



WRAPAROUND FIDELITY INDEX, SHORT FORM

TAY CARE COORDINATOR FORM

This survey is for a **facilitator** involved in Wraparound. We want to ask you about the experiences that this client has had as part of the Wraparound program. 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:

Client ID:

Wraparound Care Coordinator ID:

Is this client currently enrolled in Wraparound?

Yes No

How old is the client?

What is the client's gender?

Male Female Transgender

Is the client of Hispanic descent?

Yes No

What is the client's race?

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

How many months has this client been participating in Wraparound?

Who has legal custody of the client (if applicable)?

- Two birth parents OR one birth parent & one step-parent
- Birth mother only
- Birth father only
- Adoptive parent(s)
- Foster parent(s)
- Sibling(s)
- Aunt and/or Uncle
- Grandparent(s)
- Friend(s)
- Ward of the State
- Other: _____

WRAPAROUND FIDELITY ASSESSMENT SYSTEM



SECTION A: WRAPAROUND INVOLVEMENT

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

		Yes	No
A1.	The client is part of a Wraparound team AND this team includes more members than just the youth and one professional (e.g., yourself).	<input type="checkbox"/>	<input type="checkbox"/>
A2.	The client has a written plan (Wraparound plan or plan of care) that describes strategies, action steps, and who is responsible.	<input type="checkbox"/>	<input type="checkbox"/>
A3.	The team meets regularly (at least every 30-45 days).	<input type="checkbox"/>	<input type="checkbox"/>
A4.	The Wraparound team's decisions are based on input from the client.	<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.	The client had a major role in choosing the people on his or her Wraparound team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B2.	There are people providing services to this client who are not involved in their 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 the Wraparound process, the client described his or her vision of a better future, and this statement was shared with the team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B4.	The client's Wraparound team came up with creative ideas for his or her plan that were different from anything that had been tried before.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B5.	With help from the Wraparound team, the client chose a small number of the highest priority needs to focus on.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B6.	The Wraparound plan includes strategies that address the needs of other team members, in addition to the identified client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B7.	I am concerned that this client's team does not include the right people to help him or her.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B8.	At every meeting, the Wraparound team reviews progress that has been made toward meeting each of the client's needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B9.	Through Wraparound, the client has increased the support he or she gets from friends and family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B10.	Through Wraparound, the client has built strong relationships with people he or she can count on.	<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
B11.	At each team meeting, the Wraparound 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.	The Wraparound team does not include any natural supports such as friends, neighbors, or family members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B13.	Through Wraparound, this client was linked to new community resources that were critical to meeting his or her needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B14.	The Wraparound plan included strategies that were linked to things the client likes to do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B15.	Members of the Wraparound team sometimes do not do the tasks they are assigned.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B16.	The Wraparound team includes people who are not paid to be there (e.g., friends, family, faith).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B17.	I sometimes feel like members of this Wraparound team do not understand or respect the client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B18.	The Wraparound plan includes strategies that do not involve professional services, and are things the client can do him- or herself or with help from friends, family, and community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B19.	I am confident that the Wraparound team can find services or strategies that help this client succeed in school and stay in the community over the long term.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B20.	An effective crisis plan is in place that ensures this client knows what to do in a crisis.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B21.	The Wraparound team and the client have talked about how they will know it is time to transition out of formal Wraparound.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B22.	The client gives feedback about how the Wraparound process is working for him or her at each team meeting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B23.	It is possible that the Wraparound process could end before the client's needs have been met.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B24.	Because of the Wraparound process, I am confident that the client will be able to manage future problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B25.	The client has been connected to community support and services that meet his or her needs	<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 this client's experiences in Wraparound?

WRAPAROUND FIDELITY ASSESSMENT SYSTEM



SECTION D: OUTCOMES

For the following statements, please answer "Yes" if the statement is true or "No" if the statement is not true.

Since starting Wraparound...	Yes	No	Don't Know
D1. Since starting Wraparound, this client has had a new placement in an institution (such as detention, psychiatric hospital, treatment center, or group home).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D2. Since starting Wraparound, this client has been treated in an Emergency Room due to a mental health problem.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D3. Since starting Wraparound, this client has had a negative contact with police.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D4. Since starting Wraparound, this client has been suspended or expelled from school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For the following statements, please select the degree to which the youth experienced each, if any, of the problems.

In the past month, the child or youth has experienced...	Very Much	A Good Deal	A Little Bit	Not at All	Don't Know
D6. Problems that disrupt home life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D7. Problems that interfere with success at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D8. Problems that make it difficult to develop or maintain friendships.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D9. Problems that make it difficult to participate in community activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have any additional comments about this client's experiences with Wraparound, or what has happened to this client since the start of Wraparound?

Thank you for your time and participation!