new proposals. They can be used to inform decisions, much like an environmental impact statement, fiscal impact report, or workplace risk assessment.

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[38] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013). Pg. 1.32
[39] LOOKING BACK, MOVING FORWARD: Anti-Racism Initiative Narrative Timeline (Ramsey County Community Health Services, ARLT Communication Workgroup, 12/2010). Pg. 2, 3, 4, 6

REIAs have been used in the United Kingdom since 2000. The Race Relations (Amendment) Act of 2000 established a statutory general duty of government authorities to promote race equality by: 1) eliminating unlawful discrimination; 2) promoting equality of opportunity; and 3) promoting good relations between persons of different racial groups. The general duty was expanded in 2010 to include age, disability, sex, gender reassignment, pregnancy and maternity, race, religion or belief, and sexual orientation. Under the Act, government agencies are required to use REIAs, which are defined as "… a way of systematically and thoroughly assessing, and consulting on, the effects that a proposed policy is likely to have on people, depending their racial group … The main purpose of a race equality impact assessment is to pre-empt the possibility that your proposed policy could affect some racial groups unfavorably."[40]

The use of REIAs in the U.S. is still recent and limited. However, prompted by a community-based alliance called the Education Equity Organizing Collaborative, the Minneapolis Board of Education agreed, in 2008, to use a racial impact assessment to inform decision making related to its Changing School Options initiative.[41] In King County, WA, the Equity and Social Justice Initiative asks all departments to use a "fair and just principle" to achieve equitable opportunities for all, and to use an "Equity Impact Review Tool" to consciously address the elimination of racism in the areas of: 1) policy making and decision making; 2) organizational operations; and 3) community engagement and communications. In Seattle, the Race and Social Justice Initiative asks all departments to use "Racial Equity Analysis" questions for policy development and budget making. Questions asked including the proposed actions support: economic equity and contracting; immigrant and refugee access to services; public engagement and outreach; workforce equity; and capacity building. In Oregon, the proposed Criminal Justice and Child Welfare Bill (House Bill 2053) would allow any lawmaker to request a study analyzing the impact of child welfare and criminal justice laws on racial and ethnic communities.[42]

An REIA can be approached in a number of different ways. The following are proposed steps and questions designed to anticipate, assess, and prevent adverse consequences:

1. Identify Stakeholders – Which racial/ethnic groups may be most affected by and concerned with this proposal?

2. Engage Stakeholders – Have the affected racial/ethnic groups been informed, meaningfully involved, and authentically represented in evaluation of this proposal?

3. Identify and Document Racial Inequities – Which racial/ethnic groups are most advantaged and disadvantaged by this proposal and how well adequately is this documented?

4. Examine the Causes – What factors may be producing and/or perpetuating the advantages and disadvantages associated with this proposal?

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[40] Race Forward: The Center for Racial Justice Innovation
[41] Jermaine Toney, Using a Racial Equity Impact Analysis in the Minneapolis Public Schools, Clearinghouse REVIEW Journal of Poverty Law and Policy, September-October 2013.
[42] Race Forward: The Center for Racial Justice Innovation

5. Clarify the Purpose – What does the proposal seek to accomplish and will it reduce or increase racial/ethnic disparities or discrimination?

6. Consider Adverse Impacts – Which racial/ethnic groups could be negatively impacted by what adverse impacts or unintended consequences?

7. Advance Equitable Impacts – What positive impacts on equality and inclusion could result from this proposal for which racial/ethnic groups?

8. Examine Alternatives or Improvements – What provisions could be changed or added to the proposal in order to reduce adverse impacts and increase positive impacts?

9. Ensure Viability and Sustainability – Is the proposal realistic, adequately funded, and capable of being successfully implemented and enforced?

10. Identify Success Indicators – Are there provisions for identifying indicators and benchmarks as well as ongoing methods for data collection, public reporting, stakeholder participation, and public accountability?

VII.   Literature Review of Wraparound Process Implementation

This literature review specifically focused on the wraparound model and implementation. It provides some basic definitions and evidence as well as three important components of implementation: adopting a set of core principles for the wraparound approach; assessing and establishing readiness on the team, program, and system levels; and planning for the six essential components of a wraparound process. Moving forward with a wraparound approach means answering questions about readiness and program design drawn from the identified literature.

What is wraparound?

Definition
Wraparound is an intensive, holistic method of engaging with individuals with complex needs so that they can continue to live in their homes and communities. The term "wraparound" has been defined in different ways since it was coined in the 1980s. Described as a philosophy, an approach, and a service, in recent years wraparound has been most commonly conceived of as "an intensive, individualized care planning and management process."[43]

Brief History
Wraparound was developed in the 1980s as a means for maintaining youth with the most serious emotional and behavioral problems in their homes and communities. In 2004, the National Wraparound Initiative was launched to better detail the wraparound model and what is considered high-quality wraparound implementation. In 2007, 91 percent of U.S. states had some type of wraparound initiative, and 62 percent have implemented some type of statewide initiative. Nationally, over 100,000 youth were estimated to be engaged in a "well-defined wraparound process."[44]

Theory of Change
In a wraparound process, individuals who are relevant to a child or youth's well-being (e.g. family members, other natural supports, service providers, and agency representatives) form a team that jointly develops an individualized plan of care, implements this plan, and evaluates the success of the plan over time. The wraparound plan includes formal services and interventions, community services, and support and assistance from friends, kin, and other people within the family's social networks. The team meets frequently to measure the plan's components against established indicators of success. Plans and strategies are revised if outcomes are not achieved.[45]

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[43] Bruns, E. J. & Walker, J. S. (2010). The wraparound process: An overview of implementation essentials. In E. J. Bruns & J. S. Walker (Eds.), *The resource guide to wraparound.* Portland, OR: National Wraparound Initiative. http://www.nwi.pdx.edu/NWI-book/Chapters/Bruns-5a.2-(implementation-essentials).pdf

[44] Bruns, E. J., & Suter, J. C. (2010). Summary of the wraparound evidence base. In E. J. Bruns & J. S. Walker (Eds.), *The resource guide to wraparound.* Portland, OR: National Wraparound Initiative. http://www.nwi.pdx.edu/NWI-book/Chapters/Bruns-3.5-(evidence-base).pdf

[45] Walker, J. S. (2008). How, and Why, Does Wraparound Work: A Theory of Change. Portland, OR: National Wraparound Initiative, Portland State University. http://www.nwi.pdx.edu/pdf/howandwhywraparound.pdf

Figure 9. A Theory of Change for Wraparound: Overview.[46]

Figure 1. A Theory of Change for Wraparound: Overview
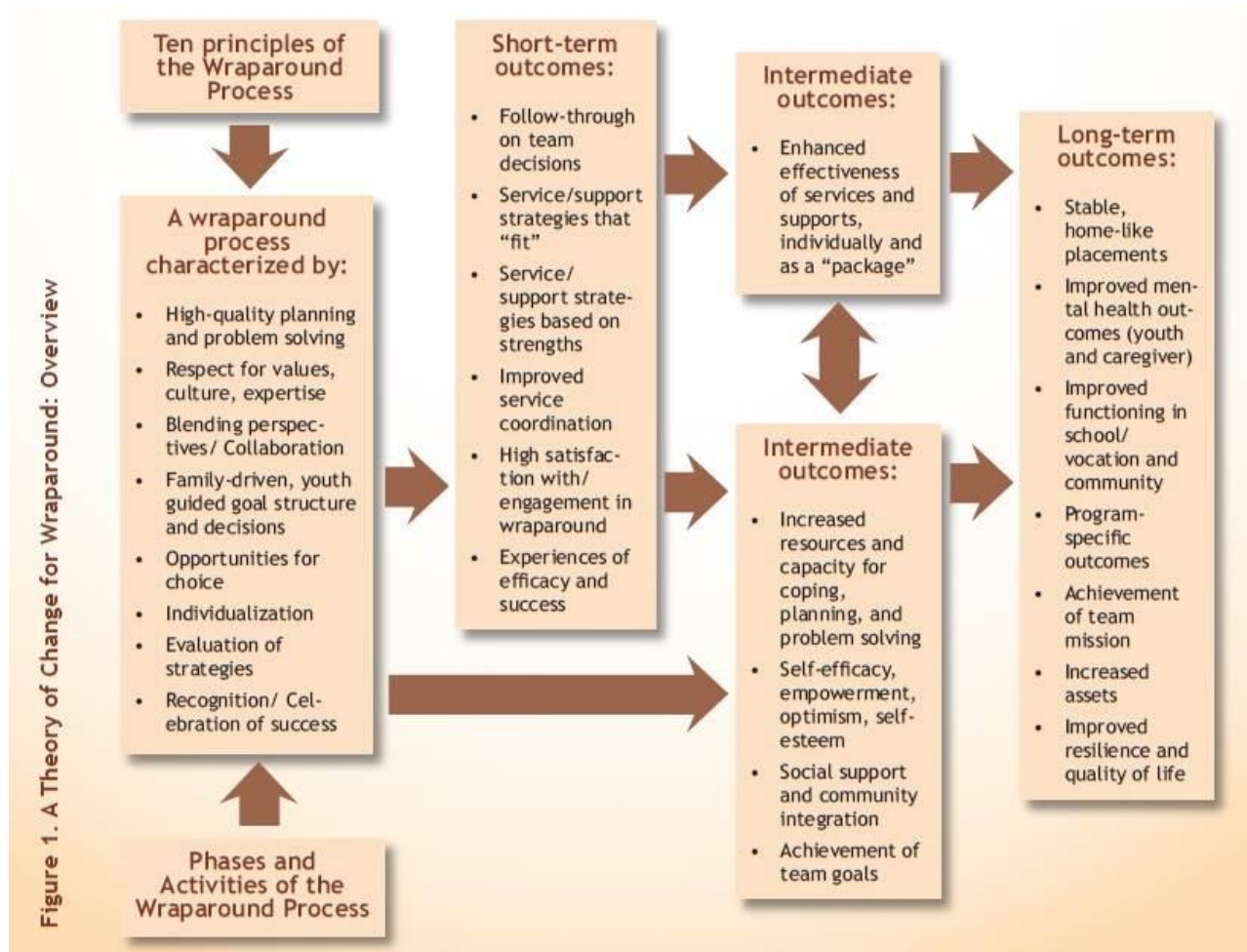
Is there evidence to support wraparound?

Evidence Based

Youth with complex needs may be served through a range of approaches, such as traditional case management, specialized office- or community-based practices that address specific problem areas, and out-of-community options such as residential treatment, group homes, and inpatient hospitalization. The wide range of potential options, combined with limited resources, argues for

[46] Walker, J. S. (2008). How, and Why, Does Wraparound Work: A Theory of Change. Portland, OR: National Wraparound Initiative, Portland State University. http://www.nwi.pdx.edu/pdf/howandwhywraparound.pdf

using a strong evidence base when deciding what approaches work for which youth under what circumstances.

Assessment Criteria

There are four basic criteria in assessing an intervention's base of evidence (Kazdin, 1999): (1) a theory to relate a proposed intervention to a problem; (2) basic research to assess the validity of the intervention; (3) evidence to show an approach changes the intended outcomes; and (4) results that demonstrate the relationships between the process and the outcomes. For criteria 1 and 2, the theory of change for wraparound provides the argument for why wraparound treatment planning is likely to be more effective than services provided without this process. For criterion 4, research shows associations "between system-, organizational, and team-level fidelity and child and family outcomes" (Bruns et al, 2005, 2006, 2009). Ultimately, however, it is evidence that demonstrates the intended outcomes, criterion 3, that is most relevant for evaluating an intervention's evidence base.[47]

Controlled Studies

The first meta-analysis of the wraparound effect looking at seven controlled studies was published in 2009. This analysis found that, "on average across these studies, significant effects of wraparound were found for all four outcome domains examined, including living situation, youth behavior, youth functioning, and youth community adjustment … with the largest effects found for living situation outcomes." As of 2010, there are now nine controlled studies of wraparound effects published in peer-reviewed journals. Several of these newer studies include wraparound fidelity data as well as cost data.[48] (For a summary, see the attached appendices.)

What are the core principles for the wraparound approach?

Background

A basic set of philosophical principles for the wraparound approach can be found in early programs, such as Kaleidoscope in Chicago, the Alaska Youth Initiative, and Project Wraparound in Vermont. In 1999, a published monograph on wraparound presented 10 core elements of wraparound and 10 practice principles from the perspective of these early pioneers. These elements and practices touched on activities at the team, organization, and system levels.[49]

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[47] Bruns, E. J., & Suter, J. C. (2010). Summary of the wraparound evidence base. In E. J. Bruns & J. S. Walker (Eds.), *The resource guide to wraparound.* Portland, OR: National Wraparound Initiative. http://www.nwi.pdx.edu/NWI-book/Chapters/Bruns-3.5-(evidence-base).pdf

[48] Ibid

[49] Goldman, S.K. (1999). The Conceptual Framework for Wraparound. In Burns, B. J. & Goldman, K. (Eds.), *Systems of care: Promising practices in children's mental health, 1998 series, Vol. IV: Promising practices in wraparound for children with severe emotional disorders and their families.* Washington DC: Center for Effective Collaboration and Practice.

The National Wraparound Initiative guided a process of revising these elements and practice principles into "ten principles of the wraparound process," intended to provide clarity on the specific characteristics of the wraparound process model:[50]

- Voice and Choice for Children and Families – "Family and youth/child perspectives are intentionally elicited and prioritized during all phases of the wraparound process. Planning is grounded in family members' perspectives, and the team strives to provide options and choices such that the plan reflects family values and preferences."

- Team-Driven Process Including Youth and Family – "The wraparound team consists of individuals agreed upon by the family and committed to them through informal, formal, and community support and service relationships."

- Inclusion of Natural Supports – "The team actively seeks out and encourages the full participation of team members drawn from family members' networks of interpersonal and community relationships. The wraparound plan reflects activities and interventions that draw on sources of natural support."

- Collaboration – "Team members work cooperatively and share responsibility for developing, implementing, monitoring, and evaluating a single wraparound plan. The plan reflects a blending of team members' perspectives, mandates, and resources. The plan guides and coordinates each member's work towards meeting the team's goals."

- Community-Based Services – "The wraparound team implements service and support strategies that take place in the most inclusive, most responsive, most accessible, and least restrictive settings possible; and that safely promote child and family integration into home and community life."

- Cultural Competence – "The wraparound process demonstrates respect for and builds on the values, preferences, beliefs, culture, and identity of the child/youth and family, and their community."

- Individualized Services – "To achieve these goals laid out in the wraparound plan, the team develops and implements a customized set of strategies, supports, and services."

- Strengths Based Services – "The wraparound process and the wraparound plan identify, build on, and enhance the capabilities, knowledge, skills, and assets of the child and family, their community, and other team members."

- Persistence – "Despite challenge, the team persists in working toward the goals included in the wraparound plan until the team reaches agreement that a formal wraparound process in no longer required."

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[50] Bruns, E.J., Walker, J.S., Adams, J., Miles, P., Osher, T.W., Rast, J., VanDenBerg, J.D. & National Wraparound Initiative Advisory Group (2004). *Ten principles of the wraparound process.* Portland, OR: National Wraparound Initiative, Research and Training Center on Family Support and Children's Mental Health, Portland State University. http://www.nwi.pdx.edu/pdf/TenPrincWAProcess.pdf

- Outcome-Based Services – "The team ties the goals and strategies of the wraparound plan to observable and measurable indicators of success, monitors progress in terms of these indicators, and revises the plan accordingly."

How can you assess and establish readiness for implementation?

There are self-assessment tools designed by the National Wraparound Initiative (see the attached appendices) to help leaders and managers assess and establish readiness for using the wraparound process at the family level based on the essential team, organizational, and system supports. With some adaptation, the same questions apply to preparation for establishment of the overall wraparound approach and expanded services.

Effective Implementation Team
- Membership – Are the right people participating from the right levels of the partner organizations?
- Structure – Is there a structure that supports and encourages effective partnerships that translate into action?
- Process – Are there processes in place that assist in maintaining effective relationships, goals, and plans for a community service system?

Supportive Agencies, Departments, and Organizations
- Shared Leadership – Have all the appropriate parties, including families, been consulted to build support for the wraparound process?
- Guiding Plan – Has a plan been established that is future-oriented, strategic, and relevant?
- Organizational Integration – Is the entire system being considered in the design?

Hospitable Context and System
- Funding – Have you reached consensus about the right amount of fiscal investment? Is enough invested to ensure the right staff and infrastructure to produce the desired results? Does this include funding streams for necessary services and flexible funds?
- Policies – Have you identified the key results or impacts you are expecting? Have you identified what practices you want staff to follow? Have you built an awareness of anticipated community, organizational, and system change activities?

What are the essential components in wraparound implementation?

The wraparound process is designed to provide care to youth with the most complex needs. Providing comprehensive care through the wraparound approach requires significant coordination and collaboration. The process of program and system change required to introduce wraparound approach child- and family-serving agencies and organizations involves careful planning for six essential elements identified in research using the "community supports for wraparound inventory": community partnerships, collaborative action, fiscal policies and sustainability, access to needed supports and services, human resource development and support, and accountability.

Figure 10. The essential components in wraparound implementation.[51]

Community Partnerships

According to *The Wraparound Implementation Guide*, effective implementation requires: "Representatives of key stakeholder groups, including families, young people, agencies, providers, and community representatives have joined together in a collaborative effort to plan, implement, and oversee wraparound as a community process."

- **Best Practices** – The ideal approach for wraparound implementation involves a collaborative structure for decision making, a clear purpose, a structure that matches the purpose, stakeholder representation, and efficient operating systems that avoid requirements for multiple levels of approval.[52]

- **Possible Pitfalls** – Problems can develop when omitting key players, failing to allow community partnerships to evolve, allowing dominating perspectives, getting too far ahead of community partners, and accepting false consensus.[53]

Collaborative Action

According to *The Wraparound Implementation Guide*, effective implementation requires: "Stakeholders involved in the wraparound effort work together to take steps to translate the

[51] National Wraparound Initiative. http://www.nwi.pdx.edu/overall.shtml
[52] Miles, P., Brown, N., & The National Wraparound Initiative Implementation Work Group. (2011). The Wraparound Implementation Guide: A Handbook For Administrators And Managers – Theme 1: Community Partners. Portland, OR: National Wraparound Initiative.
[53] Ibid

wraparound philosophy into concrete policies, practices, and achievements that work across systems."

- **Best Practices** – The ideal approach involves locating strong leaders and champions within partnerships, developing a guiding plan, and coordinating planning at all levels of implementation.[54]

- **Possible Pitfalls** – Problems can develop when expressing the values of a wraparound approach but failing to change the system, separating the wraparound process from the rest of the system, failing to also see changes in partner organizations, moving forward too quickly with implementation before building up sufficient commitment, and failing to include youth and families.[55]

Fiscal Policies and Sustainability
According to *The Wraparound Implementation Guide*, effective implementation requires: "The community has developed fiscal strategies to support and sustain wraparound and to better meet the needs of children and youth participating in wraparound."

- **Best Practices** – The ideal approach involves funds that are available for the cost of doing wraparound, funds that are accessible for needed supports and services, and funds that are flexible enough to implement the strategies that are chosen for wraparound plans.[56]

- **Possible Pitfalls** – Problems can develop when there is over-reliance on any one funding stream, the wraparound approach becomes defined primarily as whatever can be funded by Medicaid, the policies governing the use of flexible funds are either too vague or overly cumbersome, and the approach becomes overly reliant on flexible funds.[57]

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[54] Miles, P., Brown, N., & The National Wraparound Initiative Implementation Work Group. (2011). The Wraparound Implementation Guide: A Handbook For Administrators And Managers – Theme 2: Collaborative Action. Portland, OR: National Wraparound Initiative.
[55] Ibid.
[56] Miles, P., Brown, N., & The National Wraparound Initiative Implementation Work Group. (2011). The Wraparound Implementation Guide: A Handbook For Administrators And Managers – Theme 3: Fiscal Policies and Sustainability. Portland, OR: National Wraparound Initiative.
[57] Ibid.

Access to Needed Supports and Services

According to *The Wraparound Implementation Guide*, effective implementation requires: "The community has developed mechanisms for ensuring access to the wraparound process as well as to the services and supports that wraparound teams need to fully implement their plans."

- **Best Practices** – The ideal approach encourages creativity, provides a wide range of options, ensures easy access to services, focuses on just-in-time help, creates a service provider network, manages a resource directory, and contracts for flexibility.[58]

- **Possible Pitfalls** – Problems can develop when there is a focus solely on access and neglect exit, an over emphasis on a particular type of service or support, a failure to individualize services, and a focus on planning versus doing.[59]

Human Resource Development and Support

According to *The Wraparound Implementation Guide*, effective implementation requires: "The system supports wraparound staff and partner agency staff to fully implement the wraparound model and to provide relevant and transparent information to families and their extended networks about effective participation in wraparound."

- **Best Practices** – The ideal approach uses a thoughtful and deliberative approach to building staff capacity, ensures both organizational alignment and individual accountability in assigning and carrying out functions, provides adequate support to staff, clearly define staff expectations, and involves youth and families in development of human resource strategies.[60]

- **Possible Pitfalls** – Problems can develop when those guiding the wraparound approach get lost in process details, react rather than plan, confuse good practitioners with good managers, fail to provide support to develop new managers, and confuse values agreement on wraparound with the required skills set to perform particular roles.[61]

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[58] Miles, P., Brown, N., & The National Wraparound Initiative Implementation Work Group. (2011). The Wraparound Implementation Guide: A Handbook For Administrators And Managers – Theme 4: Access to Needed Supports and Services. Portland, OR: National Wraparound Initiative.
[59] Ibid.
[60] Miles, P., Brown, N., & The National Wraparound Initiative Implementation Work Group. (2011). The Wraparound Implementation Guide: A Handbook For Administrators And Managers – Theme 5: Human Resource Development & Support. Portland, OR: National Wraparound Initiative.
[61] Ibid.

Accountability

According to *The Wraparound Implementation Guide*, effective implementation requires: "The community implements mechanisms to monitor wraparound fidelity, service quality, and outcomes, and to oversee the quality and development of the overall wraparound effort."

- **Best Practices** – The ideal approach establishes clear wraparound outcomes, defines wraparound process elements, gathers data directly from youth and families, and carefully monitors costs.[62]

- **Possible Pitfalls** – Problems can develop when managers fail to determine how data will be used before beginning to collect it, and fail to set reasonable goals for data collection.[63]

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[62] Miles, P., Brown, N., & The National Wraparound Initiative Implementation Work Group. (2011). The Wraparound Implementation Guide: A Handbook For Administrators And Managers – Theme 6: Accountability. Portland, OR: National Wraparound Initiative.

[63] Ibid.

VIII.   Environmental Scan & Comparative Review of Wraparound Programs

An environmental scan is a way of studying and interpreting the political, economic, social and/or technological events and trends which influence a particular area of endeavor. An organizational environment consists of both external and internal factors. Each environment can be scanned to determine factors that will influence organizational success as a way to help leaders and managers to decide the future path of an organization.

In 2007, 91 percent of U.S. states had some type of wraparound initiative and 62 percent implemented some type of initiative statewide.[64] There are, therefore, many examples available to include in an environmental scan and comparative program review. The Capstone Project Consultants conducted research into four other communities suggested by Ramsey County staff that have created wraparound service programs for youth, specifically programs in Milwaukee (WI), King County (WA), Jefferson County (CO), and the State of Oregon. Although not originally intended, these communities offered an interesting variety of programs for comparison: a city program, a city-driven county program, a large county program, and a statewide program. The programs were compared based on adoption of core principles, level of readiness, and planning for essential components.

The consultants experienced difficulty in establishing communication with the appropriate contacts at each program. The information provided in this report is based primarily on a literature review. It is the consultants' recommendation that Ramsey County conduct further research through direct peer-to-peer contact. The following is the contact information for each program:

Wraparound Milwaukee
Bruce Kamradt
9201 Watertown Plank Road
Milwaukee, WI 53226
Phone: 414-257-7639
bruce.kamradt@milwaukeecountywi.gov
www.wraparoundmke.com

King County MIDD Wraparound
Sandy Tomlin
401 Fifth Ave, Suite 400
Seattle, WA 98104
Phone: 206-263-8957
sandy.tomlin@kingcounty.gov
http://www.kingcounty.gov/healthservices/MentalHealth/Services/Youth/Wraparound.aspx

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[64] Bruns, E. J., & Suter, J. C. (2010). Summary of the wraparound evidence base. In E. J. Bruns & J. S. Walker (Eds.), *The resource guide to wraparound.* Portland, OR: National Wraparound Initiative. http://www.nwi.pdx.edu/NWI-book/Chapters/Bruns-3.5-(evidence-base).pdf

Jefferson County Juvenile Assessment Center (JAC)
Tammy Gland
11011 W. 6th Avenue
Remington Building
Lakewood, CO 80215
Phone: 720-497-7770
transparentjeffco@jeffco.us
http://jeffco.us/district-attorney/diversion-services/juvenile-diversion/

Statewide Children's Wraparound Initiative
http://www.oregon.gov/oha/amh/Pages/wraparound.aspx
Lois Ann Day
Department of Human Services
500 Summer St NE
Salem, OR 97301-1063
Phone: (503) 945-6214

Linda Hammond
Oregon Health Authority
500 Summer Street, NE, E-20
Salem, OR 97301-1097
Phone: 503-947-2340

Figure 11. Environmental Scan and Comparative Review of Wraparound Programs

Essential Elements	City: Milwaukee, WI	Small County: Jefferson Co., CO	Large County: King Co., WA	Statewide: State of Oregon
Team Level				
Membership	Not identified	Not identified	Not identified	An advisory committee required by statute includes representation from the statutory partner agencies, stakeholders, youth and families, and SCWI providers. Accountability is enhanced through engagement of the youth and families who have a critical role in shaping policy and practice in their communities through committees in the governance structure.
Structure	Wraparound Milwaukee contracts with eight community agencies for the over 100 care coordinators who facilitate the delivery of services and other supports to families using a strength-based, highly individualized Wraparound approach. Wraparound Milwaukee has also organized an extensive provider network of over 200 agency and individual providers that offer an array of over 80 services to families. A Wraparound-Milwaukee-operated Mobile Urgent Treatment Team ensures families have access to crisis intervention services.	Jefferson County's program is designed to divert certain mentally ill children out of the delinquency system and provide help and resources to these juveniles and their families. To be eligible, mental health court participants must have a diagnosed mental illness. Most children currently enrolled suffer from major depression and bipolar disorders.	Wraparound services and continuum of care is administered by the Department of Corrections, Human Services, and County Attorney's office, in coordination with community service providers. Liaison officer's work across county departments to ensure the continuum of care is appropriately administered for every youth receiving services.	State leadership and support for SCWI is a joint commitment between OHA's Addictions and Mental Health (AMH) Division and DHS's Child Welfare (CW) program. DHS/OHA identified a state lead and a local site lead to provide guidance and leadership specific to the program at the community level. A portion of two AMH staff positions and one CW staff position have been assigned to provide this guidance, leadership and collaboration with the sites.
Process	Not identified	Not identified	Not identified	The core SCWI implementation team of DHS/OHA co-leads and state and local site leads meet biweekly with partners to coordinate the initiative. Shared leadership helps convey information, identify opportunities,

Essential Elements	City: Milwaukee, WI	Small County: Jefferson Co., CO	Large County: King Co., WA	Statewide: State of Oregon
				and highlight local- and state-level growth and development areas.
Program Level				
Community Partnerships	Wraparound Milwaukee has a broad benefit plan of over 80 different mental health, social and supportive services. To deliver those services in the most flexible and cost effective manner, Wraparound Milwaukee has developed a network of community agencies and individual providers to deliver services based on a comprehensive fee-for-service approach. No formal contracting with Providers is used. Wraparound Milwaukee develops service descriptions, standards for all services, and the unit rate. Community agencies are invited apply to provide one or more of the 80 core services based on service needs which are reevaluated throughout the course of the year. Wraparound Milwaukee then credentials providers who seek to become a Network Provider as an agency or individually. There are currently over 400 agency and individual providers (i.e., independent psychiatrists, psychologists, therapists) involved in the provider network.	Collaborates with service providers and community partners.	Extensive collaboration with service providers and community partners.	All three demonstration sites created an advisory committee with youth and family, provider agencies, partner agencies and advocate representatives.
Collaborative Action	Not identified	It uses a case management process enabling staff to evaluate intervention progress, coordinate and centralize information collected by agencies involved in the juveniles and their families.	There are "liaison" positions between human services and corrections, but appears to be cooperative rather than truly collaborating on providing services and taking a holistic approach to care.	The care coordinator facilities the wraparound team and coordinates the service array. The care coordinator also monitors to ensure necessary services and supports are available for children with highly complex behavioral health needs.

Essential Elements	City: Milwaukee, WI	Small County: Jefferson Co., CO	Large County: King Co., WA	Statewide: State of Oregon
				The local community in each demonstration site has the authority to coordinate the available service array through the Child and Family (Wraparound) Team.
Fiscal Policies and Sustainability	Certain high cost and restrictive services such as residential treatment, psychiatric hospitalization and day treatment require prior authorization. For most services, authorization to a provider to provide services is simply based on a care coordinator entering the requested services, units needed, and name of provider into the automated information system called Synthesis. Vendors are immediately notified on-line of units of service approved for the upcoming month. Providers invoice on-line for services provided and the IT system matches actual services provided against the Service Authorization Request (SAR). The Synthesis system links with another county IT system to cut checks and enter payments on a general ledger.	The program started with funding from Jefferson County Sheriff's Office, R-1 School District, District Attorney's Office, Jefferson Center for Mental Health and the Department of Human Services.

In order to remain sustainable, federal grant and Senate Bill 94 funds helped county officials begin providing critical services to juvenile offenders. Jefferson County Sheriff's Office, R-1 School District, District Attorney's Office, Jefferson Center for Mental Health and the Department of Human Services. | In 2007 King County enacted a one-tenth of one cent sales tax to fund the strategies and programs outlined in King County's Mental Illness and Drug Dependency Action Plan, which includes the wraparound services for at-risk youth. | Not identified |
| Access to Needed Supports and Services | Not identified | There's a centralized assessment hotline/center where youth and families can connect with intake to determine eligibility. | Centralized referrals with a facilitator, with integrated continuum of services (30+ programs/services available). | The service array is a full continuum of coordinated, culturally competent mental health services. Services chosen from this continuum are delivered in a coordinated, flexible and individualized manner. |
| Human Resource | Not identified | Not identified | 15:1 family to facilitator ratio, emphasis on training and skill improvement for facilitators. | The initiative has established a caseload ratio of one care coordinator for up to 15 children. |

Essential Elements	City: Milwaukee, WI	Small County: Jefferson Co., CO	Large County: King Co., WA	Statewide: State of Oregon
Development and Support				Work force development is available to all sites to help achieve fidelity to the evidence-based wraparound model. Portland State University provides community- and practice-level training, coaching and technical assistance.
Accountability	Wraparound Milwaukee is developing clinical practice guidelines for care coordinators and Network providers to reference. The guidelines will aide care coordinators with identifying services that will help enrolled youth and their families with addressing ongoing needs. The guidelines will assist providers in the assessment and treatment of disorders commonly occurring among Wraparound Milwaukee enrollees. These clinical guidelines are intended to augment, but not replace, sound clinical judgment and do not replace existing policy and Fee-for-Service Agreement requirements. Prior to the adoption, each guideline has been reviewed by practitioners that provide the identified service. We welcome your feedback on our adopted clinical practice guidelines. All suggestions and recommendations will be taken into consideration in our next review. You may submit your comments to the Wraparound Milwaukee Provider Network Coordinator or Quality Assurance Director.	It seems the District Attorney's office tracks the success rates (I was unable to get a definitive answer) and according to the DA's office, in 2010 of the clients who completed the program 71% completed successfully and 29% did not complete successfully. Since a major goal of the program is to reduce further criminal acts, tracking recidivism by former clients is very important.	Evaluation built into sales tax increase, with performance measures and data points identified.	The law outlines requirements to collect and evaluate data by establishing a committee. Its duties are to review and choose outcomes or performance measures, create data-sharing agreements, and support the acquisition of information technology that allows local entities to share real-time data. At the outset of this initiative, ways to collect and track data were established at the case and system levels. Measures were defined to determine key indicators at the child and system levels. The project sites have used CPRS and other data measurement tools to demonstrate the individual, systemic and fiscal success indicators of this initiative.

Essential Elements	City: Milwaukee, WI	Small County: Jefferson Co., CO	Large County: King Co., WA	Statewide: State of Oregon
System Level				
Funding	1996 – 6 year $15 million grant 2002 and beyond - A combination of several state and county agencies, including the Bureau of Milwaukee Child Welfare, the County's Delinquency and Court Services, Behavioral Health Division, and the State Division of Heath Care Financing who operates Medicaid, provide funding for the system. Funds from the four agencies are pooled to create maximum flexibility and a sufficient funding source to meet the comprehensive needs of the families served.	Senate Bill 94 was passed to keep funding sustainable.	Not identified	Not identified
Policies	Not identified	Not identified	Not identified	A critical wraparound component is system-level collaboration. Legislation identified DHS Child Welfare and OHA Addictions and Mental Health as lead agencies in implementing this initiative. In response, both dedicated existing resources to support SCWI, which resulted in stronger collaboration and communication.

IX. Leadership Challenge

There are numerous lessons to be learned from the experience of other communities. However, both in spite of these lessons and because of them, the primary challenge the Capstone Project Consultants see lying before Ramsey County is one of leadership. There are many technical challenges that will require the application of authoritative expertise in establishing a wraparound model and a new service continuum. As this report will make clear, there are many existing resources including the report prepared by Huskey & Associates and the National Wraparound Initiative that can provide experience, guidance, and direction in crafting a new system. However, adopting a new service delivery model and integrating a range of departments into will require a deeper and more profound change that leadership scholar Ron Heifetz defines as "adaptive leadership."

In addition, the change process will require detailed and comprehensive planning activities, but creating a strategic plan will not be enough. The indicated strategies will need to be incorporated throughout the system for them to be brought to life. This requires thinking just as strategically about implementing and managing the process of change. This report suggests ways of approaching this profound leadership challenge and developing a shared commitment for moving forward.

Adaptive Leadership Challenge

The capstone project that the consultants were presented by Ramsey County appeared initially to be a "technical challenge" that simply required the proper application of "authoritative expertise or standard operating procedures."[65] In the collective opinion of the consultants, what the county is actually facing is an "adaptive challenge" that requires all of the involved parties to "get on the balcony," which translates to "standing back and watching even as you take part in the action being observed,"[66] in order to understand the true nature of the challenge as well as their part in making their desired change happen. While there is a technical role to play, a more significant role involves "draw(ing) attention to the tough questions" and "bring(ing) conflicts to the surface."[67] Ultimately, to make the change real and lasting, it is important to "give the work back"[68] to the key stakeholders.

Establishing a shared continuum of services and a wraparound model is a dramatic change that is going to require each of the leaders to "model the way," as Kouzes & Posner put it in *The Leadership Challenge*. "To effectively model the behavior they expect of others, leaders must first be clear about guiding principles. They must clarify values."[69] Leaders need to "make sure

[65] Heifetz, Ronald and Linsky, Marty (2002). *Leadership on the Line: Staying Alive through the Dangers of Leading*. Harvard Business School Press. Pg. 13
[66] Ibid, Pg. 52
[67] Ibid, Pg. 111
[68] Ibid, Pg. 124
[69] Kouzes, James and Posner, Barry (2007). *The Leadership Challenge*, 4th edition. John Wiley & Sons. Pg. 15

that there's agreement on a set of shared values"[70] and they need to recognize that "unity is forged, not forced."[71] Leaders need to be conscious in promoting unforced unity.

The Huskey & Associates report identified a gap in services for at-risk youth, however, it was not clear to the county where to start. Through stakeholder interviews, the consultants got the sense that Ramsey County and community partners understands something needs to be done with the "at-risk youth" population which leads to the topic of "finding a common purpose."[72] Of the Ramsey County leaders contacted by the consultants, not everyone was on the same page about where or how this topic should be address.   Part of Ramsey County's adaptive leadership assessment is to help all stakeholders find a common purpose. In *Leadership for the Common Good*, Bryson and Crosby provide guidance and understanding in how to tackle public problems in a shared-power world by starting with the following framework:[73]

- Identify the need or problem that requires cooperation or collaboration among diverse individuals, groups or organizations.
- Identify who are the main stakeholders, include those affected by the problem; those with responsibility for resolving it; those with resources, including knowledge, that relate to the problem.
- Describe the existing connections among these stakeholders:
  -Which networks and coalitions exist?
  -Which policy regimes are important?
- Describe in what way is this an emergent, programming, or operational problem? Which individuals and groups might have a passion for remedying the problem?

In shared-power situations, part of the battle is just gaining agreement on what the problem(s) are, who should be involved and what is the initial step.[74] To coordinate action and make headway on some type of resolution, Ramsey County leaders need to be aware of the whole problem system and recognize that it has to undergo significant change. This means that change advocates (or those that will be identified as part of the initial taskforce) have to engage in cross departmental, issue-oriented, messy planning and decision making, in which shared goals and mission are being developed as the process moves along.

As Ramsey County balances some shared-power and adaptive leadership techniques, there will be challenges that may create barriers to efficient and effective buy-in and, implementation of the wraparound process. According to Heifetz and Linsky,[75] in order to mobilize adaptive work, leaders must engage people in adjusting their unrealistic expectations, rather than try to satisfy them with a technical remedy. In a situation like this where multiple stakeholders are involved, in

[70] Kouzes, James and Posner, Barry (2007). *The Leadership Challenge*, 4th edition. John Wiley & Sons. Pg. 48
[71] Ibid, Pg. 66
[72] Ibid, Pg. 116
[73] Bryson, John, M. and Crosby, Barbara, *Leadership for the Common Good*, San Francisco: Jossey-Bass, 2005). Pg. 21
[74] Ibid, Pg. 9
[75] Heifetz, Ronald A. and Linsky, Marty, *Leadership on the Line*, (Boston: Harvard Business School Publishing, 2002)

order to offer hope to those who want to avoid being pushed aside, the consultants suggest the following strategies:

- "Get on the balcony":[76] Stepping back to get perspective while remaining fiercely engaged; this involves moving back and forth from the balcony (a place to engage self-reflection to gain perspective) and the dance floor (the place of action).

- "Think politically":[77] Relating to people in a way to lead through adaptive change- keeping the opposition close, but watching your allies, too.

- "Orchestrating the conflict":[78] Leaders using adaptive leadership should use stress productively to work the issues by raising the temperature to draw attention to tough questions as well as lowering the temperature to address technical aspects of the problem, establish structure and slowing down the process of challenging norms and expectations.

- "Giving the work back":[79] "By trying to solve adaptive problems for others, at best you will reconfigure it as a technical problem and create some short term relief."[80] Put responsibility on those who need to make the change.

- "Holding steady":[81] Maintaining your focus while taking the heat. Leaders in adaptive challenges will most likely get the heat however it's important to not lose sight of the goal.

As Ramsey County brings together various stakeholders to work on the issue, technical leadership is about using skills and procedures solve current problems and is typically accomplished by those in authority position. Adaptive leadership is having the guts and heart to learn new ways to bring needed deep transformation of culture into the organization by those who have the problem.[82]

Throughout the interviews with county departments, there were themes that arose frequently, the importance of having family involvement, the value of bridging the service gap, and the benefit of providing a continuum of care. However, to move past the conversation stage and to some tangible action, county leaders need to develop that first step together, which often is the most difficult one. One of the biggest challenges for Ramsey County is ensuring there is communication so all key players within the county are educated about this initiative. Change has to start with having county leadership at the core; with county leaders as the drivers and some shared-power arrangements.

As Kouzes & Posner point out, enabling others to act will foster collaboration and strengthen others.[83] This relates to the concept of "giving the work back." When the community, various

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[76] Heifetz, Ronald and Linsky, Marty (2002). *Leadership on the Line: Staying Alive through the Dangers of Leading*. Harvard Business School Press. Pg. 53

[77] Ibid, Pg. 75

[78] Ibid, Pg. 102

[79] Ibid, Pg. 124

[80] Ibid, Pg. 123

[81] Ibid, Pg. 145

[82] Ibid, Pg. 14.

[83] Kouzes, James M. and Posner, Barry, Z., *The Leadership Challenge*, (San Francisco: Jossey-Bass, 2007), 220.

agencies, the family, and youth themselves feel empowered to act within the processes and established guidelines of Ramsey County, the initiative will be able to move forward with all stakeholders engaged and involved.

Strategic Planning, Implementation and Management

Just creating a strategic plan is not enough though. The changes indicated by the adopted strategies must be incorporated throughout the system for them to be brought to life. Thinking strategically about implementation and developing an effective implementation plan are important tasks on the road to realizing the identified strategies.[84] Action plans should detail the following:

- Expected results and specific objectives, requirements, and milestones;
- Specific action steps and relevant details;
- Implementation roles and responsibilities;
- Resource requirements and sources;
- Communication process;
- Accountability procedures;
- Schedules; and
- Review, monitoring, and mid-course correction procedures to build in the capacity for ongoing learning.[85]

Action plans are statements about how to implement strategies in the short term. Without action planning, intended strategies are likely to remain ideas, not reality, and these intentions will be overwhelmed by already-implemented and emerging strategies.[86] An action plan is a sequence of steps that must be taken, or activities that must be performed well, for a strategy to succeed. An action plan has three major elements: 1) specific tasks: what will be done and by whom; 2) time horizon: when will it be done; and 3) resource allocation: what specific funds are available for specific activities (BusinessDictionary.com).

Preparing an agenda for an action planning process is very different from planning an agenda for a strategic planning process. In a strategic planning process it is important to take people through a strategic thinking exercise which helps them focus on the big picture. In an action planning process the focus is on details, making sure things happen as they are supposed to and how they are supposed to.[87] Action planning is the process that guides the day-to-day activities of an organization or project. It is the process of operationalizing your strategic objectives.[88] Usually, it is possible to do action planning without an external facilitator, as long as one can prevent the following: planning to do too much in too short a time; not planning activities in enough detail;

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[84] Bryson, J. (2011). *Strategic planning for public and nonprofit organizations*. San Francisco: Jossey-Bass. Pg. 64

[85] Ibid, Pg. 65

[86] Ibid, Pg. 301

[87] Shapiro, J. (2007). *Action Planning Toolkit* . Newtown, Johannesburg.: CIVICUS: World. Pg. 13

[88] Shapiro, J. (2007). *Action Planning Toolkit* . Newtown, Johannesburg.: CIVICUS: World. Pg. 4

not working out timelines to assure that sequencing and scheduling makes sense; not making it clear who has responsibility and authority for making sure that all the steps get done; and not thinking through the resourcing implications rigorously.[89]

Action Planning through the Skilled Facilitator Approach

The "skilled facilitator approach" is a specific facilitation system developed by Roger Schwarz that establishes criteria for effective groups from the experience of participants, explicitly stated core values, establishes ground rules for effective groups, and uses the "diagnostic-intervention cycle" to intervene to help the group increase its effectiveness.[90] The first three features of this approach – the group effectiveness model, explicit core values, and ground rules for effective groups – are all tools for diagnosing behavior in groups. However it is still necessary to find a way to implement these tools. Specifically, it is necessary to know when to intervene, what kind of intervention to make, how to say it, when to say it, and to whom. To put these tools into practice, this approach uses a six-step diagnosis-intervention cycle.[91]

Figure 12. The Skilled Facilitator Approach – The Group Effectiveness Model

[89] Ibid, Pg. 9

[90] Schwarz, R. (2002). *The Skilled Facilitator: A Comprehensive Resource for Consultants,Facilitators,Managers, Trainers, and Coaches*. Jossey-Bass Publishers. Pg. 34

[91] Ibid, Pg. 28

Figure 2.1 The Group Effectiveness Model

Source: Adapted from Hackman (1987) and Sundstrom, De Meuse, and Futrell (1990).

Given that action planning occurs during the implementation stage of strategic planning, the diagnosis-intervention cycle process is a particularly relevant feature of the Skilled Facilitator Approach. The six-step process involves: observing behavior; inferring meaning; deciding whether, how, and why to intervene; describing behavior, and testing for different views; sharing your inference, and testing for different views; and helping the group decide whether to change its behavior, and testing for different views.[92] This approach emphasizes using low-level inferences throughout rather than high-level inferences. As a result, facilitators diagnose and intervene in groups by making minimal inferential leaps, rather than drawing a conclusion further removed from the data. Schwarz believes that using low-level inferences can increase the accuracy of a diagnosis and can also increase the ability to share thoughts with others while reducing the defensive reactions of others, therefore increasing the group's effectiveness.[93]

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[92] Schwarz, R. (2002). *The Skilled Facilitator: A Comprehensive Resource for Consultants,Facilitators,Managers, Trainers, and Coaches*. Jossey-Bass Publishers. Pg. 28

[93] Schwarz, R. (2002). *The Skilled Facilitator: A Comprehensive Resource for Consultants,Facilitators,Managers, Trainers, and Coaches*. Jossey-Bass Publishers. Pg. 28

Figure 13. The Skilled Facilitator Approach – The Diagnosis-Intervention Cycle

Figure 6.1 The Diagnosis-Intervention Cycle with Diagnostic Frames
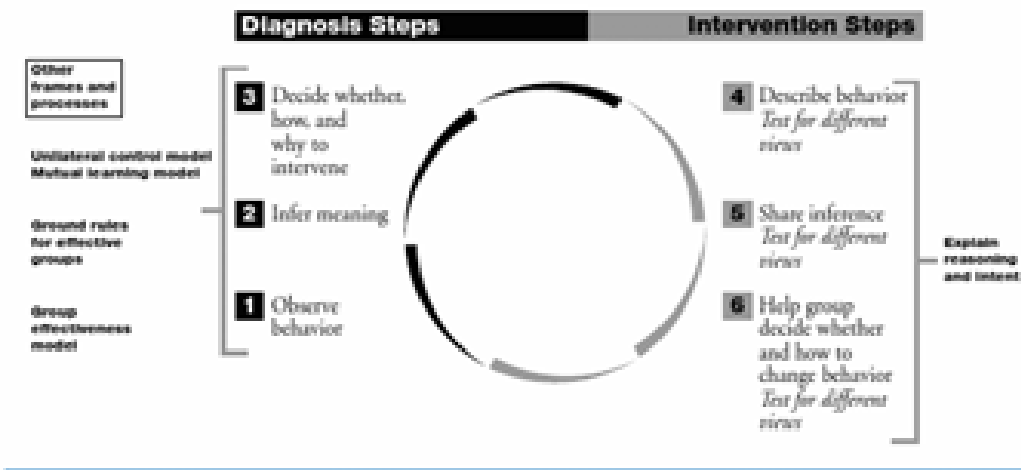
Evaluated in terms of how it promotes strategic thinking, acting, and learning, the usefulness of the Skilled Facilitator Approach in developing an action plan is derived from how the elements of the approach come together. The model for group effectiveness is not just descriptive of a typical organization, but normative, that is it describes what an effective group should look like. It recognizes that all participants act from a set of core values and argues that the process is more effective when the values are explicit and focus on mutual learning and action rather than an attempt to exert unilateral control. It makes use of ground rules such as a teaching tool for developing effective group norms. Finally, it uses the diagnosis-intervention cycle as a way of highlighting issues, while allowing groups to go through a process of genuine learning and change by ensuring that group members make a free choice to accept or reject the facilitator's interventions.

Action Planning through the Art of Hosting

The *Art of Hosting & Harvesting Conversations that Matter* (Lundquist et. al.) is an approach to facilitation that unites a set of engagement techniques and several practical frameworks through a four-fold practice. The four fold practice consists of: personal practice, be present and go into difficult conversations in a grounded way; dialogue, participate in conversations with a sense of curiosity by listening deeply; facilitation, host others in conversations by the calling the question, inviting others, creating the container for authentic engagement, and sense making; and co-creation, be part of a community of practice that co-creates while learning together.[94]

On its face, the Art of Hosting looks like a range of engagement techniques, including Peer Circle Process, World Café, Open Space Technology, ProAction Café, and Collective Story Harvesting

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[94] Cultivating Change in the Academy: Practicing the Art of Hosting Conversations That Matter within the University of Minnesota. Lundquist, L. Sandfort, J. Lopez, C. Odor, M. Seashore, K. Mein, J. Lowe, M. August, 2013. Pg. 17-18

& Reflective Listening. More fundamentally, it is based on the assumption that basic human wisdom can be tapped into more effectively. The use of practical frames emphasizes the importance of "harvesting" information, insights, and decisions, and the natural "divergence and convergence" that occurs among people.[95] The process can operate without formal leaders and promotes "an understanding of how order arises out of chaos within complex social systems."[96]

Evaluated in terms of its ability to promote strategic thinking, acting, and learning, ProAction Café is particularly useful in developing an action plan. ProAction Café is a method for creative and action-oriented conversations where participants are invited to bring their project or ideas which they need help to develop. It is a blend of World Café and Open Space technologies. World Café is a method for creating a living network of collaborative dialogue around questions through a series of rotating table conversations. Open Space is a meeting process in which the agenda is created by the participants. Those who have a passion and commitment call sessions to explore questions or issues with others. They become the hosts of their sessions and the other participants decide where they will participate.

ProAction Café, just as the name implies, moves the participants toward action rather than just brainstorming. It becomes brainstorming with more of a purpose by asking three questions: what is the "quest" behind the question; what is missing from the already identified plans; and what help is required to complete these plans. Each part of the discussion involves shifting to another small discussion group, which allows people from different parts of an organization or a community to communicate with each other about what should take place. It moves away from the expert facilitation model into the concept that the solution exists within the group that will be tackling the problem, and is based on the assumption that people are more likely to support a solution that they were a part of creating.

[95] Cultivating Change in the Academy: Practicing the Art of Hosting Conversations That Matter within the University of Minnesota. Lundquist, L. Sandfort, J. Lopez, C. Odor, M. Seashore, K. Mein, J. Lowe, M. August, 2013. Pg. 17
[96] Cultivating Change in the Academy: Practicing the Art of Hosting Conversations That Matter within the University of Minnesota. Lundquist, L. Sandfort, J. Lopez, C. Odor, M. Seashore, K. Mein, J. Lowe, M. August, 2013. Pg. 17

Figure 14. Comparison of The Art of Hosting and The Skilled Facilitator Approaches.

FACILITATION APPROACH	What is useful?	Which technique should be used?	When should this technique be used?
The Art of Hosting Approach	This approach creates the broadest possible participation and buy-in by requiring everyone to participate in the planning co-creation.	ProAction Café, which is a method for creative and action-oriented conversation that moves the participants toward action rather than just brainstorming; perfect for action planning.	When a group that is willing and capable of co-creating while learning and it is ready to start applying actions to ideas.
The Skilled Facilitator Approach	This approach has a consistent facilitator role throughout, which helps to build in practices for effectiveness from the start that can be useful at the end.	This approach uses the diagnosis-intervention cycle for implementation and action planning is an implementation tool.	When a new, complex, or divisive situation exists that requires a consistent, trained facilitator in order to lead the group through effective planning.

x.   Summary of Conclusions

Key Findings

In March 2014, Ramsey County unveiled an 11-point strategic plan aimed at boosting economic prosperity throughout the county. One of those initiatives calls for improving the continuum of services available to Ramsey County's youth and their families.[97] The initiative follows a report commissioned by the Ramsey County Community Corrections Department to assist in the creation of its 10 year plan for the delivery of juvenile services.[98] Prepared by Huskey & Associates,[99] the report recommended establishing an expanded continuum of services. The report concluded that the services currently available for youth focused on the extreme ends of the programmatic spectrum (prevention or detention) and offered few other service interventions.

From the Huskey & Associates report, the Capstone Project Consultants report focuses on one set of recommendations for establishment of "wraparound" services for youth engaged in more than one service delivery system (e.g. corrections, protective services, children's mental health, chemical dependency system). Research conducted by Huskey & Associates found that 68 percent of youth housed at Boys Totem Town (BTT) met the criteria for services provided through a wraparound approach.[100] BTT is a residential program for adolescent boys who have been adjudicated delinquent by the Juvenile Court and is a part of Community Corrections. It is important to explore the wraparound approach for alternative interventions given the finding by Latessa et al (2004) that low and moderate risk youth have higher recidivism rates when they are placed in "self-contained correctional environments or in intensive electronic monitoring without services," indicating less restrictive options should be considered.[101]

Ramsey County identified in its 11-point strategic plan it will begin research, system design and implement efforts for an improved continuum of services in 2014.[102] To provide a starting point, the Capstone Project Consultants conducted research into the process of creating wraparound service programs for youth to identify critical information and key lessons learned. Several research methods were used to collect information for this report. A stakeholder analysis was conducted to identify the individuals or groups that are likely to affect or be affected by implementation of a wraparound in order to assess how the interests of those stakeholders should be addressed in the process. A "racial equity impact assessment" was used to examine how different racial and ethnic groups have been or will be affected by actions and decisions. A literature review focused on the current knowledge related to implementation of wraparound programs. An environmental scan and comparative program review was conducted to identify events and trends important to implementation of a wraparound program.

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[97] Cultivating Economic Prosperity and Eliminating Concentrated Poverty, Ramsey County (March 20, 2014). Pg. 5
[98] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013).
[99] Huskey & Associates are juvenile justice and criminal justice consultants based in Chicago, IL.
[100] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013).
[101] Ibid
[102] Cultivating Economic Prosperity and Eliminating Concentrated Poverty, Ramsey County (March 20, 2014). Pg. 5

The stakeholder analysis identified a strong interest based on a number of perceived benefits (e.g. reduced costs, increased services, reduced recidivism, etc.) among key stakeholders such as the six departments identified as the key organizational leads in the 11-point strategic plan. It also highlighted the need to engage in a substantial way with secondary stakeholders, such as community groups and nonprofit service providers. Most importantly, it emphasized the need to understand youth and their families as the primary stakeholders and involve them in significant ways.

An important dimension of the stakeholder analysis involves recognizing racial disparities within youth services. Each day, about one in five Ramsey County residents are served by Community Human Services. Although people of color were 30 percent of residents in 2007, at least 53 percent of service recipients were people of color.[103] Black youth represent 14 percent of the Ramsey County youth population, but were 45 percent of children in out of home placement in 2008 and more than one-half of the juvenile arrests during 2006-2010.[104] Since 2003, CHS has used the Minnesota Collaborative Anti-Racism Initiative as a guide for "establishing a common conceptual foundation and language around systemic power and race."[105] A racial equity impact assessment approach could prove useful in evaluating proposed policies and procedures as implementation of a wraparound process moves forward.

The literature review provides some basic definitions and evidence as well as the three important initial steps of wraparound implementation: adopting a set of core principles for the wraparound approach; assessing and establishing readiness on several levels; and planning carefully for the six essential components of a wraparound process. In 2007, 91 percent of U.S. states had some type of wraparound initiative and 62 percent implemented some type of initiative statewide.[106] There are, therefore, are many examples available to include in an environmental scan and comparative program review. The consultants conducted research into four other communities suggested by Ramsey County staff that have created wraparound service programs for youth in Milwaukee (WI), King County (WA), Jefferson County (CO), and the State of Oregon. Although not originally intended, these communities offered an interesting variety of programs for comparison: a city program, a city-driven county program, a large county program, and a statewide program.

There are numerous lessons to be learned from the experience of other communities. However, both in spite of these lessons and because of them, the primary challenge the Capstone Project Consultants see lying before Ramsey County is one of leadership. There are many technical challenges that will require the application of authoritative expertise in establishing a wraparound model and a new service continuum. However, adopting a new service delivery model and

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[103] The Ramsey County Community Human Services Anti-Racism Initiative (9-23-09). Pg. 2, 5 and 7

[104] Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates (January 29, 2013). Pg. 1.32

[105] LOOKING BACK, MOVING FORWARD: Anti-Racism Initiative Narrative Timeline (Ramsey County Community Health Services, ARLT Communication Workgroup, 12/2010). Pg. 3

[106] Bruns, E. J., & Suter, J. C. (2010). Summary of the wraparound evidence base. In E. J. Bruns & J. S. Walker (Eds.), *The resource guide to wraparound.* Portland, OR: National Wraparound Initiative. http://www.nwi.pdx.edu/NWI-book/Chapters/Bruns-3.5-(evidence-base).pdf

integrating a range of departments into will require a deeper and more profound change that leadership scholar Ron Heifetz defines as "adaptive leadership." In addition, the change process will require detailed and comprehensive planning activities, but creating a strategic plan will not be enough. The indicated strategies must be incorporated throughout the system for them to be brought to life. This requires thinking just as strategically about implementing and managing the process of change. This report suggests ways of approaching this profound leadership challenge and developing a shared commitment for moving forward.

Recommendations

As a result of this research, the Capstone Project Consultants are offering the following recommendations for effectively implementing a wraparound model for Ramsey County youth and their families:

a) Engage with the community at large, including youth, families, community organizations and nonprofit service providers, as well as other key stakeholders.

b) Create a core wraparound implementation task force made up of county departments, community leadership, youth, and families to span the boundaries between groups.

c) Adopt core principles for the wraparound approach, connect with the National Wraparound Initiative for guidance.

d) Assess and establish readiness for implementation on the implementation team, program and system levels, remembering that strategic planning is not effective without also using strategic management.

e) Research funding options from foundation and government grants through Medicaid.

f) Plan carefully for each of the essential components involved in implementation, accept that this is an adaptive challenge and needs more than a technical solution.

g) Adopt and implement a "racial equity impact assessment" system for evaluating possible actions and decisions.

h) Remember that the work is for and about the families you serve.

XI.   Key Links

Websites with Extensive Information about Wraparound:

www.nwi.pdx.edu

The website of the National Wraparound Initiative, including dozens of articles and resources as well as a members' page that allows networking and blogging among a national community of practice.

www.paperboat.com

Provides articles and presentations by nationally renowned trainers and wraparound experts including John Franz, Patricia Miles, Neil Brown, and others.

www.wraparoundsolutions.com

The website of Mary Grealish's Community Partners, Inc., includes many documents including family and youth guides to wraparound and an interactive page that explains key points in implementing the wraparound process.

XII. Bibliography

Bardach, Eugene (2011). *A Practical Guide for Policy Analysis: the Eightfold Path to More Effective Problem Solving*, 4th edition. CQ Press: Washington, DC.

Bernstein, Adam, Bruns, Eric J., Chorpita, Bruce F., Walker, Eric, Pullmann, Michael D. & Walker, Janet S., (2014) Family Voice With Informed Choice: Coordinating Wraparound With Research-Based Treatment for Children and Adolescents, Journal of Clinical Child & Adolescent Psychology, 43:2, 256-269, DOI:10.1080/15374416.2013.859081

Bolman, Lee and Deal, Terrance (2008). *"Introduction: The Power of Reframing," and "Simple Ideas, Complex Organizations," Reframing Organizations: Artistry, Choice, and Leadership*. 4th edition, Jossey Bass.

Bontrager Ryon, S., Winokur Early, K., Hand, G., & Chapman, S. (2013). Juvenile Justice Interventions: System Escalation and Effective Alternatives to Residential Placement. *Journal Of Offender Rehabilitation*, *52*(5), 358-375. Retrieved July 10, 2014, from http://www.tandfonline.com/doi/pdf/10.1080/10509674.2013.801385

Brown, E. (2007). '*It's Urban Living, Not Ethnicity Itself': Race, Crime and the Urban Geography of High-Risk Youth*. Geography Compass, *1*(2), 222-245. Retrieved July 10, 2014, from http://onlinelibrary.wiley.com.ezp3.lib.umn.edu/doi/10.1111/j.1749-8198.2007.00013.x/full

Bruns, E.J., Walker, J.S., Adams, J., Miles, P., Osher, T.W., Rast, J., VanDenBerg, J.D. & National Wraparound Initiative Advisory Group (2004). *Ten principles of the wraparound process.* Portland, OR: National Wraparound Initiative, Research and Training Center on Family Support and Children's Mental Health, Portland State University. Retrieved July 3, 2014, from http://www.nwi.pdx.edu/pdf/TenPrincWAProcess.pdf

Bruns, E. J., & Suter, J. C. (2010). Summary of the wraparound evidence base. In E. J. Bruns & J. S. Walker (Eds.), *The resource guide to wraparound.* Portland, OR: National Wraparound Initiative. Retrieved July 3, 2014, from http://www.nwi.pdx.edu/NWI-book/Chapters/Bruns-3.5-(evidence-base).pdf

Bruns, E. J. & Walker, J. S. (2010). *The wraparound process: An overview of implementation essentials*. In E. J. Bruns & J. S. Walker (Eds.), *The resource guide to wraparound.* Portland, OR: National Wraparound Initiative. Retrieved on July 8, 2014, from http://www.nwi.pdx.edu/NWI-book/Chapters/Bruns-5a.2 (implementation-essentials).pdf

Bryson, John and Crosby, Barbara (2005). *Leadership for the Common Good: Tackling Public Problems in a Shared-Power World*. 2nd edition. Jossey Bass.

Bryson, John M., *What To Do When Stakeholders Matter: Stakeholder Identification and Analysis Techniques*. Vol. 6 Issue 1 2004 21-53 Public Management Review ISSN 1471-9037 prinViSSN 1471-9045 online

Bryson, John M. (2011). *Strategic planning for public and nonprofit organizations*. San Francisco: Jossey-Bass.

Carney, Michelle M. "*Reducing Juvenile Recidivism: Evaluating the Wraparound Services Model*." Research on social work practice 13.5 (2003):551-568. Retrieved July 7, 2014, from http://rsw.sagepub.com.ezp1.lib.umn.edu/content/13/5/551.full.pdf+html

Cost-Effective Youth Corrections: Rationalizing the Fiscal Architecture of Juvenile Justice Systems, Justice Policy Institute. Retrieved June 30, 2014, from http://www.justicepolicy.org/uploads/justicepolicy/documents/06-03_rep_costeffective_jj.pdf

Cultivating Change in the Academy: Practicing the Art of Hosting Conversations That Matter Within the University of Minnesota. Lundquist, L. Sandfort, J. Lopez, C. Odor, M. Seashore, K. Mein, J. Lowe, M. August, 2013.

Cultivating Economic Prosperity and Eliminating Concentrated Poverty, Ramsey County (March 20, 2014).

Eber, L. (2005). Wraparound. In M. Hersen, J. Rosqvist, A. Gross, R. Drabman, G. Sugai, & R. Horner (Eds.), *Encyclopedia of behavior modification and cognitive behavior therapy: Volume 1: Adult clinical applications volume 2: Child clinical applications volume 3: Educational applications.* (Vol. 3, pp. 1601-1607). Thousand Oaks, CA: SAGE Publications, Inc. doi: Retrieved July 6, 2014, from http://dx.doi.org.ezp3.lib.umn.edu/10.4135/9781412950534.n3147

Goldman, S.K. (1999). The Conceptual Framework for Wraparound. In Burns, B. J. & Goldman, K. (Eds.), *Systems of care: Promising practices in children's mental health, 1998 series, Vol. IV: Promising practices in wraparound for children with severe emotional disorders and their families.* Washington DC: Center for Effective Collaboration and Practice.

Heifetz, Ronald and Linsky, Marty (2002). *Leadership on the Line: Staying Alive through the Dangers of Leading*. Harvard Business School Press.

Hails, S. (2008). *A Guide to Participatory Action Planning and Techniques for Facilitating Group*s. Gland, Switzerland: Ramsar.

Holsinger, Alex M. "*An empirical evaluation of a sanction continuum: Pathways through the juvenile justice system*." Journal of criminal justice 27.2 (1999):155-172. Retrieved July 6, 2014 from http://www.sciencedirect.com.ezp2.lib.umn.edu/science/article/pii/S0047235298000543

Kouzes, James and Posner, Barry (2007). *The Leadership Challenge*, 4th edition. John Wiley & Sons.

Jefferson County Juvenile Diversion, Juvenile Assessment Center (JAC), 2013. Retrieved June 30, 2014, from http://jeffco.us/district-attorney/diversion-services/juvenile-diversion/

Jermaine Toney, Using a Racial Equity Impact Analysis in the Minneapolis Public Schools, Clearinghouse REVIEW Journal of Poverty Law and Policy, September-October 2013.

LOOKING BACK, MOVING FORWARD: Anti-Racism Initiative Narrative Timeline (Ramsey County Community Health Services, ARLT Communication Workgroup, 12/2010).

Marshall, Jane M. "*Understanding racial disproportionality affecting African American Youth who cross over from the child welfare to the juvenile justice system: Communication, power, race and social class*." Children and youth services review 42(2014):82-90. Retrieved July 3, 2014, from http://www.sciencedirect.com.ezp2.lib.umn.edu/science/article/pii/S0190740914001169#

Mendenhall, Amy N, et al. "*Theory Meets Practice: The Localization of Wraparound Services for Youth with Serious Emotional Disturbance*." Community mental health journal 49.6 (2013):793-804.

Mental Health and Substance Use Disorders: *Reform Trends. Juvenile Justice Information Exchange*. Retrieved July 3, 2014, from http://jjie.org/hub/mental-health-and-substance-abuse/reform-trends/

Miles, P., Brown, N., & The National Wraparound Initiative Implementation Work Group. (2011). *The Wraparound Implementation Guide: A Handbook For Administrators And Managers. Portland, OR: National Wraparound Initiative.* Retrieved July 1, 2014, from http://www.nwi.pdx.edu/pdf/ImplementationGuide-Complete.pdf

Minnesota Department of Human Services. 2011 C&TC Provider Guide. Chris Koyangagi, Policy Director of the Bazelon Center, September 2, 2005. Retrieved July 7, 2014, from http://ww.bazelon.org/issues/Koyanagi_declaration.htm. www.medicaid.gov/Medicaid CHIP-Program-

Morrison, J. (2005). *Service coordination: Practical concerns for community practitioners*. In M. Weil, M. Reisch, D. Gamble, L. Gutiérrez, E. Mulroy, & R. Cnaan (Eds.), *The handbook of community practice.* (pp. 387-402). Thousand Oaks, CA: SAGE Publications, Inc. Retrieved July 1, 2014, from http://dx.doi.org.ezp3.lib.umn.edu/10.4135/9781452220819.n21

Oregon Children's Wraparound Initiative. Retrieved July 1, 2014, from http://library.state.or.us/repository/2009/200902201314285/DHS_mentalhealth_wraparound_news-glance_080307.pdf

Race Forward: The Center for Racial Justice Innovation. Retrieved July 10, 2014, from
   https://www.raceforward.org/

Ramsey County, MN Juvenile Justice Redesign Final Report, Huskey & Associates
   (January 29, 2013).

Schwarz, R. (2002). *The Skilled Facilitator: A Comprehensive Resource for Consultants,
   Facilitators, Managers, Trainers, and Coaches*. Jossey-Bass Publishers.

Shapiro, J. (2007). *Action Planning Toolkit* . Newtown, Johannesburg.: CIVICUS: World

Statewide Children's Wraparound Initiative - System of Care/Wraparound. Retrieved July 6,
   2014, from http://www.oregon.gov/oha/amh/pages/wraparound/main.aspx

Statewide Children's Wraparound Initiative Next Steps (October 18, 2012). Retrieved July 6,
   2014, from http://www.oregon.gov/oha/amh/wraparound/docs/scwi-next-steps-executive
   summary-2012.pdf

Stretch, G., Harris, B. & Vetter, J. (2011). *Evaluation of the Care Management Oversight Project*.
   University of Oklahoma, College of Continuing Education, eteam. Retrieved July 1, 2014,
   from http://www.nwi.pdx.edu/pdf/Care-Management-Oversight-Report-Final.pdf

The Oregon Experience: A Collaborative System to Improve Coordinated Care for Children in
   Foster Care. Retrieved July 3, 2014, from
   http://www.oregon.gov/oha/amh/wraparound/docs/oregon-experience-collaboration-caf.pdf

The Ramsey County Community Human Services Anti-Racism Initiative (9-23-09). Retrieved
   July 1, 2014, from https://www.co.ramsey.mn.us/NR/rdonlyres/8A612DA6-3D77-499B
   B902-827887DA878D/34539/WHYRamseyCountyhasanAntiracismInitiative20091.pdf

Viljoen, J., & Mordell, S. (2008). *Mental health needs of juvenile offenders*. In B. Cutler (Ed.),
   Encyclopedia of psychology and law. (pp. 494-497). Thousand Oaks, CA: SAGE Publications,
   Inc. doi: Retrieved June 28, 2014, from
   http://dx.doi.org.ezp3.lib.umn.edu/10.4135/9781412959537.n191

Walker, J. S. (2008). *How, and Why, Does Wraparound Work: A Theory of Change*. Portland, OR:
   National Wraparound Initiative, Portland State University. Retrieved June 29, 2014, from
   http://www.nwi.pdx.edu/pdf/howandwhywraparound.pdf

Walker, J. S., & Bruns, E. J. (2008). *Phases and activities of the wraparound process: Building
   agreement about a practice model.* Portland, OR: National Wraparound Initiative, Research
   and Training Center on Family Support and Children's Mental Health, Portland State
   University. Retrieved June 29, 2014, from
   http://www.nwi.pdx.edu/pdf/PhaseActivWAProcess.pdf

What are wraparound services. (This module, which originally appeared as an article in Issue No.64, Summer 1998 of the Newsletter published by Protection & Advocacy, Inc. (PAI), is reprinted with permission of the publisher. Protection & Advocacy Inc., 100 Howe Ave., Suite 185-N, Sacramento, CA 95825-9968, (800) 776-5740. Retrieved June 28, 2014 from http://denverregion.co.networkofcare.org/aging/library/article.aspx?id=446&&textsize=small

Winters, N. & Metz, W. (2009). *The Wraparound Approach in Systems of Care.* Retrieved June 28, 2014, from http://www.oregon.gov/oha/amh/wraparound/docs/wraparound-approach-soc.pdf

Wraparound Program in Douglas County, Colorado. Retrieved June 28, 2014, from http://www.douglas.co.us/countyadmin/youth/wraparound-program/

Wraparound research update. Retrieved July 5, 2014, from http://www.nwi.pdx.edu/wraparoundresearch.shtml

Appendices

Questionnaire for Stakeholder Meetings

As we have started research into wraparound services, and specifically the national wraparound initiative, it is becoming apparent that the caseworker philosophy is dominant in this field and human services are a key player in that model. Based on our earlier conversation, we are looking at Denver, Seattle, Portland, and Milwaukee. We have started to research the structure of these programs and services provided, but before we dig deeper we wanted to get more information from you so we can make sure to include areas that are important to you.

1. Is the National Wraparound Initiative something you have considered in Ramsey County?

2. What do you see as the role of your department overall in a county-wide project to provide expanded services?
   Not just the 150 we discussed at our initial meeting, or as the program expands

3. Who do you partner with already to provide services - other agencies, nonprofits, etc?

4. From your perspective are there other communities we should be looking at?

5. What would success look like for you?

6. What is the biggest challenge for Ramsey County to implement wraparound services and expand the continuum of services?

7. Have there been any studies or analysis in recent years to evaluate successful programs provided by Human Services and where possible gaps may exist?

Questionnaire for Program Comparison

1. How and when did you start? Initial steps - did you already have continuum? Was continuum and wraparound implemented consecutively or simultaneously?

2. Who was champion, sponsor, lead, government departments/agencies, and external entities?

3. Costs
   a. start-up
   b. sustaining
   c. funding stream
   d. CBA

4. Who is your target population?

5. What has been documented or written about your project?
   a. peer review
   b. internal or external documents
   c. data
   d. what are you using to evaluate the programs
   e. who is the keeper of the data

6. What were driving and sustaining forces?

7. What services are offered in wraparound? How delivered and by whom?

8. What policy changes were required?

9. What roadblocks did you encounter?

10. What would you do differently?

11. What was your biggest success?

12. What was a surprise?

Summary of Nine Published Experimental and Quasi-Experimental Outcomes Research Studies of Wraparound

Table 1. Summary of Nine Published Experimental and Quasi-Experimental Outcomes Research Studies of Wraparound**

Study	Citations	Outcomes
Child Welfare		
Randomized control study (18 months) of youth in child welfare custody in Florida: 54 in wraparound vs. 78 in standard practice foster care.	Clark, Lee, Prange, & McDonald, 1996; Clark et al., 1998.	Significantly fewer placement changes for youths in the wraparound program, fewer days on runaway, fewer days incarcerated (for subset of incarcerated youths), and older youths were significantly more likely to be in a permanency plan at follow-up. No group differences were found on rate of placement changes, days absent, or days suspended. No differences on internalizing problems, but boys in wraparound showed significantly greater improvement on externalizing problems than the comparison group. Taken together, the findings provided moderate evidence for better outcomes for the wraparound program; however, differences appear somewhat limited to boys and externalizing problems.
Matched comparison study (18 months) of youth in child welfare custody in Nevada: 33 in wraparound vs. 32 receiving MH services as usual	Bruns, Rast, Walker, Bosworth, & Peterson, 2006; Rast, Bruns, Brown, Peterson, & Mears, 2007	After 18 months, 27 of the 33 youth (approximately 82%) who received wraparound moved to less restrictive environments, compared to only 12 of the 32 comparison group youth (approximately 38%), and family members were identified to provide care for 11 of the 33 youth in the wraparound group compared to only six in the comparison group. Mean CAFAS scores for youth in wraparound decreased significantly across all waves of data collection (6, 12, 18 months) in comparison to the traditional services group. More positive outcomes were also found for the wraparound cohort on school attendance, school disciplinary actions, and grade point averages. No significant differences were found in favor of the comparison group.
Matched comparison study (12 months) of N=210 youth in child welfare custody in Los Angeles County: 43 discharged from Wraparound vs. 177 discharged from group care.	Rauso, Ly, Lee, & Jarosz, 2009	Initial analyses for a larger matched sample of youth (n=102 wraparound vs. n=210 for group care) found that 58% (n=59) of youth discharged from wraparound had their case closed to child welfare within 12 months, compared to only 16% (n=33) of youth discharged from group care. Of those youth who remained in the care of child welfare for the full 12 months follow-up period (n=43 for wraparound vs. n=177 for group care), youth in the wraparound group experienced significantly fewer out of home placements (mean = 0.91 compared to 2.15 for the comparison group). Youth in the wraparound group also had significantly fewer total mean days in out of home placements (193 days compared to 290). During the 12-months follow-up, 77% of the Wraparound graduates were placed in less restrictive settings while 70% of children who were discharged from RCL 12-14 were placed in more restrictive environments. Mean post-graduation cost for the wraparound group was found to be $10,737 compared to $27,383 for the group care group.

Table 1. (CONTINUED) Summary of Nine Published Experimental and Quasi-Experimental Outcomes Research Studies of Wraparound**

Study	Citations	Outcomes
Child Welfare		
Matched comparison study (6 months) of N=126 youths involved in the child welfare system in Clark County, NV: 96 in wraparound vs. 30 in traditional child welfare case management.	Mears, Yaffe, & Harris, 2009	Youth in the wraparound group approach showed significantly greater improvement in functioning (d=.50) as assessed by the Child and Adolescent Functional Assessment Scale (CAFAS) compared to youth receiving traditional child welfare services. Youth in the wraparound group also showed significantly greater movement toward less restrictive residential placements (d=.71) as assessed by the Restrictiveness of Living Environment Scale (ROLES). More wraparound youth experienced a placement change during the 6 month follow up (23% vs. 49%); however, this was due to youth in the wraparound group being more likely to move to less restrictive placements during the study period. No differences were found for child behavior as assessed by the CBCL, school, or juvenile justice outcomes.
Juvenile Justice		
Randomized control study (18 months) of "at risk" and juvenile justice involved (adjudicated) youth in Ohio: 73 in wraparound vs. 68 in conventional services	Carney & Buttell, 2003	Study supported the hypothesis that youth who received wraparound services were less likely to engage in subsequent at-risk and delinquent behavior. The youth who received wraparound services were less likely to miss school unexcused, get expelled or suspended from school, run away from home, or get picked up by the police as frequently as the youth who received the juvenile court conventional services. There were, however, no significant differences, in formal criminal offenses.
Matched comparison study (>2 years) of youth involved in juvenile justice and receiving MH services: 110 youth in wraparound vs. 98 in conventional MH services	Pullmann, Kerbs, Koroloff, Veach-White, Gaylor, & Sieler, 2006	Youths in the comparison group were three times more likely to commit a felony offense than youths in the wraparound group. Among youth in the wraparound program, 72% served detention "at some point in the 790 day post identification window" (p. 388), while all youth in the comparison group were subsequently served in detention. Of youth in the Connections program who did serve detention, they did so significantly less often than their peers. Connections youth also took three times longer to recidivate than those in the comparison group. According to the authors, a previous study by Pullman and colleagues also showed "significant improvement on standardized measures of behavioral and emotional problems, increases in behavioral and emotional strengths, and improved functioning at home at school, and in the community" (p. 388) among Connections youth.
Mental Health		
Randomized control study (12 months) of youths referred to out-of-home placements for serious mental health problems in New York State: 27 to family centered intensive case management (wraparound) vs. 15 to treatment foster care.	Evans, Armstrong, & Kuppinger, 1996; Evans, Armstrong, Kuppinger, Huz, & McNulty, 1998	Significant group differences were found in favor of the case management/wraparound program for behavioral and mood functioning. No differences were found, however, with respect to behavior problems (internalizing and externalizing), family cohesiveness, or self-esteem. No differences found in favor of the TFC group. Overall, small sample size plus loss of data on many of the outcome measures resulted in the study having very low power to detect differences between groups.

Table 1. (CONTINUED) Summary of Nine Published Experimental and Quasi-Experimental Outcomes Research Studies of Wraparound**

Study	Citations	Outcomes
Mental Health		
Quasi-experimental (24 months) study of youths with serious mental health issues in urban Baltimore: 45 returned or diverted from residential care to wraparound vs. 24 comparison youths.	Hyde, Burchard, & Woodworth, 1996	Primary outcome was a single rating that combined several indicators: restrictiveness of youth living situation, school attendance, job/job training attendance, and serious problem behaviors. Youths received ratings of "good" if they were living in regular community placements, attending school and/or working for the majority of the week, and had fewer than three days of serious behavior problems during the course of previous month. At 2-year follow-up, 47% of the wraparound groups received a rating of "good," compared to 8% of youths in traditional MH services. Limitations of the study include substantial study attrition and group non-equivalence at baseline.
Experimental (multiple-baseline case study) study of four youths referred to wraparound because of serious mental health issues in rural Michigan.	Myaard, Crawford, Jackson, & Alessi (2000).	The multiple baseline case study design was used to evaluate the impact of wraparound by assessing whether outcome change occurred with (and only with) the introduction of wraparound at different points in time. The authors tracked occurrence of five behaviors (compliance, peer interactions, physical aggression, alcohol and drug use, and extreme verbal abuse) for each of the youths. Participants began receiving wraparound after 12, 15, 19, and 22 weeks. For all four participants, on all five behaviors, dramatic improvements occurred immediately following the introduction of wraparound.

Summary of All Behavioral Outcomes for the Wraparound Process with Supporting Citations from Eight Controlled Studies

Table 2. Summary of All Behavioral Outcomes for the Wraparound Process with Supporting Citations from Eight Controlled Studies

Section 1: Statistically Significant (p<.05) Behavioral Outcomes		
Outcome	Effect Size	Citation
Less assaultive	0.30	Carney & Buttell, 2003, p. 561
Ran away less	0.45	Carney & Buttell, 2003, p. 561
Suspended from school less	0.47	Carney & Buttell, 2003, p. 561
Missed less school	0.47	Carney & Buttell, 2003, p. 561
Less likely to be picked up by police	0.49	Carney & Buttell, 2003, p. 561
Less likely to be suspended from school	0.22	Clark et al., 1998, p. 529
Less likely to spend more time incarcerated	0.31	Clark et al., 1998, p. 529
Fewer days on runaway	0.34	Clark et al., 1998, p. 528
Residing in more permanency-type settings	0.17	Clark et al., 1998, p. 526
Less likely to spend time on runaway	0.22	Clark et al., 1998, p. 529
Less likely to experience a high number of placement changes	0.25	Clark et al., 1998, p. 529
Improved behavioral functioning on CAFAS	0.61	Evans et al., 1998, p. 566
Improved moods / emotions on CAFAS	0.61	Evans et al., 1998, p. 566
Improved overall functioning on CAFAS	0.50	Mears et al., 2009, p. 682
Residing in less restrictive placements	0.71	Mears et al., 2009, p. 682
Reduced recidivism for any offense	0.25	Pullman et al., 2006, p. 386
Reduced recidivism for felony	0.26	Pullman et al., 2006, p. 388
Fewer days served in detention	0.66	Pullman et al., 2006, p. 388
Fewer episodes in detention	0.75	Pullman et al., 2006, p. 388
Less likely to serve in detention	0.85	Pullman et al., 2006, p. 388

Table 2. (CONTINUED) Summary of All Behavioral Outcomes for the Wraparound Process with Supporting Citations from Eight Controlled Studies

Section 1: Statistically Significant (p<.05) Behavioral Outcomes		
Outcome	Effect Size	Citation
Improved school GPA	0.69	Rast et al., 2007, p. 22
Improved overall functioning on CAFAS	0.69	Rast et al., 2007, p. 20
Fewer disciplinary actions	0.95	Rast et al., 2007, p. 22
Moved to less restrictive living environments	1.09	Rast et al., 2007, p. 21
Fewer emotional and behavioral problems on CBCL	0.86	Rast et al., 2007, p. 19
Fewer out-of-home placements	0.84	Rauso et al., 2009, p. 65
More stable living environment	0.57	Rauso et al., 2009, p. 66-67
Residing in less restrictive placements	0.98	Rauso et al., 2009, p. 66
Section 2: Behavioral Outcomes That Were Not Statistically Significant, But with Positive Effect Sizes		
Outcome	Effect Size	Citation
Less likely to be arrested	0.23	Carney & Buttell, 2003, p. 561
Less likely to be in clinical range on CBCL or YSR	0.23	Clark et al., 1998, p. 532
Fewer unexcused absences	0.50	Rast et al., 2007, p. 22
Combined rating indicating lower restrictiveness of placement, improved school attendance, and fewer negative behaviors.	0.68	Hyde et al., 1996, p. 78

Self-Assessment of Strengths and Needs

Appendix A:
Self-Assessment Of Strengths And Needs

Community Groundwork for Wraparound Implementation:
A Self-Assessment of Strengths and Needs

Theme 1: Community partnership	Is this happening?
An initial group of stakeholders has come together and made a firm commitment to moving forward with wraparound implementation	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
This group currently includes, or is actively reaching out to...	
... family members and youth and/or young adults who are "system experienced" including any family or youth support/ advocacy organizations in the community	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT

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Theme 1, continued

… representatives of key funders and key child- and family-serving organizations	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
… agency and organization leaders who are able to commit resources and lead efforts to change policies	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
Theme total (sum of four items):	

Theme 2: Collaborative activity	Is this happening?
The people who are planning for wraparound implementation...	
... have a solid understanding of—and commitment to—wraparound principles and practice	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... are committed to making changes in their own organizations and in the larger system	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
...have reached a decision regarding who will be eligible for wraparound	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... are clear about the desired outcomes they hope to achieve	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
Theme total (sum of four items):	

Theme 3: Fiscal Policies and Sustainability	Is this happening?
The people who are planning wraparound implementation have a basic understanding of what will need to be funded and approximately how much it will cost to fund the following core wraparound needs:	
Key staff roles, including facilitators, family partners, youth partners, supervisors and administrators	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
Training, coaching and supervision for key staff roles	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
IT or data management systems to track utilization, administrative data, and wraparound plans, progress and outcomes	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
People who are planning wraparound implementation understand the basic models and options for achieving adequate, stable funding for the wraparound effort	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
Theme total (sum of four items):	

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Theme 4. Access to Needed Services and Supports	Is this happening?
The people who are planning for wraparound implementation...	
... have knowledge about the array of services that is typically needed for wraparound programs, including non-traditional services and supports, and are actively strategizing about how to fill gaps in the array	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... understand the role that informal and community supports play in wraparound, and are actively strategizing about how to increase community capacity to build and use such supports	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... understand the importance of peer support in wraparound, and are actively strategizing about how to ensure access to peer support	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... are actively strategizing about how to build community capacity to create completely individualized supports for youth, caregivers, and family members	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
Theme total (sum of four items):	

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Theme 5. Human Resource Development and Support	Is this happening?
The people who are planning for wraparound implementation...	
... have a realistic understanding of what it takes to provide adequate training and coaching for key roles (facilitators, family/youth partners, supervisors), and are actively strategizing about how to ensure this for the wraparound project.	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... have a realistic understanding of typical staffing plans (including caseload sizes) that allow people in key roles (facilitators, family/youth partners, supervisors) sufficient time to provide high quality wraparound, and are actively strategizing about how to ensure this for the wraparound project.	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... have a realistic understanding of the structures and processes that are needed to ensure that people in key roles offer high quality supervision, and are actively strategizing about how to ensure this for the wraparound project	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... understand the need to get service providers and community partners "on board" with wraparound, and are actively strategizing about how to do this	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
Theme total (sum of four items):	

Theme 6. Accountability	Is this happening?
The people who are planning for wraparound implementation...	
... are exploring options for assessing progress and success in overall implementation of the wrap-around project	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... are exploring options for measuring wrap-around quality and other process outcomes	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... are exploring options for measuring utilization, costs and expenditures	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
... are exploring options for measuring child/youth and family outcomes, including child/youth and family satisfaction and other outcomes that families and youth care about	☐ 1=NOT REALLY ☐ 2=SOME ☐ 3=QUITE A BIT
Theme total (sum of four items):	

Self-Assessment Tool for Leaders

Appendix B:
Self-Assessment Tools For Leaders

Self-Assessment Tools for the Leaders, Managers, and Planners of Efforts to Implement Wraparound

These self-assessments are designed to help wraparound leaders assess and plan for important aspects of the wraparound development process. Managers should answer these questions and use their answers to highlight strengths and challenges in their implementation. The six areas are the same six areas discussed in this *Guide*. These are also the six areas defined in the "Community Supports for Wraparound Inventory," a resource developed through the National Wraparound Initiative. There is a self-assessment for each of the six areas:

» *Community Partnership*

» *Collaborative Action*

» *Access to Needed Services and Supports*

» *Fiscal Policies and Sustainability*

» *Human Resource Development and Supports*

» *Accountability*

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The self-assessments are designed to help managers pinpoint the essential organizational and system supports they should develop to ensure quality wraparound practice at the family level. Completing the self-assessments will help these leaders, managers, and planners to:

» Assess whether they have worked on the right areas to support an effective initiative

» Gain a better sense of where to target improvement efforts and resources in the planning and implementation process

» Identify when they may need to gather additional information in order to keep their system development efforts on track

The self-assessments were designed so that "Yes" answers reflect areas of strength. "No" answers are seen as reflecting an opportunity for improvement and development. As a strategic leader, you should review your answers and identify where you want to invest energy. Focusing on positive answers may help you to strengthen certain areas before tackling the areas of greatest challenge. On the other hand, as a strategic leader you may find that some "No" answers require attention for you to move on. You can go through these questions one theme at a time or complete the entire set of self-assessments in one sitting. The purpose of the self-assessment process is to help you guide your community effort more effectively and strategically. The self-assessments are a starting point rather than an ending point or destination. You can use these tools multiple times, and you may find that your answers may differ from one rating period to the next. Wraparound evolves and changes along with community context, people ,and system development.

Community Partnerships

This area of the self-assessment focuses on three key aspects of community partnership related to the implementation of wraparound. These areas are:

» **Membership:** Are the right people participating from the right levels of the partner organizations?

» **Structure:** Is there a structure that supports and encourages effective partnerships that translate hope into action?

» **Process:** Are there processes in place that assist us in maintaining effective relationships, goals, and plans for our community service system?

Area	Questions to consider	Yes	No
Membership	Have you included a range of representatives from across the system?		
	» Families	☐	☐
	» System Partners	☐	☐
	» Community Representatives	☐	☐
	» Business leaders	☐	☐
	» Cultural Leaders	☐	☐
	Have you selected the right level of participation?		
	» Supervisors	☐	☐
	» Managers	☐	☐
	» Policy Makers	☐	☐
	» Others	☐	☐
	Have you considered who's missing?	☐	☐
	Have you planned for how to secure their involvement?	☐	☐

Area	Questions to consider	Yes	No
Structure	Have you designed a structure from which the community partnership can operate?	☐	☐
	» Is it mindful of the time, energy, and commitment of members?	☐	☐
	Is the scope of decision making clearly and openly articulated?	☐	☐
	Is this structure compatible with and tied to other structures currently operating within the community?	☐	☐
Process	Have you identified the process by which decisions get made?	☐	☐
	Have you identified how to welcome, orient and remind members of our process and mission?	☐	☐
	Have you established an effective communication network that will reach the right people and provide the right information?	☐	☐
	Have you established a way to document your work and maintain your "wraparound memory" as membership changes?	☐	☐

Collaborative Action ··

This section of the self-assessment focuses on the three areas for establishing collaborative action among stakeholders:

» **Shared Leadership:** Have you worked with others including families to build support for your project?

» **Guiding Plan:** Have you established a plan that is future-oriented, strategic and relevant?

» **Organizational Integration:** Are you considering the entire system in your design?

Area	Questions to consider	Yes	No
Shared Leadership	Have you identified who your wraparound champions are, both within and outside the project?	☐	☐
	Have you committed to identifying families and young people as allies and sponsors of your wraparound project?		
	» Are you putting families and young people forward with support, authority, and resources?	☐	☐
	» Have you committed to sharing decision making and power with them?	☐	☐
	» Are you willing to redistribute resources (personnel, time, space, equipment, funds, etc.) if family and youth voice leads to changes in some priorities or policies?	☐	☐
	» Have you built an inclusive agenda with families and young people rather than for them?	☐	☐

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Area	Questions to consider	Yes	No
Shared Leadership (continued)	Have you identified what decisions you can make collaboratively? And with whom?	☐	☐
Guiding Plan	Have you established long-range goals for your project?	☐	☐
	Have you established mid-range objectives for the project?	☐	☐
	Have you worked with others in establishing goals and objectives?	☐	☐
	Have you published your plan?	☐	☐
	Have you sought feedback about your guiding plan from those most impacted by it?	☐	☐
Organizational Integration	Have you identified agency-, organization-, and system-level policies that are compatible with your project?	☐	☐
	Have you identified policies that are not compatible?	☐	☐
	Have you reviewed your own operations within the initiative to identify areas of coherence or incoherence including:		
	» Paperwork?	☐	☐
	» Billing Expectations?	☐	☐

Area	Questions to consider	Yes	No
Organizational Integration (continued)	Have you identified staff job descriptions and roles for the project?	☐	☐
	» Are they compatible with wraparound values and real job expectations?	☐	☐
	Have you notified other partners of your commitment to change?	☐	☐
	» Have you enlisted their participation?	☐	☐
	Have you created a means to identify, prioritize and implement changes that will give you the best leverage for quality wraparound implementation?	☐	☐

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Fiscal Policies And Sustainability

This area of the self-assessment focuses on resource issues including financial investments and includes the following areas:

» **Wraparound Project Funds:** Have you invested enough to ensure that you will have the right staff and infrastructure to produce your desired outcome?

» **Building Funding Streams for Necessary Services:** Is your project positioned to wisely distribute funds for both project implementation and individual family services/supports?

» **Flexible Funds:** Are there clear, fair, quick pathways for flexible fund expenditures?

» **Stewardship:** Does your management of flexible funds and resources reinforce the wraparound values and practices?

Area	Questions to consider	Yes	No
Wraparound Project Funds	Have you identified and secured funding for at least a minimum range of staff roles?	☐	☐
	Will staffing patterns/case loads allow staff members time to do key tasks well?	☐	☐
	Have you identified what you will need in terms of supervision?	☐	☐
	Have you budgeted for overhead costs including providing clinical consultation and support?	☐	☐
	Have you identified and budgeted for the types of supervisory structures you will need to create?	☐	☐

Area	Questions to consider	Yes	No
Wraparound Project Funds (continued)	Have you budgeted for after-hours support and access to accommodate family needs?	☐	☐
	Have you developed and budgeted for training and staff development strategies so that staff have adequate information?	☐	☐
Build Funding Streams for Necessary Services	Have you identified what funding streams can be used in support of individual wrap-around plans?	☐	☐
	Have you contacted other wraparound sites to project the range of services and supports that are typically needed?	☐	☐
	Have you established funding for a front-end capacity so that families who enter wraparound in a high state of destabilization can access potent services and support quickly?	☐	☐
	Have you identified an integrated paper trail to avoid duplication on the part of direct service staff, particularly when multiple funding streams are accessed?	☐	☐
	Have you identified opportunities to impact funding streams at the policy level to ensure that flexibility can be enhanced for children and families?	☐	☐

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Area	Questions to consider	Yes	No
Build Flexible Funds	Have you identified policies for management of your flexible funds?	☐	☐
	Have you created easy ways to access cash or checks?	☐	☐
	Have you established clear definitions about flexible funds and their use?	☐	☐
Stewardship	Have you set forth policies for use of flexible funds?	☐	☐
	Have you sought feedback from youth and families about those policies?	☐	☐
	Have you avoided setting hard and fast rules but instead created thinking policies for staff to use openly with families?	☐	☐
	Have you made sure you are balancing the right ratio of staff roles with the right mix of direct service and the right mix of flexible funds?	☐	☐
	Have you created a transparent policy to seek exception to policies set forth to make sure that outlying situations with families can be considered?	☐	☐

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Access To Needed Services And Supports ·························

This area of the self-assessment focuses on the need to build a range of flexible, responsive and creative services and support for families enrolled in wraparound. Areas of focus in this area include:

» **Creativity**: Have you ensured that a range of helping activities is available to families through this process?

» **Wide Range of Options**: Are you maximizing choice for families and individual teams in arranging or delivering services and supports?

» **Ensuring Open Doors**: Have you created simple and straightforward ways for people to access help?

» **Just-in-Time Help**: Have you developed efficient ways for timely response?

Area	Questions to consider	Yes	No
Creativity	Are you working with current providers to tailor interventions?	☐	☐
	Have you made it possible for as many different types of help to be available to families through as many of your partners as possible?	☐	☐
	Have you worked to define the difference between getting a service and getting needs met?	☐	☐
	Have you arranged resources (personnel, contractual, others) to ensure that unique services and supports can be created?	☐	☐
	Can teams build and get support for a created intervention that is right for just one family?	☐	☐

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Area	Questions to consider	Yes	No
Wide Range of Options	Have you reached out to and included a broad array of providers? Even those who are not usually considered?	☐	☐
	Have you built an understanding that effective help reaches beyond service boundaries and definitions?	☐	☐
	Have you arranged enough flexibility of resources to support highly individualized supports for families?	☐	☐
Ensuring Open Doors	Do you have a clear plan for how supports and services will be accessed and connected to families?	☐	☐
	Have you created capacity to connect with an "off-line" provider as an exception to policy?	☐	☐
	Have you created a crisis capacity? » For on-call? » For mobile response? » For access to community resources?	☐	☐
Just-In-Time Help	Have you effectively planned for getting help to families in a timely way throughout this effort?	☐	☐
	Have you developed a way for services to cease when they are no longer needed?	☐	☐
	Have you created fast-track agreement procedures so that paperwork will never prohibit service access?	☐	☐

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Human Resource Development and Supports ·····················

This area of the self-assessment is focused on human resource issues as they relate to your wraparound implementation. Specific areas in this section include:

» **Adequacy of Staff and Roles**: Have you developed a plan to get the right people in the right role with the right tools to do the job?

» **Comprehensive Performance System**: Have you created methods for assessing and supporting continual development of staff competence?

» **Family Involvement**: What have you done to involve families in all aspects of workforce development?

Area	Questions to consider	Yes	No
Adequacy of Staff and Roles	Have you outlined the key roles needed to operate successfully?	☐	☐
	Have you developed job descriptions that are accurate and values based?	☐	☐
	Have you defined what key features you will need in successful candidates?	☐	☐
	Do you have a recruitment strategy in place? What is it and how is it different from re-cruiting for other positions?	☐	☐
	Have you built the steps for hiring the right employees for the positions you have planned?	☐	☐
	Have you developed a training strategy? What are the types of knowledge and skills you will need addressed, and by when?	☐	☐

Area	Questions to consider	Yes	No
Adequacy of Staff and Roles (continued)	Do you know how you will orient staff to the goals of the project on the very first day?	☐	☐
	Have you developed a process for monitoring workload issues to ensure adequate staffing patterns?	☐	☐
	Have you created internal and external partnerships that will allow your wraparound staff to function successfully?	☐	☐
	Are there unique roles that will require unusual or nontraditional supervision? How will you access this support?	☐	☐
Comprehensive Performance System	Have you established key benchmarks for staff and program performance?	☐	☐
	Have you established open feedback loops so staff can receive positive and corrective feedback?	☐	☐
	Have you linked program performance to employee performance?	☐	☐
	Do you know the mechanism you will use to summarize performance information to employees, funders and internal administrative roles within your organization?	☐	☐
Family Involvement	Have you involved families in recruitment and interviewing for positions?	☐	☐
	How will you involve families in providing feedback for staff around program and personnel performance?	☐	☐

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Accountability

This area of the self-assessment focuses on quality assurance improvement processes. You should use this to determine measures for accountability and how you will get enough information to use in program improvement. Specific areas in this section include:

» **Key Outcomes**: Have you identified the key results or impact you are expecting?

» **Management of Key Process Elements**: Have you identified what practices you want staff to follow with individual families?

» **Youth and Family Issues**: Have you identified and involved families in determining satisfaction measures?

» **Community Processes**: Have you built an awareness of anticipated community, organizational and system change activities?

» **Costs**: Have you reached consensus about the right amount of fiscal investment you expect to make to get your desired results through following your prioritized practices?

Area	Questions to consider	Yes	No
Key Outcomes	Have you articulated what you hope to accomplish for the people you are helping?	☐	☐
	Do you have a plan for how you will measure it?	☐	☐
	» Have you catalogued the sources of information that are available to you?	☐	☐
	Are you clear about what your funders care about?	☐	☐
	Do you have a plan for how you will summarize outcome information for staff?	☐	☐

Area	Questions to consider	Yes	No
Key Outcomes (continued)	Have you determined the level of outcome achievement you hope to see? What can you settle for?	☐	☐
	Have you decided what type of post-completion follow-up you will use and how long after services are over you can check to determine effectiveness?	☐	☐
Key Process Elements	Have you identified which practices within wraparound you care most about? How will you monitor whether those are happening?	☐	☐
	Do you have linkages to any research projects?	☐	☐
	Do you have a plan for how to use process information in program improvement?	☐	☐
Youth/Family Specific Issues	Have you determined if there is anything unique about your target population that you need to/want to monitor?	☐	☐
	Do you have a plan for how you will measure the family's experience of your project?	☐	☐
Community Processes	Have you articulated what you expect the community impact of the project to be?	☐	☐
	Do you have a plan for how you will determine if your system is changing? For the better? For the worse?	☐	☐

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Area	Questions to consider	Yes	No
Costs	Do you have a way to track current and future costs of care?	☐	☐
	Do you know what sources of funds those costs include?	☐	☐
	Have you examined what is a reasonable expenditure outlay per family?	☐	☐
	» Will you know when it is too much?	☐	☐
	» When is it too little?	☐	☐
	Do you have a plan for how to consider expenditures across life domains and sort out what that suggests for your system of care in terms of program development?	☐	☐
Other	Have you planned for how frequently you will need this information for it to be perceived as useful to the project?	☐	☐

Framework for a Coordinated System to Promote Mental Health in Minnesota

Framework for a Coordinated System to Promote Mental Health in Minnesota

Social Systems

Economic Systems

Universal Population-Based Mental Health Promotion

Activities that support all Minnesotans to increase knowledge of mental health promotion, social and emotional well-being, and related indicators:

anti-stigma activities; social marketing; research and evaluation to inform biological, psychological, health promotion, and social interventions; social engagement; parent-child attachment; public information; media reports and stories; internet dissemination; life span/life skills development in school curricula and parent education; statewide assessment of strengths/needs/gaps/data; systems planning and coordination

Strengths-based Risk Reduction

Activities that support all Minnesotans' access to mental health information and resources:

linkages to community resources, professional education, ongoing and crisis support (i.e. crisis phone lines), child/youth/parent/elderly education and support, a source of coordinated, continuous, and comprehensive health care, community assessments of strengths/needs/gaps/data, systems planning/integration

Screening

A systematic, ongoing process that identifies unique mental health needs:

formal and informal screening; identification and referral through a home visit, clinic, hospital, school, or other community service via personnel trained in mental health screening, referral, and follow-up

Assessment & Moderate Intervention

As a result of screening, people at some risk are referred for assessment: If moderate interventions are recommended, a designated resource person coordinates services and a mental health specialist provides consultation with other professionals

people may move between these two levels of service

Assessment & Intensive Intervention

As a result of screening, individuals who are at highest risk or who already show evidence of mental health issues are referred for assessment: If intensive interventions are recommended, a service coordinator coordinates services and a mental health specialist provides therapy and other necessary treatment in consultation with other professionals

*adapted from a model for the 1998 Minnesota Infant Mental Health Feasibility Study

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