State and System Level Strategies for High Quality Fidelity Wraparound Implementation

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Welcome

Introductions

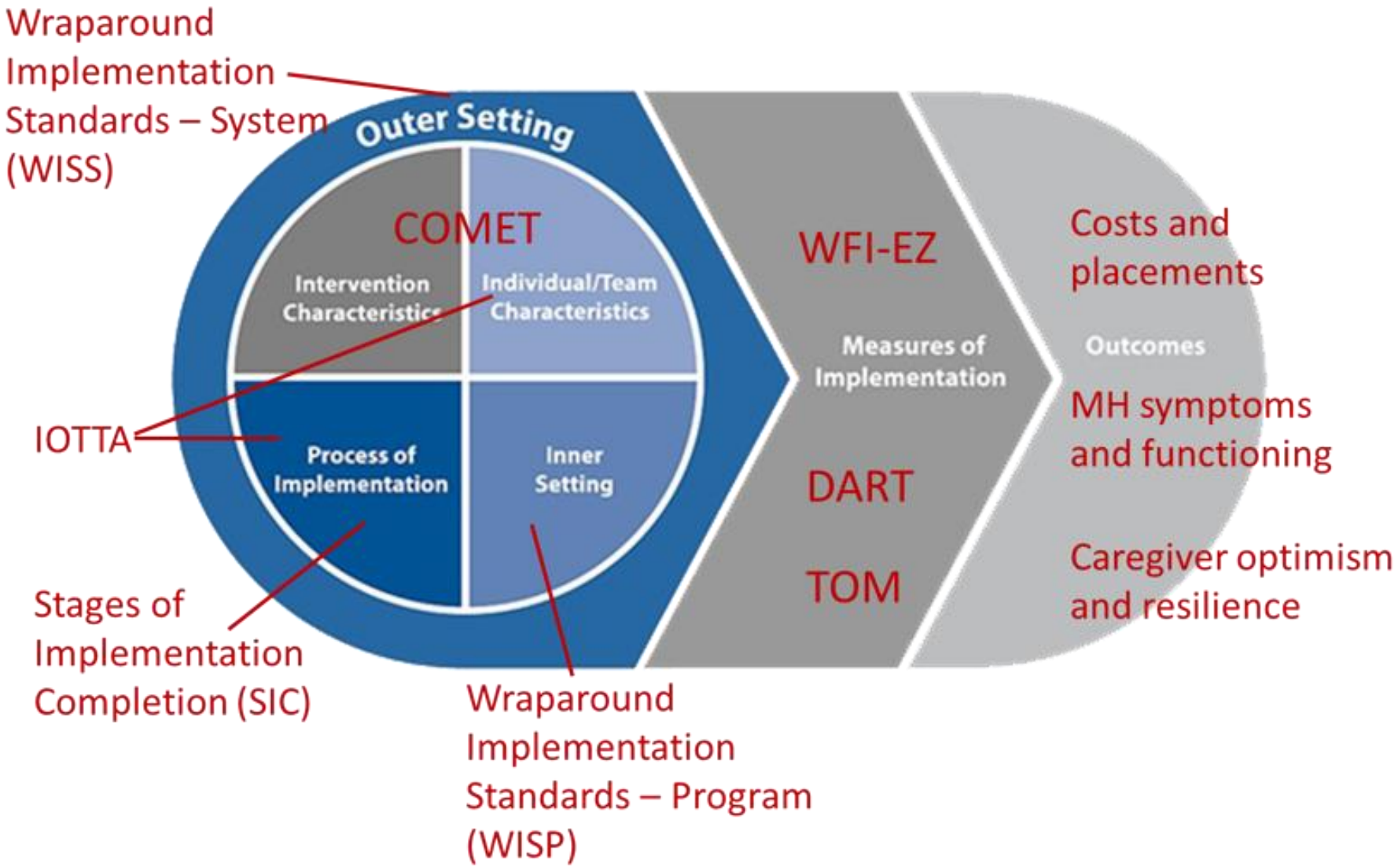
Implementation is influenced by numerous factors

Consolidated Framework for Implementation Research

- Intervention characteristics
  - Quality, adaptability, complexity, etc.
- Outer setting
  - External policies, client needs, etc.
- Inner setting
  - Culture, climate, readiness, etc.
- Individual characteristics
  - Knowledge and beliefs, stage of change, self-efficacy, etc.
- Process
  - Planning, executing, evaluating, etc.

CFIR

Wraparound Through an Implementation Science Lens



Inner and outer settings impact Wraparound implementation

Outer setting:

- Coordination of multiple systems
- Fiscal policies
- Political environment
- Workforce development support

Inner settings:

- Organizational policies and procedures
- Organizational culture and climate
- Staff competence and skills
- Leadership styles

National Standards

Wraparound Implementation and Practice Quality Standards created to support analysis of crucial factors associated with success

Outcomes are highly dependent on program and system factors

- Eligibility (do we have the right population?)
- Funding (do we have the right rate?)
- Staffing ratios (1:10)
- Workforce development (hiring, training and skill development)
- System policies that create climates and cultures that support practice implementation efforts and providers

http://www.nwi.pdx.edu/pdf/Wraparound-implementation-and-practice-quality-standards.pdf

National Standards (cont.)

Standards are grounded in a strong foundation of implementation science research and based on research evidence.

Across seven implementation related areas there are 43 indicators with definitions that can be used as a self assessment as well as monitoring of quality indicators throughout the implementation process.

National Standards (cont.)

Seven clear areas that need to be attended to while developing and implementing Wraparound.

- These include five implementation-related areas:
  - Four at the Wraparound provider-level:
    1. Competent Staff
    2. Effective Leadership
    3. Facilitative Organizational Support
    4. Utility-focused Accountability Mechanisms
  - One at the wider-community-level:
    1. Hospitable System Conditions
  - And two output-related areas:
    1. Fidelity: High-Quality Wraparound Practice
    2. Outcomes: Improved Youth and Family Functioning

Wraparound Implementation Standards – System (WISS)

Scoring Manual

National Wraparound Implementation Center

Advancing Systems ◇ Enhancing the Workforce ◇ Improving Outcomes

University of Maryland School of Social Work
The Institute for Innovation and Implementation

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Wraparound Implementation Standards - Program (WISP) Scoring Manual

2019

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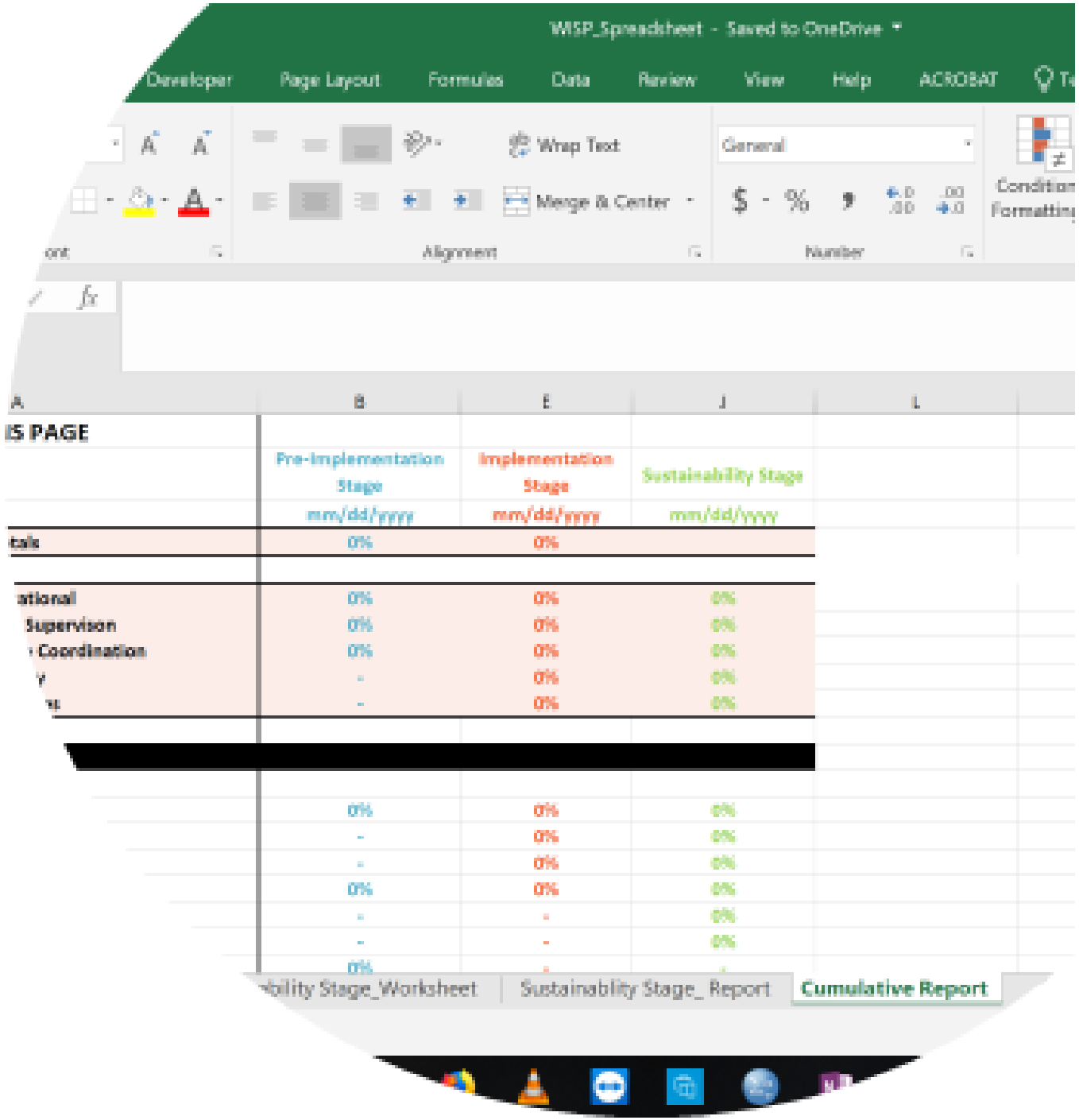
Advancing Systems ◇ Enhancing the Workforce ◇ Improving Outcomes

Across Implementation Stages

- Are we set up for success (Pre-implementation Stage)?
- Are we addressing barriers, establishing clear expectations, and providing support (Implementation Stage)?
- Are we ensuring all the good work maintains? Do we have continuous quality improvement measures solidly in place (Sustainability Phase)



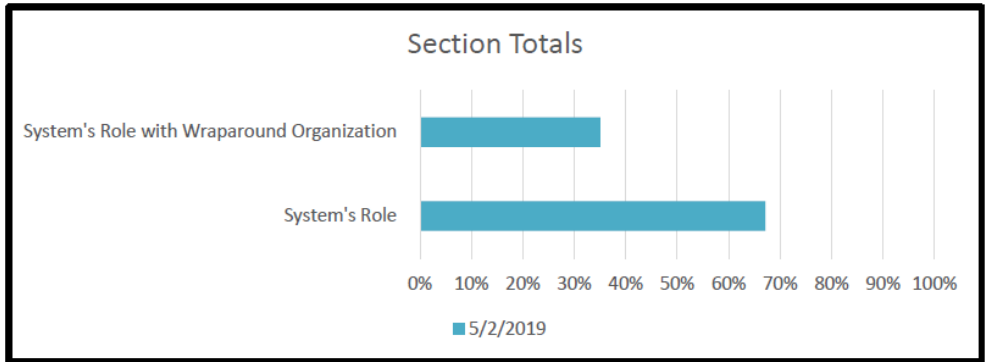
System establishes a CQI plan that includes data dissemination outlining quarterly assessment of workforce capabilities, quality measures and outcomes to be monitored, utilization, and service array needs (4B-4D)	1	50%	*workforce and outcome data collected and shared with providers quarterly but not strong CQI plan; utilization data and service array not monitored; need to track HFW referrals*
Total for Sub-Section		75%	
Total for Section		67%	
SYSTEM'S ROLE WITH WRAPAROUND ORGANIZATION			
Leadership	**Score**		**Notes/ Justifications**
System leadership has set standards for organizational level implementation team that includes executive leadership, mid management, supervisors and care coordinators (2B & 3E)	1	50%	*need exec leadership*
System sets expectation for feedback loops around installation progress and system level change needs (3E)	2	100%	
Total for Sub-Section		75%	
Enrollment & Engagement	**Score**		**Notes/ Justifications**
System leadership provides guidance for procedures and policies to manage referrals after initial eligibility (5G)	1	50%	*in place for after PA but not before*
System leadership provides guidance for a process to support Medicaid application for eligible referrals (5F)	1	50%	*managed on local level*
Total for Sub-Section		50%	
Services and Supports	**Score**		**Notes/ Justifications**
System leadership provides direction on establishing firewalls between any internal organizational service provision and care coordination effort and establishes monitoring schedule for oversight (5G)	0	0%	
Total for Sub-Section		0%	

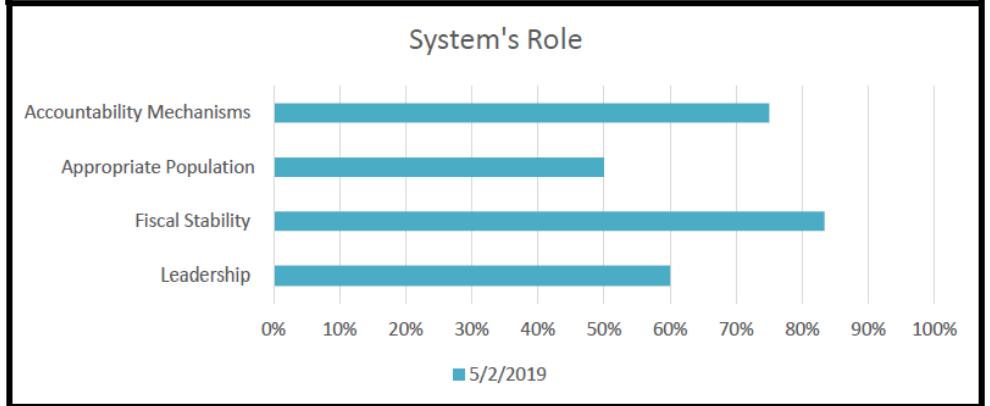
	5/2/2019
Totals	51%

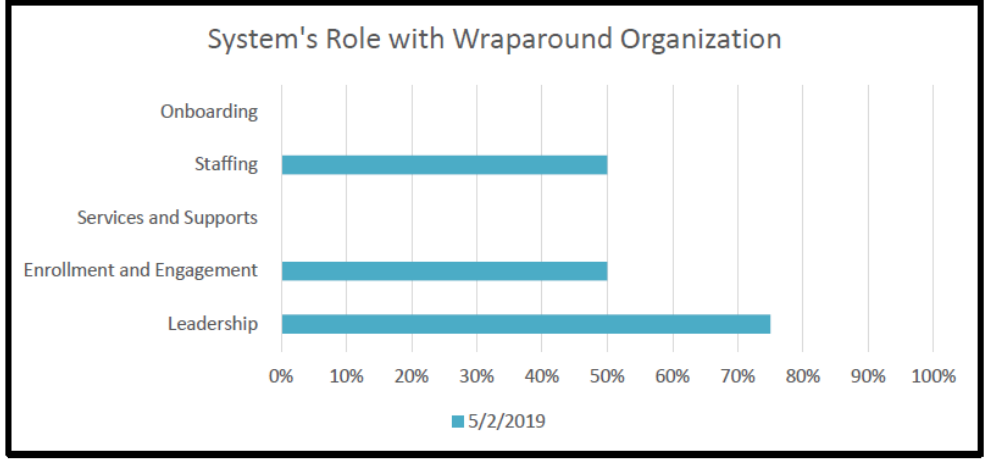
Section Totals	
System's Role	67%
System's Role with Wraparound Organization	35%

System's Role	
Leadership	60%
Fiscal Stability	83%
Appropriate Population	50%
Accountability Mechanisms	75%

System's Role with Wraparound Organization	
Leadership	75%
Enrollment and Engagement	50%
Services and Supports	0%
Staffing	50%
Onboarding	0%







Wraparound Implementation Standards- System
Developmental Timeline by Implementation Standards Element[i]

Category	Pre-Implementation	Implementation (0-9 months)	Sustainability (10-18 months)
System's role	Leadership: Executive leadership has designated appropriate staff with necessary authority to lead the cross-systems initiative and manage the implementation. (2A, 2C) System has developed an implementation readiness process that includes a clear system design, leveraging of existing reform or financing initiatives, and assessment of strengths and gaps in the current system of care. (5E-H) System leadership brings system child serving agencies, families and youth together regularly to collaboratively plan or govern SOC implementation. (5C & 5E) System establishes workforce development plan that ensures ongoing access to training and expert coaching (1D, 1F, 1G). System leadership develops a communications plan which includes internal messaging to promote engagement and support, and external messaging to engage stakeholders and outreach to families.(1A, 2B, 5B, 5E)	Leadership: System leadership is working to operationalize the system design, build needed infrastructure and establish financing mechanisms. (5B, 5E, 5F) System leadership is working to develop the service array and provider network to fill identified gaps in the system of care. (5H) System leadership is reviewing progress reports on wraparound implementation and addressing any identified system level barriers. (2A) System leadership has taken specific steps to translate the Wraparound philosophy into system level policies and practice guidance. (5E) System leadership addresses any barriers for the Wraparound Plan of Care (POC) to coordinate the work of all services and providers on behalf of a youth and family and ensure the Wraparound POC serves as the primary plan of care. (5D) System ensures workforce is being trained and coached around expected practice elements (1D, 1F, 1G). Internal agency staff receive regular communications from system leadership regarding progress of implementation and expectations. (1A, 2B)	Leadership: Infrastructure in place or design is being actively modified in partnership with stakeholders based on data and leadership identification of needed adjustments. (5B, 5E) Provider network and service capacity is regularly monitored and array of services and supports is on target for adequate development. (5H)

Category	Pre-Implementation	Implementation (0-9 months)	Sustainability (10-18 months)
		External stakeholders receive regular updates on implementation and have opportunities to provide feedback to system leadership. (5B) System leadership has established regular outreach activities to ensure Wraparound is publicized and youth and families understand how to access. (5G)	
	Fiscal Sustainability: System leadership identifies potential financing streams to support workforce development, needed system supports such as IT, and installation of Wraparound. (5F) System leadership identified any changes or clarifications in Medicaid managed care operations and takes necessary steps to define, communicate and implement any changes needed both internally and externally with MCOs. (5F) System leadership identifies changes needed for Medicaid to support provision of Wraparound and a flexible service array (e.g. State Plan amendment, waiver). (5F)	Fiscal Sustainability: System leadership addresses any changes that may be needed in Medicaid managed care including medical necessity criteria, staff training and policy and procedure evaluation and updates to support a plan of care within Wraparound. (5F) System is moving forward with needed Medicaid changes (e.g. System Plan amendments, waiver applications) (5F) Cost and quality data are being collected to demonstrate return on investment. (4A & 4D)	Fiscal Sustainability: System leadership has established long term sustainable funding and needed Medicaid authorities have been established or are in development with CMS. (5F)
	Appropriate Population System leadership defines population to be served, eligibility criteria, process and standardized assessment tools. (5A & 5G)	Appropriate Population: System leadership monitors population of youth & families enrolled in meeting all criteria of medical necessity and complex needs for Wraparound (5A & 5G)	

Category	Pre-Implementation	Implementation (0-9 months)	Sustainability (10-18 months)
	Accountability Mechanisms System establishes feedback loops with local implementation teams around progress of Wraparound installation system level change needs (3E) System establishes a CQI plan that includes data dissemination outlining quarterly assessment of workforce capabilities, quality measures and outcomes to be monitored, utilization, and service array needs (4B-4D)	Accountability Mechanisms: System leadership implements processes to share data elements and progress toward successful implementation (4B) System leadership implements CQI plan and processes to track child-level outcomes and quality measures for all youth in Wraparound and to use data to inform quality improvement (4A,D) The size of the child and family team is tracked and includes more than the care coordinator and family (service providers on POC and at least one informal support should be present) (F3) Critical incident reports are tracked and reviewed (5H) Disenrollment and re-enrollment is tracked and reviewed (F8) Child serving agency involvement (JJ and CW) are reported (5I) System supports Electronic Health Record to be built or modified to support quality implementation of Wraparound (4A)	Accountability Mechanisms: System leadership routinely monitors outcomes, and competency and fidelity data are routinely reviewed and used for Continuous Quality Improvement (4B - 4D)

Category	Pre-Implementation	Implementation (0-9 months)	Sustainability (10-18 months)
System's Role with Wraparound Organization	Leadership: System leadership has set standards for organizational level implementation team that includes executive leadership, mid management, supervisors and care coordinators (2B & 3E) System sets expectation for feedback loops around installation progress and system level change needs (3E) Enrollment & Engagement: System leadership provides guidance for procedures and policies to manage referrals after initial eligibility (5G) System leadership provides guidance for a process to support Medicaid application for eligible referrals (5F) Services & Supports: System leadership provides direction on establishing firewalls between any internal organizational service provision and care coordination effort and establishes monitoring schedule for oversight (5G)	Leadership: System leadership has provided direction to or procured expert implementation support for local organizations on specific steps to translate the Wraparound philosophy into policies, practice elements and achievements and agency staff are informed of Wraparound practice expectations (5E) System leadership provides guidance to local organizations with respect to how the Wraparound Plan of Care (POC) structures and coordinates the work of all services and providers on behalf of a youth and family; System leadership has issued policies and has made steps to ensure the Wraparound POC serves as the primary plan of care (e.g., Medicaid managed care medical necessity criteria follow policy) (5D) System leadership provides local organizations guidance for performance goals, flexible policies, incentives and accountability mechanisms for staff to meet these expectations (2A)	Accountability Mechanisms: An accountable Continuous Quality Improvement (CQI) infrastructure exists between local organizations and system leadership (e.g. mechanisms to monitor fidelity, service quality & outcomes and to assess the quality and development of Wraparound, and data sharing feedback loops) (3E, 4A & 5I). Changes in percentage of youth going to an out of home intervention (O6) Size of the CFT including the percent of informal supports (F3) School attendance and graduation rates (O2) Involvement with JJ, increases in detention and probation rates (O3) Disenrollment and re-enrollment is tracked and reviewed (F8) Critical incident reports are tracked and Reviewed (5I) Involvement with child welfare, out of home Incident reports with child protection (5H)

Category	Pre-Implementation	Implementation (0-9 months)	Sustainability (10-18 months)
	Staffing: System provides guidance on staffing expectations for local organizations, including during initial startup and full implementation, and support a workforce development plan that supports long-term organizational needs for supporting the number of families referred. (3A) Onboarding: System provides guidance on interview and selection protocols for Care Coordinators and supervisors including Wraparound specific behavior-based scenarios and criteria (1C)	Staffing: System provides guidance on hiring, interviewing protocols, and job descriptions for Care Coordinators that are specific to the care coordinators job (1C) System provides guidance on job descriptions for Wraparound Supervisors that are specific to that role and clear performance expectations have been established (1C) System provides expectations on staff training, coaching, competencies and certifications. (1C) Performance Assessment: System leads development of process and tools to assess Care Coordinator's performance using objective-measures (e.g. observations) that are tied to their job descriptions and quality indicators (1G) System ensures workforce access to expert training and coaching that includes standardized measures of skill attainment (1F, 1G)	Staffing: System leadership has an established process in place to ensure monitoring of provider agency performance, turnover rate and staffing ratios for care coordinators and supervisors. (2A, 1A, 3A)

[i] Source Document -- Schurer Coldiron, J., Bruns, E.J., Hensley, S.W., & Paragoris, R. (2016). Wraparound Implementation and Practice Quality Standards; the *National Technical Assistance Network for Children's Behavioral Health.*

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