WK LAT MEDICAL HOME, SCHOOL & COMMUNITY WRAPAROUND TESTS OF CHANGE

Statement of Intent

Members of the West Kootenay Local Action Team (WK LAT) agree in principle that it is our collective responsibility to work together with an in-depth understanding of our shared context, values and foundations to ensure child and youth mental health and substance use services in the West Kootenay region are child, youth, family and community-centred; culture-centred; inclusive, collaborative and accountable; and focused on strengths, resiliency, healing, and wellness.

Tests of Change

Over the next eight months the WK LAT will work collaboratively with key provincial, regional and community partners to test a Family-Centred Practice approach through school, medical home and community-driven Wraparound Tests of Change. The type of Wraparound test, whether school, medical home or community will depend on where the referral originates from. Several members from the WK LAT are interested in leading these tests with additional support from the LAT, Wraparound Working Group, a Resource and Parent Coach, and visiting CYMHSU professionals from lead agencies. Approximately 25% of children and youth who are referred for CYMHSU services and supports in the West Kootenay region have moderate to complex needs and require coordinated service delivery. A small sample group from this patient population will serve as the referral source for the Wraparound tests of change below.

- 1. **Medical Home Wraparound Test** Family physician and LAT member Dr. Lilli Kerby has agreed to take on unattached youth with moderate to severe needs in the Rossland/Trail area, and work with a Resource Coach and visiting CYMHSU professionals to provide Wraparound care to these youth. This test is in alignment with the development of Primary Care Homes/Networks in the province. Dr. Cindy Loukras, Pediatrician, is also available to assist and can provide specialist care and/or case consultation in this test of change as well as the two listed below.
- 2. School Wraparound Test School psychologists and LAT members Todd Kettner (District #8) and Devon Palmer (District #20) have experience in coordinating Wraparound. When referrals come from either school district it may be appropriate to test Wraparound within a school based setting along with additional support from a Resource Coach and visiting CYMHSU professionals.
- 3. **Community-Driven Wraparound Test** This test of change allows the LAT Wraparound Working Group to engage directly with youth and parents, and community. The focus will be parent-driven and involve the identification of more informal community supports and peer networks. This test will also be supported by both a Resource and Parent Coach.

Outcomes & Indicators for Success

These tests of change will result in better outcomes for the youth and their families through:

- increasing the coordination and information sharing between all of the health, education, and social services involved in the life of the youth and their family;
- encouraging professionals to take part in shared service planning with other agencies;
- increasing informal social supports identified by the youth/family that can be activated in a service delivery plan;
- prioritizing service priorities identified by the youth/family rather than service priorities suggested solely by professionals; and
- formalizing care pathways through Local Agreements.

Family-Centred Practice

When services are delivered that are true to family-centred approaches to practice, family stress based on negative aspects of service delivery is greatly reduced. A consistent research finding, when evaluations are conducted of family-centred care, is a significant increase in service satisfaction of family members. Family-Centred Practice has been shown to reduce parenting stress and improve the psychological well-being of family members. Research on Wraparound programs that are delivered with high integrity with the model bring heightened efficiencies in the longer term and are more effective in service outcomes.¹

Primary Mechanisms of Change in Wraparound

- Wraparound care is best conducted within a Family-Centred Practice model
- Close partnership between a family and a team of professionals
- Being family and youth determined
- Using a collaborative team process
- Being grounded in a strengths perspective
- Identifying and mobilizing natural and community supports
- Being driven by accountability and results

¹ Dr. Barry Trute (2016). Excerpt from "A Handbook for Service Providers: Family-Centred Child and Youth Programs and Wraparound Care"

Some of the key practice implications for signatories of Wraparound Tests of Change:

- Seeking out and facilitating family, extended family and community participation;
- Working together in a way that honours and respects all perspectives, and recognizes the sharing of decision-making and responsibilities;
- Ensuring there is shared access to information in a transparent manner;
- Recognizing the importance of connections to community and culture, and encouraging and facilitating those connections;

• Utilizing trauma-informed approaches and understanding the impact of inter-generational trauma on youth, families and communities.

What specialized roles are needed for the Wraparound process with families:

Wraparound is intended to be a way of supporting individuals with a range of complex needs in any community. In addition, Wraparound is individualized to meet the needs of each youth and family who participates. Thus, across Wraparound programs, people in a variety of different roles – both professional and non-professional – play important roles in carrying out the Wraparound process with families and their children. Most typically, implementing a Wraparound project requires a cadre of individuals who are trained and supported to effectively lead the process.

In addition to system-level supports, Wraparound Tests of Change will require that people in key Wraparound roles: facilitators, clinicians, counsellors, physicians, family support partners, etc.—have the right skills and the right working conditions to do their jobs. This means that the lead agency or agencies responsible for providing Wraparound to families must also provide organizational supports for Wraparound, including maintaining right-sized workloads; empowering teams to make timely decisions; and ensuring that primary staff receive comprehensive training, support and skill development.

Trainings should be available on skill sets that may be critical to Wraparound as well as other components of a system of care. For example:

- Service planning and resource coordination that has high fidelity with the WA process
- Collecting family and community information consistent with FCP
- Developing empowerment and strengths-based methods within a FCP model
- Building family and youth-driven collaboration
- Effective team, meeting and plan facilitation

- Crisis and safety planning
- Mobilizing community resources and support
- Interacting with the service system and its context

Wraparound Tests of Change Implementation Process

The Wraparound Tests of Change will operate as a collaboration between members of the WK LAT and its Wraparound Working Group which includes a youth, parent, physicians, school psychologist and administrator, clinicians and other community agencies in Trail, Castlegar and Nelson. These partners will develop formal and informal policies, addressing, for example, questions about:

- who oversees the project,
- who makes decisions about what,
- which children and families are eligible for a Wraparound test (community, school or a medical home test)
- how the referral process works,
- how decisions will be made about which children and families will be accepted into Wraparound,
- how information will be shared,
- how Wraparound families will access services and supports from the community's array,
- how staff time will be made available for the activities that are part of Wraparound,
- how information will be stored and documented,
- what kind of training will be provided and for whom,
- how local assets and provincial enablers will be leveraged, and
- how existing and new care pathways will be formalized in a local agreement.

	PHASE ONE ORIENTATION January - August 2016	PHASE TWO IMPLEMENTATION September - March 2017	PHASE THREE ONGOING April 2017
MAIN COMPONENTS	 Basic history and overview of Family Centred Practice and Wraparound for LAT members Introduction to skills and competencies of service coordination Development of discussion paper Review of Local Agreement Templates 	 Engagement of select partners including youth and families Continued education and support on Wraparound and resource coordination for LAT members and community partners Triage/referral process agreed upon and referrals of youth and families to Wraparound tests begin 	 Intensive review of community process Evaluation of Local Agreements Assessment of Wraparound Model
KEY FEATURES	 Support from FCP & Wraparound Mentor Practice with tracer cases Consents developed and implemented Provincial protocols and assets embedded in Tests of Change Strengths based respect for youth and families is demonstrated at all times Wraparound resources developed and shared. 	 Experienced Resource Coach Structured Process Evaluation framework developed and baseline data gathered Experienced and knowledgable team of professionals who understand Wraparound and the resource coordination role Experienced Parent Coach Privacy and Information Guidelines tested and implemented 	 Data review and dissemination Next steps identified New tests of change identified
ENDS WHEN	 Training completed Tracer Cases documented and key learnings shared Partners agree in principle to testing period 	 Training completed and knowledge levels are assessed Care pathways confirmed for mild- complex and Local Agreements are formalized/signed Evaluations completed 	• Ongoing

Risks

ACTIVITY	PROBABILITY	IMPACT	MITIGATION STRATEGY
Voices of youth and families are absent in the development of Wraparound Tests of Change	Low	High	Parent and youth LAT member are part of Wraparound Working Group and through their FORCE roles have regular access to other parents/youth.
Time and workloads prevent partners from participating in Wraparound Tests of Change	Medium	High	Primarily focus on LAT members as partners, since they have been involved in Wraparound tracer cases.
Cross sectoral policies prevent implementation of Wraparound Tests of Change and/or the development of Local Agreements	High	High	Ensure tests of change are well positioned within mandates and work in partnership with senior leaders to ensure multi-lateral agreements are in place to support.
Lack of resources for Wraparound coordination	High	High	Document gaps in service and collect as baseline data. Work with Resource and Parent Coaches to strengthen informal supports and peer networks.

Key Partners

Kootenay Division of Family Practice/Shared Care

Andrew Earnshaw (Division ED) Rachel Schmidt (Project Lead) Jennifer Ellis (QI Lead)

Doctors of BC/Shared Care

Val Tregillus Christina Southey Rachel Laird Diane Goossens

Cross-Ministry Partners

WK LAT

Dr. Cindy Loukras, SP Co-Lead Dr. Lilli Kerby, GP Co-Lead Javier Gonzalez, Co-Chair - CYMH Team Leader Lois Lien, Co-Chair - Community Services Manager Tyler Exner, F.O.R.C.E/Youth Katherine Shearer, District Principal of Learning SD #20 Tina Coletti & Erica Ortega, Interior Health Devon Palmer, School Psychologist SD #20 Kris Taks, Circle of Indigenous Nations Society Mike Kent, Healthy Schools SD #20 Andrea Winckers, Healthy Schools SD #20/BC Cancer Agency Monique Lalonde, Parent/F.O.R.C.E/Selkirk College Ben Eaton, Director of Learning SD #8 Todd Kettner, Co-Chair - School Psychologist SD #8 Teresa Winter, Freedom Quest Liz Kunkle, Freedom Quest Jim Fisher, ED - Kootenay Family Place RCMP Dr. Barry Trute (Consultant)

Secondary Partners

Emergency Department

Evaluation Activities

The Wraparound Tests of Change evaluation will focus on how the project was implemented and operated (process evaluation) and the extent to which desired outcomes and impacts were achieved (outcome evaluation). It will be developmental, evolving with the project and keeping pace with the timing of the implementation of the project. Key indicators could include:

- Number of youth and families served by Wraparound tests
- Number of service providers/community partners engaged in and hours committed to the Wraparound tests
- Number of wraparound case meetings occurring with all partners present
- Degree of participation of families in Wraparound planning and implementation oversight
- Degree of coordination and information sharing between service providers involved in the life of the youth and their family
- Number of care pathways formalized through local agreements
- Number of hours and types of Wraparound training provided and resources shared
- Extent to which families engaged in the tests believe it is improving youth care and outcomes
- Extent to which service providers engaged in the tests believe it is improving youth care and outcomes

Data collection methods will include interviews and surveys with the service providers and families involved in the tests, attendance at LAT meetings, care pathway mapping with families and service providers, focus groups with the LAT and potentially service providers, and interviews with external partners.

An evaluation framework will be developed in July 2016 with baseline data collection starting in August 2016 and project data collection occurring between September 2016 and March 2017.

Reference Materials:

- WK LAT Wraparound Discussion Paper
- Key Learnings from WK LAT Wraparound Tracer Cases
- A Handbook for Service Providers: Family-Centred Child and Youth Programs and Wraparound Care
- A Guide for Family Members: Family-Centred Child and Youth Services and Wraparound Programs
- Family-Centred Service & Wraparound Care: A Brief Outline for Youth & Parents
- Draft Local Agreement Template