

WRAPAROUND

Quarterly Report for Idaho WInS

Q1 SFY 2022

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Background

The State of Idaho implemented a new Children's Mental Health system of care, branded as the Youth Empowerment Services (YES program), in 2017.¹ Intensive Care Coordination (ICC) is an identified service of the YES program specifically for youth and families with high service needs. Idaho has determined children and youth with multi system involvement, those at risk of removal from a community setting to a higher level of care or are transitioning from a higher level of care into a less restrictive level of care are appropriate for Intensive Care Coordination. One type of Intensive Care Coordination that is evidence based is Wraparound. In Idaho this is called, Idaho WInS (Wraparound Intensive Services).

Division of Behavioral Health (DBH) initiated the Idaho WInS model of Wraparound in February 2018. A small pilot of current DBH Children's Mental Health (CMH) youth and families were enrolled in Idaho WInS. DBH had three goals: Implement Wraparound to fidelity, build capacity of trained Wraparound coordinators, coaches, and supervisors across the system, and to increase the number of youth and families served to 250 by August 2020.

Typically, this report will look at data from several sources. The DBH Electronic Health Record (WITS), referrals and referral dispositions, a standardized fidelity tool called the Wraparound Fidelity Index, shortened version (WFI-EZ), CANS data, and a Quality Service Review. All these methods for evaluating this program comprise the Quality Monitoring of the Idaho WInS program.

Purpose

For this SFY 2021- 2022 Quarterly Quality Assurance Wraparound report, the focus is on overall programmatic data regarding the youth served in Idaho WInS. In each section, analysis is given looking at whether youth can access Wraparound and whether youth and families experience Wraparound as intended according to the 10 Wraparound principles set forth by the National Wraparound Initiative (NWI).

¹ Please see Appendix A Principles of Care & Practice Model

Idaho WInS Programmatic Data

Since implementation, Idaho WInS has worked to build capacity of the Wraparound coordinators by setting incremental goals. Idaho WInS was able to accomplish the goals set within the first two years of implementation.

Year	WInS Goal	Total Youth served
2018-2019	Total 150 youth served	206
2019-2020	Total 250 youth served	366
2021-2022*	Total 300 youth served	538

*Please note this data captures the total number of youth served since program inception. This number represents youth and families that have started Wraparound and received at a minimum one engagement session for Wraparound.

Table 1a illustrates the number of active Wraparound families by end of SFY and number of youth discharged from Wraparound

Table 1a Total Active Wraparound Families and Families discharged		
SFY	Total # of Active Families	Total # of Families discharged from Wraparound
2018	97	0
2019	109	4
2020	160	135
2021	151	223
2022*	152	24
Total active and discharged	152	386

*Data as of July 1, 2021 through September 30, 2021

**Wraparound on average is 12-14 months. Some of this may account for carryover or duplication of families still engaged in Wraparound.

Tables 1b, 1c, and 1d demonstrate regional demographics on gender, race, and ethnicity for SFY 2022 Q1

Table 1b: Gender	Q1 2022	Q2 2022	Q3 2022	Q4 2022
Female	58			
Male	92			
Transgender	2			
Total	152			

Females are 38.15 % of the total active Wraparound youth. Males are 60.52% of the active Wraparound youth. Transgendered youth are 1.31% of the total active Wraparound youth as indicated in table 1b.

In the Quality Management Improvement and Accountability (QMIA) report from September 2021, it indicates that of the YES youth that have had an initial CANS completed for SFYTD2021, it is reflective of the percentages of the state's population. In this report, females are 50.56% of the initial CANS population, males are 48.35% of the initial CANS

population, and transgendered youth are 0.65% of the initial CANS population². Comparing the QMIA data to that of the Wraparound youth based on gender indicates that males appear to be served at a higher number than females and transgendered. It is unclear as to what factors into the high number of males served in Wraparound compared to females as compared to the data provided in the QMIA report regarding gender. This remains a trend for the Wraparound youth since this report has been addressing gender. Currently there is no information available as to what the youth profile looks like at a national level according to gender for youth receiving Wraparound.

Table 1c: Race	#youth	% by race	QMIA YES population	% of Idaho's population	Underrepresented
American Indian	9	5.92	1.33	1.7	
Asian	0	0	0.44	1.6	Yes
More than one race	3	1.97	3.53	2.5	Yes
Black/African American	6	3.95	1.63	0.9	
Other/Unknown	30	19.73	--	--	
Pacific Islander	0	0	0.18	0.2	Yes
White/Caucasian	104	68.42	71.94	80.4	
Total	152				

Table 1d: Ethnicity³	Q1	% by ethnicity	QMIA YES population	% of Idaho's population	Underrepresented
Hispanic or Latino - specific	16	10.53	20.96	12.7	Slightly
Not of Hispanic or Latino Origin	101	66.44	--	--	
Other Hispanic or Latino	4	2.64	--	--	
Unknown/Refused	31	20.39	--	--	
Total	152	100			

The make-up of the race and ethnicity of Idaho WInS youth and families is not dramatically different than the make-up of the overall youth receiving YES services as reported in the September 2021 QMIA report. White/Caucasian youth are served at sixty-eight percent (68%) of total WInS youth. African American/Black youth do appear to be represented more in WInS than total YES population noted in the QMIA Quarterly Report and total Idaho population at three-point ninety-five percent (3.95%). There was a slight increase of African American/Black youth served in this last reporting period. More Native American youth were served in this last reporting period with a four-point-thirty-two (4.32%) percent increase and is more than indicated in the QMIA report and the Idaho Population.

It is noteworthy that the Hispanic or Latino youth appear to be underrepresented compared to the total YES youth served compared to the QMIA population or total Idaho Population. Additionally, it is noteworthy that the percentage of youth represented in the unknown, other, and refused category is almost 20% as indicated in table 1c and 1d. One area for improvement would be to ensure the youth's race and ethnicity is accurately represented in the data collection.

² QMIA Quarterly Report September 2021. YES.idaho.gov, page 9. <https://yes.idaho.gov/wp-content/uploads/2021/09/QMIA-Quarterly-YES-Report-Sept-2021.pdf>

³ Population statistics obtained from <https://worldpopulationreview.com/states/idaho-population>. Ethnicity is not specifically identified at this Website as designated in the ethnicity table 1d.

The addition of a category such a “decline to answer”, may also be warranted to better reflect a potential answer to a question regarding race and ethnicity.

Length of stay

Table 2a: Length of Stay				
	Avg days Phase 1	Avg days Phase 2	Avg days Phase 3	Avg days Phase 4
SFY 2020 Q3	114	158	138	71
SFY 2022 Q1	94	170	188	83

*The “pre-Wrap” enrollment category as indicated in Appendix A is no longer utilized in the WITS system.

*Dad was not reported in SFY 2021

Above is the SFY Q1 data tracking of length of stay compared to the last reporting of this data in SFY 2020 Q3. Since the initial reporting in 2020, Idaho WInS has been working to address the length of stay in each Phase that does not align with the recommended length of stay from the National Wraparound Initiative of 30 days in Phase 1 and Phase 2.

Following the initial reporting, the following adjustments were made to coaching with the Wraparound Coordinators.

- Coaching regionally focused on barriers to initiation of Wraparound. Utilized tools to aid in problem solving barriers.
- Coach the coach support addressing barriers to engagement. Utilized the individual coaching plan as a tool to identify areas of strength and areas needing improvement.
- Encouraged coaches to utilize observations with coordinators to address barriers to engagement in Phase 1.
- Coach the coach support to address paperwork and documentation barriers.
- Addressed this report with the Supervisors and Coaches and brainstormed strategies to assist families through Phase 1 in an expedited manner.

Between SFY 2020 Q3 reporting and this report, Wraparound standards were also developed for Idaho WInS regarding length of stay in Wraparound. The standards are closer to the recommended length of stay from the National Wraparound Initiative (NWI) as indicated above. WInS set benchmarks of 30-45 days for Phase 1, and 45-60 days for Phase 2. In Idaho WInS, Phase 3 and Phase 4 are individualized to the youth and family like the recommendation from NWI. Idaho WInS will continue to assist coordinators and coaches in Wraparound practice for best practices in engagement in the Wraparound planning process.

In Q1 of SFY 2022, a report of the percentage of youth that complete Wraparound Phase 1 within the benchmark set of 30-45 days was developed and the data is represented below in table 2a.

Table 2a: Wraparound Phase 1 Percent Complete							
	R 1	R 2	R3	R4	R5	R6	R7
# youth complete Phase 1 in 30 days	0.00%	0.00%	0.00%	1.28%	0.00%	0.00%	2.11%
# youth complete Phase 1 31-45 days	0.00%	0.00%	2.22%	2.56%	1.82%	0.00%	2.11%
# youth complete Phase 1 46-60 days	0.00%	0.00%	2.22%	1.28%	0.00%	0.00%	2.11%
# youth complete Phase 1 61-80 days	0.00%	5.00%	8.89%	0.00%	3.64%	0.00%	1.05%
# youth complete Phase 1 in over 80 days	21.43%	0.00%	17.78%	2.56%	14.55%	0.00%	10.53%

Based on the information above, it does not appear that youth and families are completing Phase 1 within the standards set across the state. There do appear to be some areas in the data above that indicate youth and families are getting oriented and engaged in Phase 1 and to Phase 2 to build the Wraparound Plans of Care within the WInS standard of 30-45 days (region 4 and 7, respectively). Anecdotally, many coordinators report the following issues that create barriers to engagement. Continued work in this area will be addressed in this next quarter.

- Youth and family are often in crisis at the initiation of Wraparound,
- Families may be in the process of seeking a more restrictive placement for the identified youth, or
- Newly trained coordinators are learning the practice as a reason for the lengthy engagement into Wraparound.
- Pandemic related barriers

The above report has been communicated to the regional coaches and supervisors with facilitated discussion on strategies to improve the engagement of youth and families in Phase 1. Additional tools have been developed and disseminated to the coordinator to assist. The following links are to the System of Care Institute (SOCi) at Portland State University tool times for Phase 1 and Phase 2. These have been provided to Idaho WInS from SOCi.

https://oregonwraparound.org/wp-content/uploads/2021/11/tt_phase1_211108.pdf

https://oregonwraparound.org/wp-content/uploads/2021/08/tt_phase2_210527.pdf

Next Steps and Areas for Improvement

Idaho WInS continue to focus on improving the length of time for youth in Phase 1 or the engagement phase. This allows youth and families to get to planning sooner and develop a Wraparound plan of care that is individualized, team-based, and meets the identified needs of the youth and family.

Currently, coordinators use the strategies indicated below to support engagement in Phase one and adhere to Idaho WInS benchmarks.

- Meeting weekly to finish engagement within benchmarks
- Provide clear timeline to youth and family for engagement activities
- Coaches support coordinator to utilize tools to support their work
- Utilization of telehealth during engagement phase
- Tool Times (coaching tools) are helpful to communicate information in an easy and understandable way
- During Phase 1 utilize the information gathering to address some of Phase 2 requirements. For example, get youth and family desires for ground rules and pre-populate the plan of care.
- During Phase 1 set subsequent appointments in advance so the family knows what to expect.
- Validate and affirm the overwhelming feeling the youth and family may experience when starting Wraparound and provide a timeline of what to expect.
- Wraparound Coach supports coordinators to team an enrolled Wraparound family. They assist with successful benchmark completion.
- If family ultimately chooses to not be involved in Wraparound at the time of engagement, but would like to reconsider later, provide a timeline of when Coordinator will check back to re-engage the youth and family.

Appendix A

Length of Stay

Idaho WInS began tracking the length of time a youth and family are engaged in Wraparound Phases in Q3 of SFY 2020. This table was reported in the SFY 2020 Q3 report. For the above reporting the last column was removed due to current electronic system does not track this metric.

Average Length of stay (<i>in days</i>) per Phase (pre-Wrap to Phase 4)					
SFY 2020	Avg days Phase 1	Avg days Phase 2	Avg days Phase 3	Avg days Phase 4	Avg days Pre-Wrap to 1 st Wrap service
Q3	114	158	138	71	42

Appendix B

The YES Principles of Care are eleven (11) values that are applied in all areas of mental health treatment planning, implementation, and evaluation.

- 1.0 Family Centered
- 2.0 Family and Youth Voice and Choice
- 3.0 Strengths-Based
- 4.0 Individualized Care
- 5.0 Team-Based
- 6.0 Community-Based Service Array
- 7.0 Collaboration
- 8.0 Unconditional
- 9.0 Culturally Competent
- 10.0 Early Identification and Intervention
- 11.0 Outcome-Based

The Practice Model in the YES system of Care describes the expected experience of care in six (6) practice components.

- 1.0 Engagement
- 2.0 Assessment
- 3.0 Care Planning & Implementation
- 4.0 Teaming
- 5.0 Monitoring & Adapting
- 6.0 Transition

For more detailed information please utilize the link provided for the full YES Principles of Care and Practice Model document.

https://yes.idaho.gov/wp-content/uploads/2021/04/PrinciplesofCare_PracticeModel_inPractice.pdf

References

Boise State University, Family Survey 2020.

Quality Improvement Accountability and Management (QMIA) Quarterly Report January 2021.

WrapTrack Report Guide, System of Care Institute, Portland State University, 2019.