



## WRAPAROUND FIDELITY INDEX, SHORT FORM

### YOUTH FORM

This survey is for a youth in Wraparound. We want to ask you about the experiences that you and your family have had as part of the Wraparound program so we can make it better. You do not have to answer any questions that you don't want to, and you may stop your participation at any time.

#### YOUTH & FAMILY INFORMATION

Form completed on:

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
MM DD YYYY

Wraparound Site Location:

\_\_\_\_\_

Youth/Family ID:

\_\_\_\_\_

Wraparound Care Coordinator ID:

\_\_\_\_\_

Are you currently enrolled in Wraparound?

Yes  No

How old are you?

\_\_\_\_\_

What is your gender identity?

Male  Female  Non-binary  
 Prefer not to say  
 Other: \_\_\_\_\_

*Optional* - Do you also identify as transgender?

Yes  No

Are you of Hispanic descent?

Yes  No

What is your race?

American Indian or Alaska Native  
 Asian  
 African American  
 Native Hawaiian/Pacific Islander  
 White  
 Multi-Racial: \_\_\_\_\_  
 Other: \_\_\_\_\_

#### SECTION A: WRAPAROUND INVOLVEMENT

For the following statements, please answer "Yes" if you agree or "No" if you disagree.

		Yes	No
A1.	Do you have a Wraparound team? (A Wraparound team is a group of people who make plans about how to help you and your family).	<input type="checkbox"/>	<input type="checkbox"/>
A2.	Does your team have a written plan (e.g., Wraparound Plan or Plan of Care) that says who will do what and how it will happen?	<input type="checkbox"/>	<input type="checkbox"/>
A3.	Does your team meet regularly (at least every month or so)?	<input type="checkbox"/>	<input type="checkbox"/>
A4.	Do you help make the decisions about your Wraparound plan and the services you get?	<input type="checkbox"/>	<input type="checkbox"/>



SECTION B: EXPERIENCES IN WRAPAROUND

For the following statements, please think about your experiences with Wraparound. Indicate how much you agree with each statement with the options, "Strongly Agree", "Agree", "Neutral", "Disagree", "Strongly Disagree", or "Don't Know".

		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
B1.	My family and I had a major role in choosing the people on our Wraparound team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B2.	There are important people who help my family and me who are <u>not</u> involved in my Wraparound team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B3.	At the beginning of Wraparound, my family and I described our vision of a better future to our team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B4.	Our Wraparound team came up with ideas for my plan that were different from anything that we tried before.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B5.	My family and team chose a few really important things to focus on.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B6.	Our Wraparound plan tries to help all members of my family, not just me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B7.	I sometimes feel like our team does <u>not</u> include the right people to help me and my family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B8.	At every meeting, our team goes over the progress that has been made on our needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B9.	Because of Wraparound, I feel like I get more support from friends and family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B10.	Wraparound has helped me build relationships with people who I can count on.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B11.	At every meeting, our team celebrates at least one success or positive event.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B12.	Our Wraparound team does <u>not</u> have any friends, neighbors, or extended family members involved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B13.	Wraparound has helped my family and me get connected to services that were really helpful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B14.	Wraparound helps me get involved in things that I like to do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B15.	Sometimes the people on our team don't do the things they're supposed to do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B16.	Some of the people on our team are people who are not paid to be there, like friends, family, or church members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B17.	Sometimes I feel like people on my Wraparound team don't understand me or my family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WRAPAROUND FIDELITY ASSESSMENT SYSTEM



		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
B18.	Some of the ideas that our Wraparound team comes up with are things our family can do ourselves or with help from friends and family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B19.	My Wraparound team helps me get along with my family, do well in school, and stay out of trouble.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B20.	Because of Wraparound, if there is a crisis or emergency, my family and I know what to do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B21.	Our team has talked about how we will know it is time to end Wraparound.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B22.	At team meetings, I have a chance to tell everyone how I think Wraparound is going.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B23.	I think the Wraparound process could end before my family's needs have been met.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B24.	Wraparound helps me and my family solve its problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B25.	Wraparound has connected my family to people and services that really help us.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION C: SATISFACTION

For the following statements, please think about your satisfaction with Wraparound. Indicate how much you agree with each statement.

		Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
C1.	I am satisfied with the Wraparound process in which my family and I have participated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C2.	I am satisfied with the progress I have made since starting Wraparound.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C3.	Since starting Wraparound, my family and I have started to meet our needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C4.	Since starting Wraparound, I feel like things have improved at home with my family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have any additional comments about your experiences in Wraparound or your satisfaction with Wraparound?

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