WRAPAROUND

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Idaho WInS Background

In 2016 the Idaho Division of Behavioral Health (DBH) implemented a new Children's Mental Health (CMH) system of care branded as Youth Empowerment Services (YES)[1]. Intensive Care Coordination (ICC) is a service of the YES settlement agreement specifically for youth and families with high service needs. Idaho determined ICC is appropriate for children and youth meeting the following criteria: multi-system involvement; or at risk of removal from a community setting to a higher level of care; or transitioning from a higher level of care into a less restrictive level of care. One evidence-based system of ICC is Wraparound. Idaho's Wraparound Program is called Idaho Wraparound Intensive Services, or Idaho WInS.

DBH initiated the Idaho WInS model of Wraparound in February 2018. At that time, a small pilot of youth and families already involved in the CMH system were enrolled in Idaho WInS with two goals: 1) to implement Wraparound to fidelity and build capacity of trained Wraparound coordinators, coaches, and supervisors across the system; 2) and to increase the number of youth and family served to two hundred and fifty (250) by August 30, 2020. Since August 2020, Idaho WInS Has exceeded the goal of 250 youth and their families services by 400 youth with a total of 614 youth and their families served.

Idaho WInS is regularly monitoring for fidelity adherence in accordance with the five key areas identified by National Wraparound Initiative (NWI) with the use of the Wraparound Fidelity Index, shortened version or WFI-EZ. Idaho WInS is demonstrating fidelity in multiple areas as measured on the WFI-EZ. Idaho WInS is consistently demonstrating fidelity in the driven by youth and family, strength-based principle, individualized principle. Areas of continued improvement are in the outcomes based; team based key areas. Fidelity is monitored four times per year with a sampling of approximately thirty-five (35%) percent of the total enrolled Wraparound youth.

Report Purpose

This purpose of this quarterly quality assurance report is to provide detailed information on the use of the Child and Adolescent Needs and Strengths (CANS) assessment in Idaho WInS. The CANS is the statewide assessment tool for all youth receiving mental health care in Idaho. It captures strengths and needs as told by the youth, their families and any service providers involved in their care. The CANS is part of the Wraparound planning process as a tool to gather strengths and needs supporting the Wraparound principles of individualized care, driven by the youth and families within the collaborative team-based planning process.

The CANS is rated every ninety (90) days following the initial assessment. The CANS is scored on a zero (0) to three (3) scale for identified needs. Those needs that are a zero indicates that there is no need present. Needs indicate as a one (1) are needs that are present but do not require immediate action. Needs that are rated a two (2) require action or intervention. Needs rated a three (3) are needs that are dangerous and disabling.

For the strengths sections, the CANS is scored also on a zero (0) to three scale. Strengths that are a zero (0) are a centerpiece strength and should be utilized for treatmetn planning. Strengths rated as a one (1) are strengths that also should be utilized for planning. Strengths that are rated a two (2) are those that are present, but perhaps the youth can't call upon them to support them and require building. Strengths that are rated a three (3), are those that are not present.

Outcomes Data

In addition to the total number of CANS completed during the reporting period, the following key areas are highlighted in the report:

- Youth Risk Behaviors which may warrant treatment in an emergency room, or crisis center,

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[1] https://yes.idaho.gov/youth-empowerment-services/about-yes/yes-history/

- Youth at Home which looks at the family functioning and youth's ability to manage behaviors at home,
- Youth delinquency and legal issues which addresses legal problems resulting from behavior, and status offenses,
- Youth at School focused on youth attendance, youth behavior at school and youth achievement at school, and
- Youth Strengths that are predictive of good outcomes.

Using the CANS to Assess Wraparound Outcomes

The information reported in the following sections is focused on the CANS items organized according to the outcomes identified by the Wraparound Fidelity Index shortened version (WFI-EZ). The WFI-EZ is a standardized fidelity tool which monitors the following outcomes.

- Youth received are in a new placement (e.g., detention, psychiatric hospital, treatment center, group home),
- Youth treated in Emergency Room due to mental health problem,
- Youth had negative contact with police,
- Youth suspended or expelled from school,
- Youth and family experience stress or strain due to youth's behavior,
- Youth experiences problems that disrupted home life,
- Youth experience problems that interfered with school,
- Youth experienced problems that interfered with maintaining or developing friendships, and
- Youth experienced problems that interfered with community activities.

CANS Completed

For this report, the total number of CANS completed since Wraparound implementation will be used from two assessment periods. According to the recommended data flow by the Praed Foundation and the University of Washington Wraparound Evaluation and Research team (WERT), to understand program health and assess for programmatic change, using two CANS assessment data points; initial assessment and then at 12 months, in addition to using the average ratings across the data points [2] can assist in understand areas for programmatic change.

For this report, the data set are those CANS completed for Wraparound youth January 2018 until present and of those youth CANS assessments that were an initial assessment and a 12- month assessment. The number of CANS for each of these reporting periods are indicated in figure 1 below. Please note that the number of CANS for each assessment may not represent the same youth. The data included for this report indicates there were 475 Wraparound youth since 2018 that received an initial assessment, and 114 Wraparound youth received a 12- month CANS assessment.

Figure 1-Count of CANS per assessment period.

	# Unique Clients
Initial Assessment	475
12 Months	114

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[2] Hensley, Spencer, Jennifer Schurer Coldiron, et. al. "Putting the CANS to use at the Wraparound program and system level". University of Washington Wraparound Evaluation and Research Team. Pg.8

Limitations

There are two identified limitations to the data included in this report. The first limitation is that the two points in time assessed do not account for individualized scores of youth enrolled in Wraparound. Each assessment period does not differentiate by unique youth CANS ratings. Instead, the data focuses on the average of CANS ratings for the initial CANS assessments, and the 12-month CANS ratings (approximate length of time in Wraparound) per CANS item since 2018. It is likely that the 114 youth at the 12-month mark are included in the 475 initial assessment CANS. It would be best practice if the data set specified the initial assessment of the 114 youth indicated in the 12-month assessment. The data set represented in the key outcome areas do not represent comparisons of values due the limitation indicated above and proves difficult to answer the question of improvements for specific youth over time.

The second limitation is the data does not include the average number of actionable items (needs) on the youth in the data set rather an average of all the CANS for that CANS assessment period; initial or 12-month. Having an average represented removes those with the highest needs or strengths to build and those with the lowest needs or centerpiece strengths and may not accurately reflect the needs and strengths of youth in Wraparound.
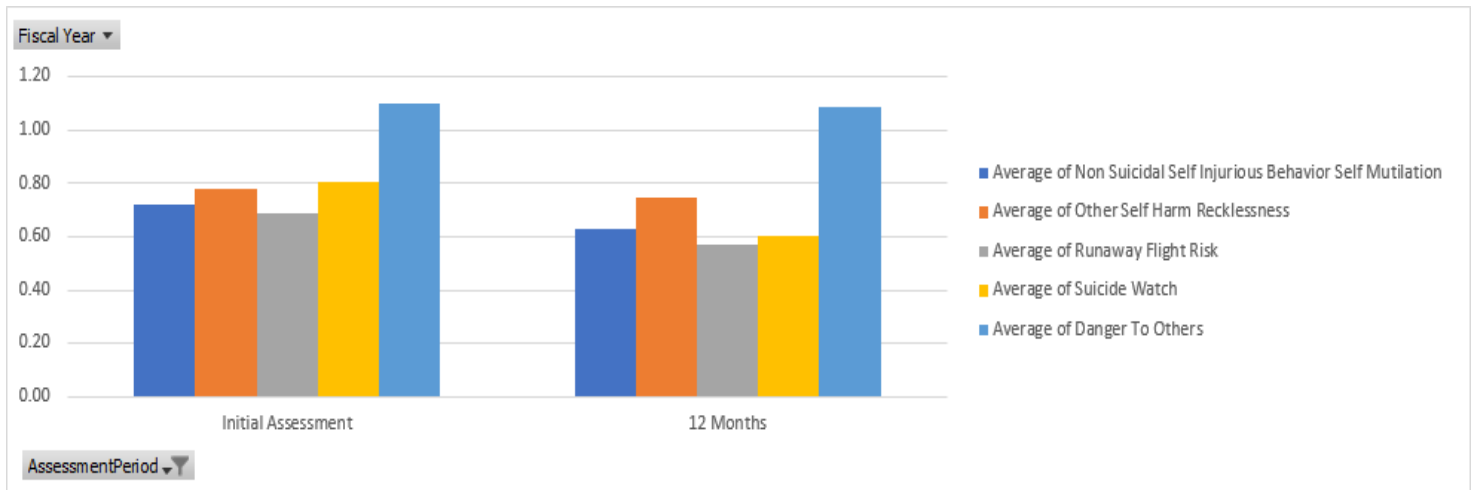
Key Outcomes

All the graphs represented below address average CANS ratings and organized by the Wraparound Outcomes as identified on the Wraparound Fidelity Index or WFI-EZ, a standardized fidelity monitoring tool. The graphs look at the average CANS rating per CANS item.

Youth Risk Behaviors

The graph below focuses on the CANS risk behaviors items of non-suicidal self-injury, other self-harm, runaway or flight risk, suicide watch, and danger to others. Of the youth enrolled in Wraparound since 2018 and according to the reporting parameters above, the CANS items in the risk behaviors domain appear to indicate the youth at the initial assessment and those at the 12-month assessment have average CANS scores at or about a CANS of 1. The Suicide Watch item is the closest to a CANS rating of 1 and the Danger to Others is the rating closest to a CANS rating of 2. This indicates that those averages that were close to a CANS rating of 1 indicate that the youth need in the CANS item may be present but may not require immediate action. The Danger to Others CANS item average appears to be closer to a rating of a 2 indicating that this is a need that would require immediate action or treatment planning to support the youth in Wraparound.

Graph 1: Youth Risk Behaviors *Initial Assessment n=475, 12-Month Assessment= 114*

Figure 1a: Youth Risk Behavior Averages

	Self-Injurious behavior	Other self-harm	Runaway	Suicide watch	Danger to others
Initial Assessment	0.72	0.78	0.69	0.81	1.10
12-month	0.63	0.75	0.57	0.61	1.09

Youth at Home

The Youth at Home graph 2 below addresses the CANS items Living Situation and Family Life Functioning. The CANS item Living Situation addresses how a youth is functioning in their current living situation. For example, a youth and caregiver may experience some difficulty dealing with issues that arise in daily life or a youth may experience profound problems with functioning in current living situation or is at immediate risk of being able to remain in living situations due to problematic behaviors.

Family Life Functioning addresses the relationships between youth and caregiver and any problems that arise within the family system. For example, a youth and their family may have problems in their relationship and arguing may happen but does not result in a major problem. Alternatively, the youth may be having serious and disabling problems with parents, siblings, and/or other family members including problems related to domestic violence and absence of any positive relationships.[3]
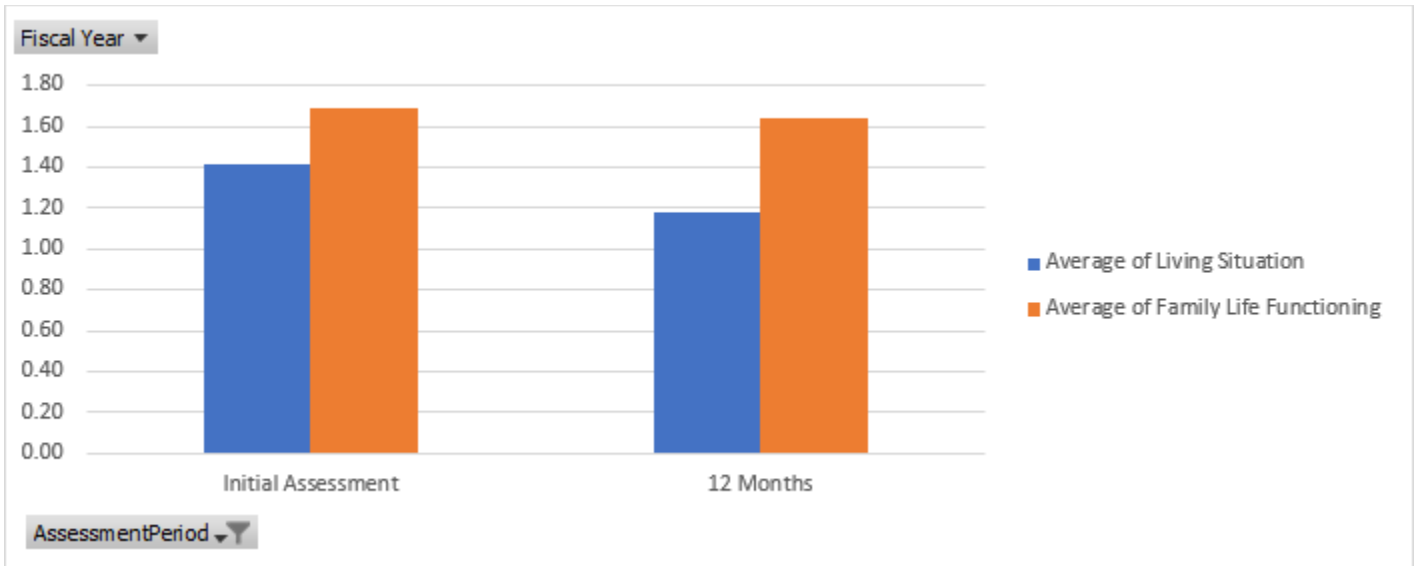
The data in the graph below suggests the youth at the initial assessment in Living Situation had an average CANS score 1.41 or almost in the middle between a CANS rating of 1 and 2. This value suggests that the present need likely needs treatment planning to meet the need. Conversely the Living Situation at the 12-month assessment indicates those you rated had an average CANS rating in this item of just under a 1.2 or closer to a 1.0 and may not be a need to plan around as it is closer to a CANS rating of 1.

The average CANS rating for Family Life Functioning at the initial assessment is at a 1.69 indicating that since it is closer to a CANS rating of 2 that this item for those youth at the initial assessment rating period likely experience a need that requires treatment planning. For the youth in the 12-month assessment, the average CANS rating was at a 1.64 still indicating that this rating is closer to a CANS of 2 suggesting that at 12-months these 114 youth experienced a need in the Family Life Functioning CANS item.

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[3] *Child and Adolescent Needs and Strengths Standard CANS Comprehensive 3.0 Ages 6 through 20*, Praed Foundation, 2021.

Graph 2: Youth at Home *Initial Assessment n=475, 12-month assessment= 114*

Figure 2a: Youth at Home Averages

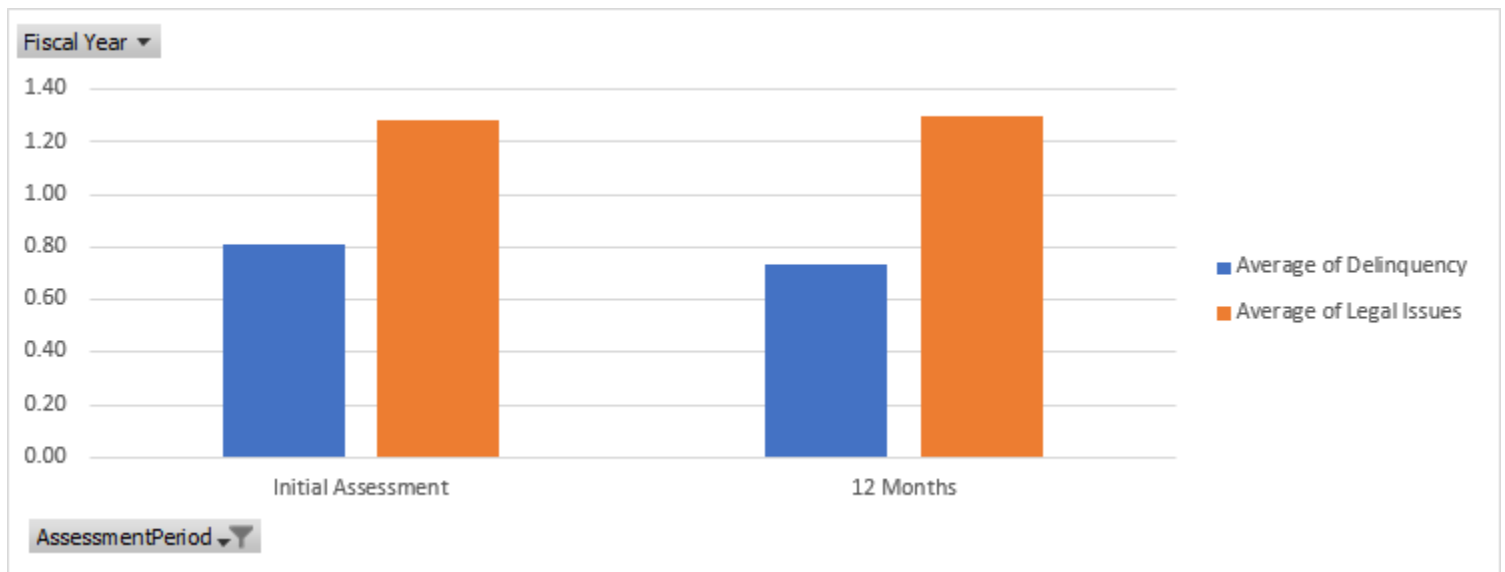|	Living Situation	Family Life Functioning
Initial Assessment	1.41	1.69
12-month	1.18	1.64

Youth Delinquency & Legal Issues

The Youth Delinquency & Legal Issues graph 3 below focuses on the Delinquency and Legal CANS items for youth by assessment period. The Legal CANS item refers to the youth's level of involvement in the legal system. This item may reference a youth's history of involvement but no current involvement or a youth that has serious current or pending legal issues that place the youth at risk of out of home placement. The CANS Delinquency item refers to any criminal behaviors or status offenses that result from the youth failing to follow required behavioral standards.

Both the initial assessment and 12-month assessment for the Legal Issues CANS item indicate average CANS ratings similarly rated. The initial assessment indicates a 1.28 average and the 12-month rating indicates a 1.30 average. These ratings suggest that for the youth assessed at these time periods that the CANS item average was one that perhaps didn't require immediate treatment planning, but that it was present and should be monitored.

Similarly, the Delinquency item average at the initial assessment and at the 12-month assessment were both under a CANS rating of 1; 0.81 and 0.74 respectively. As both average ratings are below a rating of 1, it suggests that the average rating of the youth at the assessment periods either didn't have Delinquency as a need for treatment planning or it was a need that was to be monitored.

Graph 3: Youth Delinquency & Legal Issues *Initial Assessment n=475, 12-Month Assessment n=114*

Figure 3a: Youth Delinquency & Legal Issues Averages

	Delinquency	Legal Issues
Initial Assessment	0.81	1.28
12-month assessment	0.74	1.30

Youth at School

The Youth at School graph 4 below captures the three CANS items related to the youth at school: School Achievement, School Behavior, and School Attendance. School Achievement refers to the youth's level of academic achievement. School Attendance refers to any issues related to attendance at school, and School Behavior refers to the youth's behavior in school settings.
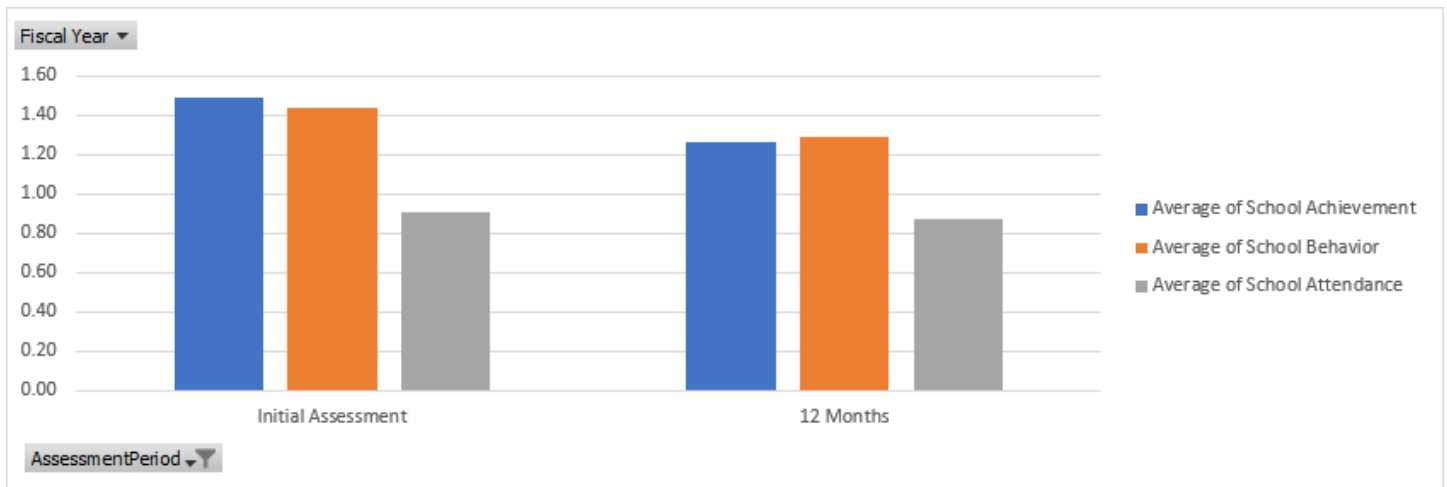
The average School Achievement rating at the initial assessment indicates a rating of 1.5 suggesting that the youth at this assessment period likely had needs related to School Achievement requiring treatment planning. The youth rated at the 12-month CANS indicated average needs closer to a rating of 1.0 suggesting these needs were present but perhaps did not require immediate treatment planning.

The average School Behavior ratings, like School Achievement at the initial assessment was a 1.44 suggesting similar findings as School Achievement. Youth may have needs requiring treatment planning. The 12-month average ratings identified as a 1.29 also suggesting similar findings to the 12-month School Achievement that the youth in the 12-month sample had some needs but that they did not require treatment planning.

The average School Attendance ratings for both the initial and 12-month assessments were both under a CANS rating of 1.0 (0.9 and 0.87 respectively) indicating that on average the need was there but did not require treatment planning around the need. All three of the CANS items above

Graph 4: Youth at School *Initial Assessment n=475, 12-Month Assessment n=114*

Figure 4a: Youth at School Averages

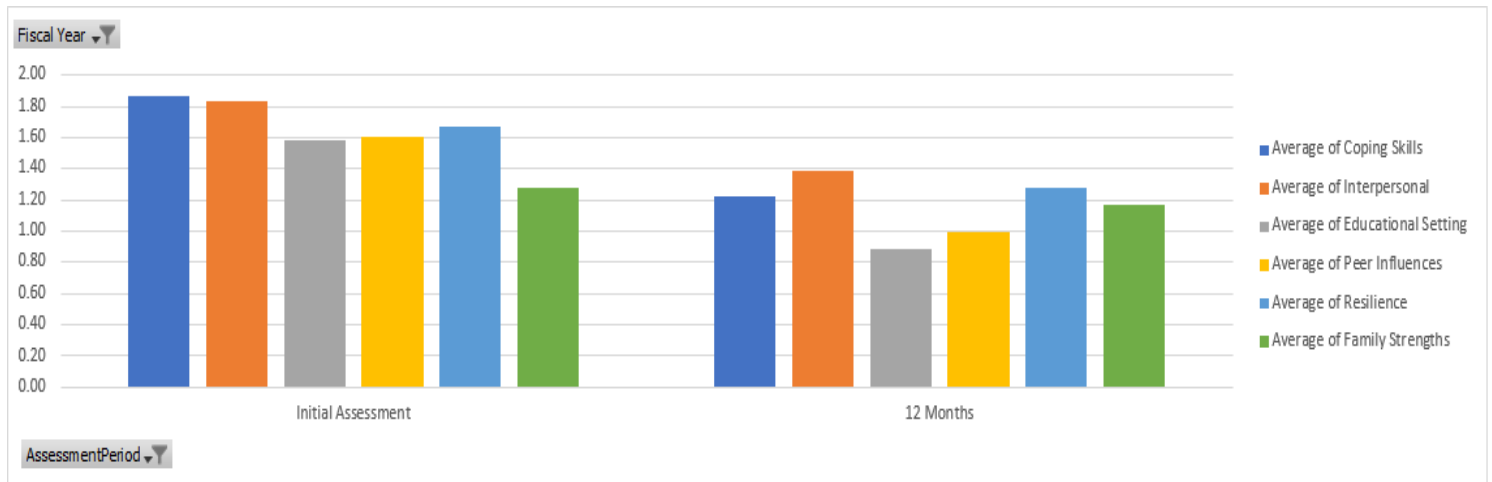|	School Achievement	School Behavior	School Attendance
Initial Assessment	1.49	1.44	0.90
12-month	1.26	1.29	0.87

Strengths

The Strengths graph 5 below represents the CANS strengths items that the Praed Foundation have identified to collectively provide evidence of good outcomes for youth. Please note that for these strengths CANS items, the higher the number on the graph, the greater the need to build the specific strength or evidence that there is not strength present per the Praed Foundations scoring rules for the CANS strengths items.

The average Strengths items of coping skills, interpersonal skills, educational setting, peer influences, and resilience all indicate strengths that are over a 1.5 and are closer to a CANS rating of 2. This suggests that the youth at the initial assessment likely had strengths in these areas, but that the strengths were not functional, or the youth was not able to use these strengths to meet their needs. For treatment planning purposes, these would be strengths to focus on and build so that the youth would be able to call upon them in times of need. The family strengths CANS item indicated that the youth at initial assessment likely had family strengths that were readily able to use to meet needs and is reflected in the 1.27 average rating. These would be strengths that can serve the youth to meet a need.

The average Strengths ratings at the 12-month assessment indicate that the youth had the strengths identified as possible resources to leverage in meeting needs that impact their functioning. All the average ratings were closer to a 1.0 indicating that these strengths were available for the youth to utilize to meet needs. Of note is education setting (0.88), and the family strengths (1.17) as they are the lowest average ratings at this assessment period.

Graph 5: Strength *Initial Assessment n=475, 12-Month Assessment= 114*

Figure 5a: Strengths Averages

	Coping Skills	Interpersonal	Educational Setting	Peer Influences	Resilience	Family Strengths
Initial Assessment	1.86	1.83	1.58	1.61	1.67	1.27
12-month	1.22	1.39	0.88	1.00	1.28	1.17

Analysis

Reviewing the CANS for Wraparound youth from 2018 through to June 30, 2022, provides good information about average CANS scores for the targeted CANS items in this report. In each outcome area the average scores for the initial and 12-month rating demonstrate which CANS items are likely to be a need or a strength for the enrolled Wraparound Youth. In table 1 below, the CANS items with the highest average rating (those that are closest to a 2 for needs and strengths, are listed below.

Table 1. CANS Items that are the highest Need		
CANS Item	Initial Assessment *n=575*	12-Month *n=114*
Needs		
Danger to Others	1.10	1.09
Family Life Functioning	1.69	1.64
Legal Issues	1.28	1.30
School Achievement	1.49	1.26
Strengths		
Coping Skills	1.86	1.22

The CANS items in table 1 indicate that Wraparound enrolled youth at each of these rating periods may have a need that requires planning or treatment interventions. While the data in the assessment periods are not comparisons or may not represent the same youth, it is interesting that average ratings were similar e.g., danger to others is a 1.10 and a 1.09 respectively.

Wraparound is an individualized planning process driven by the youth and family and while the CANS data in this report can be helpful to identify areas to focus on for treatment planning, it is ultimately up to the youth and family to identify their own prioritized needs which may be similar to the CANS items that tare rated 2 or a 3.

Areas for Improvement

Given the limitations of this report, areas for improvement are needed in the following areas.

- CANS data that can measure change over time for the Wraparound enrolled youth to better understand whether a youth improved following an episode of Wraparound Care Coordination.
- Analysis of the CANS Data for Wraparound enrolled youth that can target the youth that benefit most from this practice.
- An understanding of the most prevalent actionable items rated in the Wraparound enrolled youth.

Further analysis of the youth in Wraparound and their CANS is warranted to provide better understanding of the youth and their unique needs and strengths. Further analysis has been requested of the Praed foundation and is expected in October 2022.

Appendix A

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

Appendix B

The Ten Wraparound principles

Family driven & Youth Guided- Family and youth perspectives are intentionally elicited and prioritized during all phases of the Wraparound Process. The needs of the youth and family and youth determine how and when services are rendered, and goals, interventions and outcomes are mutually defined with them. Planning is grounded in the family member's perspectives, and the team strives to provide options and choices to create a plan that reflects family and youth values, preferences, and strengths.

Individualized- The team utilizes the strengths, assets, resources and needs of the youth and family to develop and implement a customized set of strategies, supports and services. Services are based on specific needs of the youth and family and not on a categorical intervention model. Services are not replicated for other families without an assessment of needs, strengths, and that family's vision.

Strength-based- The positive aspects of the youth, family and community must be a central part of individualized services planning. A strength perspective demands a different way of looking at individuals, families, and communities. They must be seen in the light of the capacities, talents, competencies, possibilities, visions, values, hopes, and dreams however, dashed and distorted these may have become through circumstances, oppression, and trauma. Team members believe that strengths ultimately meet needs.

Team Based- The Wraparound team consists of individuals committed to the family and youth through informal, formal, community supports and service relationships. The team should be no more than fifty percent (50%) providers. The youth and family decide who is on their team. Wraparound plans are co-authored by collecting all interested and invested parties who will work toward the youth and family vision.

Outcome based- The team ties the goals and strategies of the plan to observable and measurable indicators of success, monitor progress in terms of these indicators and revise the plan as necessary. The team is accountable to the family, other team members, to individuals, organizations and agencies, and the public. Team based outcome monitoring ultimately aids the community to demonstrate success as part of the overall Wraparound evaluation plan.

Community based- The Wraparound team implements service and support strategies that take place in the most inclusive, most responsive, and least restrictive setting possible. Services and supports safely promote child and family integration into home and community life.

Persistence The team agrees to change strategies as the needs of the youth and family change, to not deny care or services because of extreme severity of disability, and to never reject or eject the child and family from services. Despite challenges, the team persists in working toward the goals included in the Wraparound plan until the team reaches agreement that a formal Wraparound process is no longer required.

Culturally and linguistically responsive- The Wraparound process demonstrates respect for and builds on the values, preferences, beliefs, culture and identify of the youth, family, and their community. Services are designed, delivered, and incorporated into the religious customs, regional, racial, and ethnic values, and beliefs of the youth and family. They honor the unique customs, traditions, morals, and habits. Team members value diversity and are aware of and accept differences. They understand the role of their own cultural values to adapt practices to the cultural context of the youth, family, and community.

Collaboration- All team members work cooperatively and share responsibility for developing, implementing, monitoring, and evaluating the Wraparound plan. The plan reflects blending of team members' perspectives, mandates, and resources. Planning and services are comprehensive, addressing needs in all life domains and system mandates.

Natural Supports- The team actively seeks out and encourages the full participation of team members drawn from family members' network of interpersonal and community relationships. The Wraparound plan reflects activities and interventions that draw on the sources of natural supports. The team will help build natural supports if none exist.

References

Hensley, Spencer, Jennifer Schurer Coldiron, et. al. "Putting the CANS to use at the Wraparound program and system level". University of Washington Wraparound Evaluation and Research Team. Pg.8

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