

Advancing Systems + Enhancing the Workforce + Improving Outcomes

WrapSTAR:

An efficient, yet comprehensive approach to Wraparound implementation evaluation

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3rd Biennial Seattle Implementation Research Conference September 25, 2015







Today's Agenda

- Context: Care Coordination and Wraparound
- Development of WrapSTAR
- WrapSTAR Process and Products
- Lessons Learned and Next Steps
- Questions and Answers



The New York Times

The Opinion Pages

WORLD U.S. N.Y. / REGION BUSINESS TECHNOLOGY SCIENCE HEALT

EDITORIAL

Waste in the Health Care System

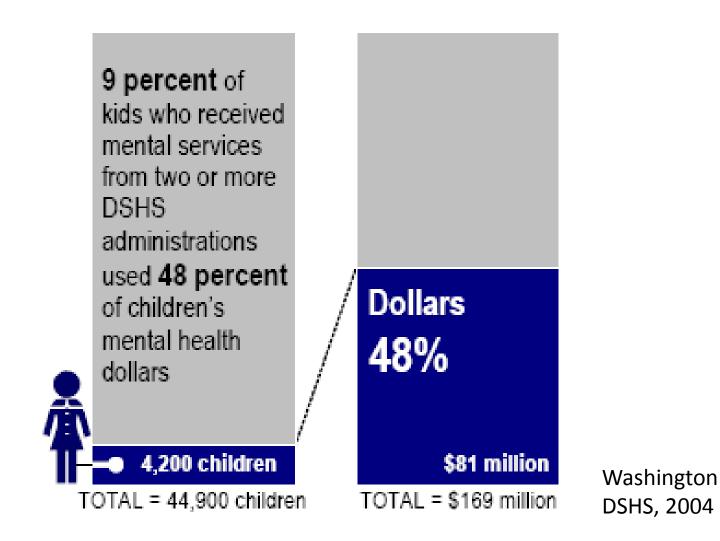
Published: September 10, 2012

A new <u>report</u> from a panel of experts convened by the Institute of Medicine estimated that roughly 30 percent of health care spending in 2009 — around \$750 billion — was wasted on unnecessary or poorly delivered services and other needless costs. Lack of coordination at every point in the health care system is a big culprit.

The panel cited studies showing that



Better coordination of care needed: In WA State, the 9% of youth involved with multiple systems consume 48% of all DSHS and HCA resources



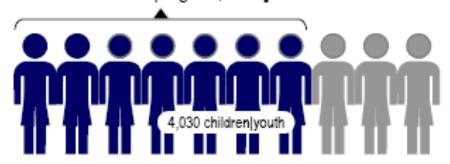
Better coordination of care needed: 68% of WA youths involved in multiple systems placed out of home in a given year

How many treated or placed away from home at some point in 2003?

Of those using mental health services from one DSHS program, 14 percent.



Of those using mental health services from more than one DSHS program, **68 percent**



Washington DSHS, 2004

Outcomes of integrated care and care coordination

- Burns et al (1996): Case management added to BH services as usual improves access and reduces residential stays
- Asarnow et al. (2015) meta analysis: Integrated health-BH care yields better behavioral health outcomes for youth
- Suter & Bruns (2009) meta-analysis: Significant, small to medium effects of wraparound on residential, symptoms, functioning
- CMS demonstration project (Urdapilleta, et al., 2011): Diverting youth to wraparound from residential facilities reduces costs by \$20,000 - \$40,000 / youth



Wraparound is a specified care coordination process for youth

- Intensive, individualized care planning and management process for multi-system involved youth with serious emotional and behavioral disorders
- Care coordination model of choice in U.S.
 - Initiatives in at least 48 states; implemented statewide in 26 states
 - Often connected to System of Care initiatives funded by SAMHSA



Increased consistency in wrap practice model and implementation support

- Model specification
 - Four phases, Ten principles
 - Six key practice elements
 - Family/youth driven
 - Effective teamwork
 - Needs-driven
 - Strengths-based
 - Natural and community supports
 - Outcome-driven
- Standards for implementation and system support
- Wraparound Fidelity Assessment System: suite of widely-used standardized measures
- National Wraparound Implementation Center

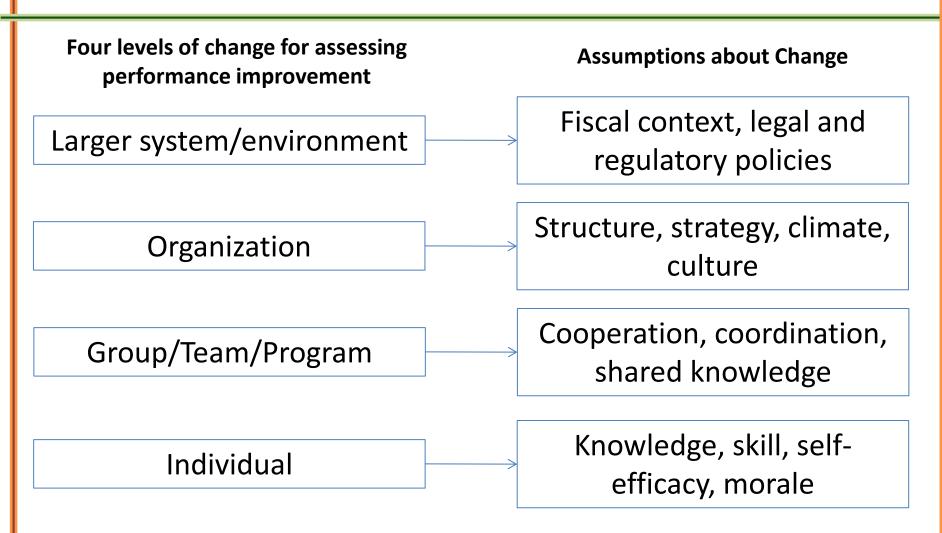


How can we improve Wraparound implementation?

- Wraparound practice and outcomes vary widely from site to site
 - Many sites focus solely on training staff and don't attend to other implementation drivers
- Sites lack the time or expertise to design and implement a comprehensive evaluation plan to inform quality implementation efforts
- Efforts to rigorously evaluate Wraparound's impact have been stymied by poor implementation (Bruns et al., 2013)



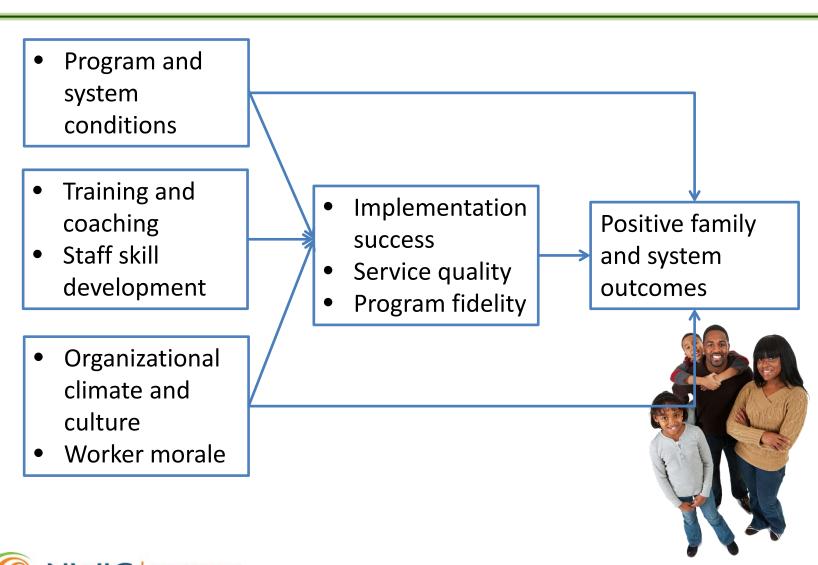
In general: Quality improvement requires attention at multiple levels necessary





Shortell, S. M. (2004). Medical Care Research and Review, 61(3 suppl), 12S-30S. Ferlie, E. B., & Shortell, S. M. (2001). Improving the quality of health care in the US and US: a framework for change. Milbank Quarterly, 79(2), 281-315.

In wraparound: Quality improvement requires attention at multiple levels necessary



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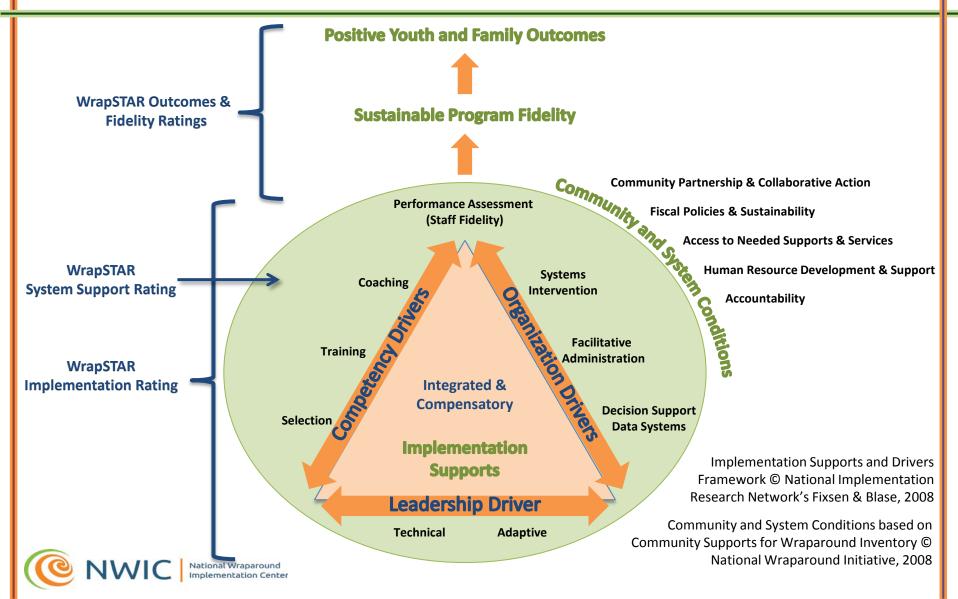


What is WrapSTAR?

- A systematic process for collecting and synthesizing a wide variety of information to create a comprehensive snapshot of how Wraparound is working within a community or agency
- Rooted in implementation science
 - Incorporates research-based implementation drivers, not just outcomes or fidelity
 - Increases participating sites' understanding of implementation best practices



Started by creating a comprehensive framework to focus data collection



Then developed indicators of high-quality practice

Example: Competency Subdriver Indicators

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Indicator		Definition
C1	Turnover	Staff turnover is reasonably low (less than 25% a year) so as to not disrupt the Wraparound provider organization's effectiveness.
C2	Relevant Experience	Staff and supervisors have relevant and appropriate experiences and attributes to carry out their job responsibilities.
С3	Selection Processes	The provider organization has high-quality written job descriptions and interview and hiring protocols for each of the relevant positions.
C4	Training Attendance & Apprenticeship	Staff and supervisors are required to attend trainings relevant to carrying out their job responsibilities. Attendance is tracked. Also, before taking on a full caseload, facilitators go through an "apprenticeship" where they shadow a more experienced facilitator or coach until they demonstrate enough competence (via objective measures) to practice on their own.
C 5	Training & Coaching Evaluation	Trainings are routinely evaluated and the information is used to improve training content and policies. In addition, coaching activities are routinely evaluated via a formal assessment of practice using a standardized data collection tool. There is a feedback mechanism to improve staff and coach performance based on the formal assessments.
C6	Coaching Activities	Staff have at least quarterly contact with a coach or a supervisor who serves as a coach and they perceive this contact to be beneficial and integrated into their practice. Coaching includes periodic practice observations or recordings and review of documentation.
С7	Performance Assessment	Staff performance is assessed at least every six months using objective measures of competence (e.g., observations, WFAS tools, etc.) and multiple data sources. The information is used to shape supervision and skill development, such as serving as a basis for certification, and improve coaching. Assessment is viewed by staff as a proactive component of skill development, and not seen as punitive.



Mapped indicators to existing, validated measures

- Standardized WFAS tools
 - 3 measures of fidelity and outcomes
 - Wraparound Fidelity Index
 - Team Observation Measure
 - Wraparound Document Review Measure
 - 1 measure of system support
 - Community Supports for Wraparound Inventory
- TCU's Survey of Organizational Functioning (Lehman et al., 2002)



Developed WrapSTAR-specific tools and measures to fill gaps

- Competency, leadership, and organizational drivers:
 - Caseload survey to gather information about youth outcomes and characteristics
 - Administrator survey asks about staffing, supervision, use of data, EBTs, etc.
 - Staff Interviews during site visit
 - Organizational document assessment tool reviews strategic plans, job descriptions, training logs, etc.



Each indicator has a scoring rubric to synthesize data from many sources

F5. BASED ON NEEDS

Definition: Services and supports are focused on addressing the high-priority needs of the youth as well as family members. If the services are not useful, the Wraparound plan is changed or barriers are addressed. The Wraparound process continues until needs are sufficiently met.

are sufficiently met.													
DATA SOURCES			K										
Data Source	Item on Data Source												
TOM 2.0	Based on Priority Needs subscale		Indicator descr	iption									
Wraparound Document Review	•	E1 & E2: The youth's needs/needs of each family member are articulated as the underlying reasons why problematic situations or behaviors were occurring, and were not simply stated as deficits, problematic behaviors, or service needs.											
Measure	E17 & E18: The Wraparound plan of care includes a mix of strategies that are clearly individualized to the needs of the youth/other family members.												
WFI-EZ	Items B5, B6, B21, and B23												
QUANTITATIVE DA	WORKSHEET												
Data Source	Neede	d Statistic	Data (write in)										
	ems relevant to the indicator from ach data collection instrument	Based on Priority Needs subscale score	3.60 (out of 5)										
Wraparou Document Review Measure		Average score on items E1, E2, E17, and E1	1.44 8: (out of 3)										
WFI-EZ	Average score on Ne	Average score on Needs-Based subscale items B5, B6, B21, and B23: (out of 2)											

Site's performance on each criteria (sometimes with some math)

(out of 2)



Data is translated into scores on each indicator criteria

F5. BASED ON NEEDS												
DATA SOURCE SCORING GUIDE (circle the appropriate score description for each data source based on the data above)												
Data Source	To Earn a Score of 0	To Earn a Score of 1	To Earn a Score of 2									
TOM 2.0	Score of less than 2.5.	Score of less than 3.5, but 2.5 or higher.	Score of 3.5 or higher.									
Wraparound Document Review Measure	An average score of less than 1.5.	An average score of less than 2.5, but 1.5 or higher.	An average score of 2.5 or higher.									
WFI-EZ	An average score of less than 0.5.	An average score of less than 1.5, but 0.5 or higher.	An average score of 1.5 or higher.									
FINAL INDICATOR SCORING GUIDE												
F5. Based on Needs	Sum of Criteria Scores	Total Possible Sum Score	Final Indicator Score									
rs. Based on Needs	4	6	67%									
			7									

Boxes shaded dark blue indicate the site's score from each data source

The orange-shaded box provides the site's final score on the indicator: the % of earned vs. total possible score



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WrapSTAR is broken up into five phases over five months

	WEEK																				
Phase and Task	-4	-3	-2	-1	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Preparation																					
Introductory Planning Meeting																					
Consent & Client Privacy Logistics																					
Staff Orientation																					
Consent Gathering																					
CSWI & WFI-EZ Administration Planning																					
Kick Off Meeting																					
Preliminary Data Collection																					
Administrator Survey																					
Caseload Survey																					
Survey of Organizational Functioning																					
CSWI respondent list																					
Wraparound Fidelity Assessment System T	ool	Adm	inis	trati	on																
Choose WFAS Sample and Approach																					
Comm. Supports for Wrap Inventory																					
Wraparound Fidelity Index (WFI-EZ)																					
Team meeting recordings for observ.																					
Site Visit (Two Days)																					
Staff Interviews																					
Family Record Review																					
Organizational Document Assessment																					
Data Synthesis																					
Data Analysis and Report Writing																					
Draft Report Available																					
Debriefing Meeting																					
Final Report Available																					



Sites receive several reports with increasing level of detail

Summary Report

 Synthesized and digestible results, along with detailed areas of strength and constructive suggestions for where and how to improve

Ratings Guide

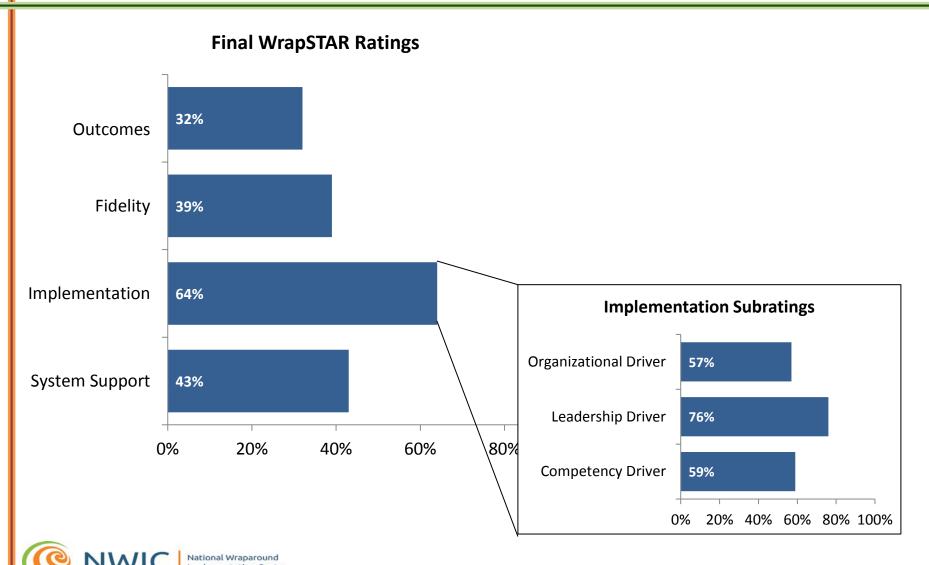
 Detailed information on performance for each of the criteria for all 45 indicators of high-quality practice within the 4 domains

Tool Subreports

 Tool-specific reports on the results of each survey administered, including comparisons to national means, when possible



Final ratings example—what are the takeaways?



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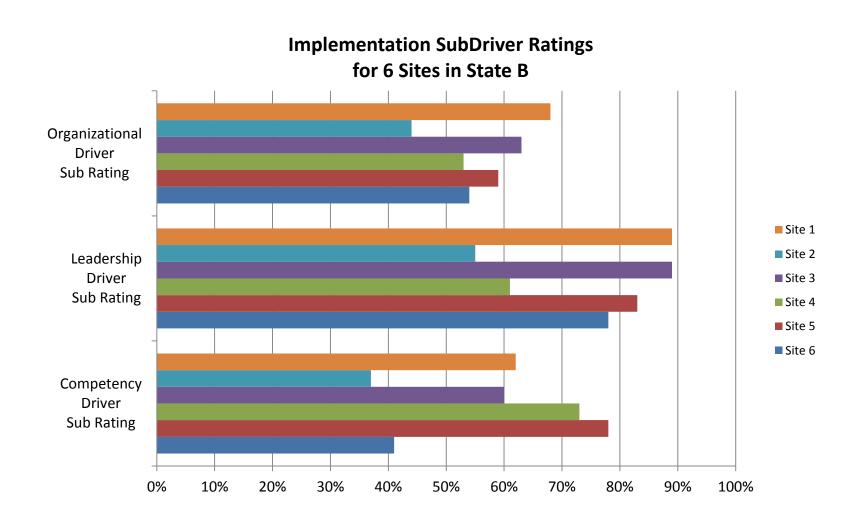


Eight sites have participated in WrapSTAR, with six more on the way

- One intensive pilot site
 - Worked out the logistics, feasibility, and developed needed supporting documents
 - Refined most of the measures and several indicators as a result of the process
- Six sites simultaneously participated as part of a state initiative; 6 more starting in October
 - Are subsequently receiving targeted evaluation TA
 - Collaborating with local Wraparound coaches to implement QI plans
- One state "apprenticeship" model being tested
 - UW WERT is training a state Institute for Excellence on using the WrapSTAR protocol to build local capacity



WrapSTAR is sensitive to differences in implementation



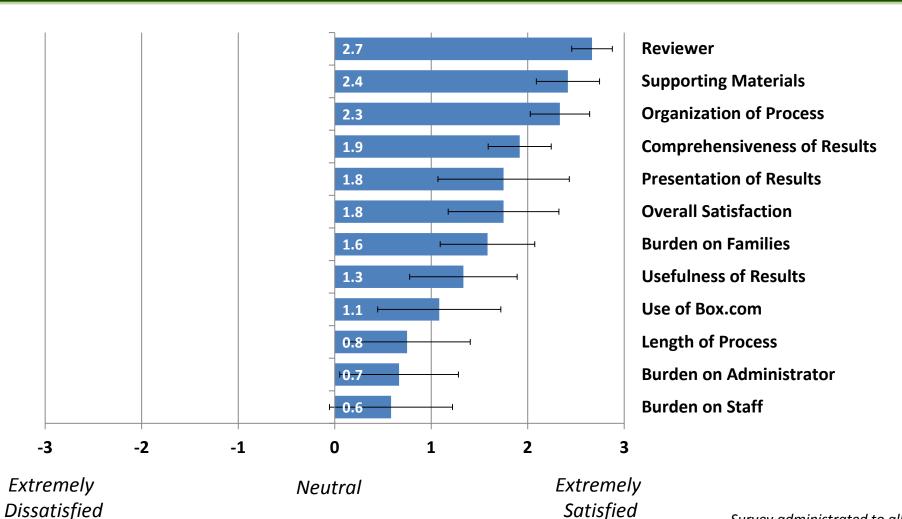


Preliminary feedback differs by role and site, and is mixed

- Initial pilot site:
 - Reported process to be easier than first expected
 - Initially enthusiastic about the results and QI plans, but, a year later, had made few changes
- Recent state partner:
 - Pleased with the process, found it to be an efficient use of resources
 - Contracted for a second year with more sites
 - Have used the results to inform state-wide implementation efforts and individualize TA for participating sites
- Participating sites in same state:
 - Wide-ranging levels of satisfaction
 - Many felt that it was too burdensome and time consuming, yet wanted more time to prepare
 - Some sites felt there was too much information to process and use



Sites' Mean Satisfaction with Aspects of WrapSTAR (n=6)





Survey administrated to all site liaisons; aggregated by site when more than one liaison responded

Lessons learned

- WFAS tools can be used in coordinated fashion, allowing for a comprehensive profile across multiple practice elements
- It is possible to collect a large amount of data efficiently, with relatively little burden on front-line staff, but does require significant effort on some administrators
 - Local administration of caregiver and youth WFI-EZs is doable and preferable
 - Team meeting video recording reduces reviewer burden, but increases staff anxiety and may increase burden
- Site's internal orientation to learning and feedback impact their experience with the process
 - Messaging and engaging stakeholders in the beginning is critical—tone and expectations filter down from the top





Next Steps





- Assess process for opportunities to reduce time and burden
- Re-engineer reports to be more straightforward and useful to participating sites
- Find ways to attend to readiness for change
- Continue to enhance measurement strength
- Further test the apprenticeship model of building local capacity to use the protocol
- Eventually use data to explore connections between the domains
- Could this be turned in to a self-assessment tool?



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Questions to ponder

- How objective can an organization be at evaluating itself?
- Can one really get a comprehensive picture of implementation that is "good, cheap, and fast"?
- Of the many domains and variables incorporated into WrapSTAR, which are most important to assess?

