OFA PeerTA Technical Assistance Network
Confederated Tribes of Siletz Indians (CTSI) Technical Assistance Request #228
Summary Report

Prepared for
The Administration for Children and Families
Office of Family Assistance

Introduction and Background Information[1]

The Confederated Tribes of Siletz Indians (CTSI) is located roughly two and a half driving hours west of Portland in Lincoln County, Oregon. The Tribe has a large service area, including 11 counties in Oregon, with additional offices in Siletz, Salem, Portland, and Eugene. CTSI requested technical assistance (TA) from the Office of Family Assistance's (OFA) PeerTA Network (PeerTA) to assist in training their TANF and child welfare staff on the wraparound case management process – an intensive, individualized care management process for individuals with complex behavioral needs and/or significant work barriers. While a select few of CTSI's Tribal TANF/Child Welfare Coordination grant staff have undergone wraparound case management training (including facilitation techniques used during a wraparound meeting), the Tribe felt that training additional staff members could result in improved self-sufficiency outcomes among TANF and child welfare participants. Currently, CTSI has only one trained and active wraparound facilitator, Ms. Megan Hawley.

CTSI is now in its last grant year and anticipates refunding for another year. Ms. Hawley would like to sustain wraparound, but has had trouble given that she is the only facilitator. She has considered what programs would be appropriate to receive training and thinks self-sufficiency program workers should be included. She would like all programs to become acclimated to wraparound by formally training workers and would prefer to have facilitators in all four offices. Since most of the population is in Siletz and Salem, it would be ideal to have one trainer in Siletz and another trainer in Salem, and at least one trainer in one of the other two offices.

Therefore, CTSI requested a site visit in which an outside trainer visited the Tribal agency to provide wraparound training. They anticipated that staff would feel confident and comfortable after receiving formal training on wraparound facilitation. CTSI has seen positive outcomes using wraparound in its community and it seeks to formalize wraparound processes with more staff trained to facilitate these meetings.

During the TA kickoff and follow-up calls, CTSI discussed that they would prefer to use the train-the-trainer model, since CTSI is in the advanced stages concerning wraparound. The PeerTA team sent Ms. Hawley a list of potential wraparound trainers to consider; she narrowed down the list to several trainers for follow-up discussions, including trainers from the Center for Improvement of Child and Family Services, School of Social Work, Portland State University (PSU). Upon discussion with the PSU trainers, CTSI determined that they would be a great fit for their needs.

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[1] This information was collected from the Confederated Tribes of Siletz Indians TA Request and initial conference call with the TA Requestor.

Technical Assistance Plan Goal and Objectives
Based on the TA Request and subsequent conversation, the PeerTA team and CTSI developed a TA Plan with four objectives:

- To support CTSI in enhancing and expanding wraparound case management throughout their Tribe's service area and offices, and sustaining wraparound case management after their Tribal TANF/Child Welfare coordination grant ends, by training tribal members to deliver wraparound case management and to train others;

- To facilitate training for CTSI through a 3-4 day onsite visit focusing on wraparound case management. Training will be provided by consultant subject matter experts from the Center for Improvement of Child and Family Services, School of Social Work, Portland State University;
- To utilize a training approach as a collaborative partnership, providing training and support at the practice, systems, and administrative levels; and
- To instill a train-the-trainer model throughout the wraparound case management training that will train CTSI care coordinators to train others.

This summary report details the activities and lessons shared during the December 8-11, 2014 CTSI wraparound training event.

Day One – December 8, 2014

Systems of Care Introduction
Day One of the wraparound training focused primarily on providing a detailed overview of systems of care (SOC), cultural implications of wraparound, historical trauma and healing in Indian Country, as well as the ten essential principles of wraparound.

The trainers described SOC as the range of effective services and support systems for children and youth and their families who are at risk or experiencing health issues, employment barriers, or other self-sufficiency challenges. Founded in 1969 by the Joint Commission on Mental Health of Children, SOC focuses on helping families and individuals function well in all life domains. SOC implements services through a structured framework with a coordinated network of service providers, family, and community members, tailored to build effective, culturally appropriate partnerships that address self-sufficiency needs.

Wraparound is a general case management strategy under SOC. The trainers contrasted the wraparound approach with the more widely adopted "traditional" case management process. In traditional case management, numerous public agencies are involved in the support of a family,

each with an individual and sometimes contradictive self-sufficiency and compliance plan. In contrast, wraparound is "categorical," relying on deep, cross-agency partnerships that work from one family-centered self-sufficiency plan. The belief is that advanced collaboration, collective impact, and coordinated assessments will result in more effective and sustainable self-sufficiency outcomes.

The trainers added that wraparound is becoming more widely adopted, particularly within the state of Oregon where legislation is in place to implement wraparound statewide by the end of 2015.

Cultural-Based Wraparound
The next portion of the training focused on defining wraparound and clarifying its overall structure. The trainers began this session by giving a detailed overview of the history of the wraparound process as well as key principles of this approach. Trainers clarified that one can have wraparound without using a SOC framework, but using SOC, helps establish an organizational culture well suited for wraparound. The trainers also emphasized that wraparound is not a service, but rather a process – it is not about "fixing" someone; instead, the idea is to teach someone different strategies for managing crises.

The trainers next discussed the different job functions of a wraparound team. Primarily, there are four roles of a wraparound team: 1) System Partners and Providers; 2) Care Coordinator; 3) Youth and Family; and 4) Family Partner and Youth Partner. While teams form without including an individual in each of the four roles, the most important factor is the participation of youth and family. In addition to being the center of the wraparound care, these individuals also have the most insight into a family's needs, strengths, and motivating factors.

During the wraparound process, team members engage in many activities. The process usually starts with exploring the family's vision for how they want to overcome their challenges, followed by working with the family to develop a vision statement that envisions and captures "what 'better' looks like." Families write the vision as if these ideal conditions were true today. Next, teams develop a mission statement is developed so that everyone is clear on the goals and structure of the wraparound process. Case managers then conduct assessments to determine the family's/individual's needs and strengths. The assessment is primarily strengths-based, and these assets help drive the formulation of goals and anticipated outcomes. Team members next select a series of strategies to meet needs and build on strengths these strategies incorporate a series of action steps assigned to appropriate team members, and groups track progress to ensure to meet standards. During these stages, team members also create a crisis and safety plan (see below under *Crisis and Safety Planning*). Team members meet routinely to evaluate progress and revise strategies as needed. As the final stage in the wraparound process, team members develop a

transition plan, which outlines action steps, goals, and supports to access post-wrap-around (see additional information below under *Transition)*.

Historical Trauma and Healing in Indian Country
Trainers moved on to discuss the importance of understanding client culture. The effects of generations of spiritual, cultural, and physical trauma to those in Indian Country continue to affect Native people today, and the impact is sometimes so acute that the effects can result in Posttraumatic Stress Disorder (PTSD). Trainers also discussed "protective factors" for those at risk for historical trauma-driven PTSD. Some of these factors include participation in traditional ceremonies, family support networks, and building strong ties with the immediate tribal community. The trainers emphasized the importance of incorporating these protective factors as part of strategies/action steps in the wraparound process.

Ten Principles of Wraparound Activity
Trainers next led participants in a discussion around the principles of wraparound. Trainers broke participants into groups assigned with using local and cultural concepts to explain two of the principles to the rest of the participants. For example, in modeling the principle of collaboration, one group outlined the approach to building a cradleboard, a task traditionally relying on the collaboration of the entire family. Trainers listed the ten principles of wraparound (full descriptions of each principle were outlined at the beginning of Day Two – see below):

1. Family Driven Practice;
2. Team Based;
3. Natural Supports;
4. Collaboration;
5. Community Based;
6. Culturally Competent;
7. Individualized;
8. Strengths Based;
9. Persistence; and
10. Outcome Based.

Day Two – December 9, 2014

Day Two of the training focused on continuing the previous discussion/teaching activity involving the ten principles of wraparound.

Family Driven Practice
This principle recognizes that individuals who have been a large part of a youths' life are essential to the overall wraparound process and outcome. In addition, trainers discussed the principle of "family voice and choice," which emphasizes that family members have the most influence over the entire wraparound process and any subsequent behavioral changes. For some families, the idea that they are the main source of solutions to their challenges can be overwhelming – particularly for those from intergenerational poverty and those accustomed to

operating as only benefit recipients. In recognition of this possible state of mind, the trainers explained that sometimes this relationship shift to shared responsibilities and powers between case managers and participants can begin with "tiny pieces of choice," such as having the family decide where the team meetings will occur. The trainers repeated their mantra around what family driven practice encompasses – "nothing about us without us" – numerous times during the explanation of this principle.

Team Based
Ideally, wraparound teams should only include a maximum of 25-50% social service and community professionals. The family selects individuals to be on the team based on their commitment to supporting the family's desired outcomes. The trainers recommended looking outside the traditional family for supports in cases where the individual does not have a robust and supportive family network.

Natural Supports
The wraparound team actively pursues and encourages participation from a family's social and community networks. These individuals can include coaches, peers, educators, tribal elders, and successful wraparound graduates. There are usually three types of team members:

- Natural supports – individuals connected to the family by relationships;
- Informal supports – individuals connected to the family through community and/or social ties; and
- Formal supports – individuals that are system supports and compensated for their service.

Collaboration
Wraparound is a collaborative process that requires cooperation from all individuals on the team. Team members are required to work together and share responsibility for developing, implementing, monitoring, and evaluating the wraparound plan.

Community Based
Wraparound focuses on the notion that individuals should participate actively in the community and in turn, receive support from members and networks in their local area. Teams should work together to implement support strategies that utilize these community supports.

Culturally Competent
This principle demonstrates respect for and builds on the values, preferences, beliefs, traditions, and identity of youth, family, and their community. It highlights the importance of understanding, respecting, and incorporating elements of the family's culture into the wraparound process. Members of the team should be aware of the cultural norms of the family so that the wraparound plan accounts for family members' beliefs, values, and identity. Trainers

encouraged participants to become aware of family norms (spoken and unspoken rules), rituals, and traditions.

Individualized
Clients achieve the goals stated in the wraparound plan by developing and implementing a custom set of strategies, supports, and services. This principle highlights that the activities, goals, timelines, expectations, level of formality and overall composition of the wraparound process fits the family.

Strengths Based
The success of the wraparound team stems from the skills, knowledge, and insight of each individual. To elaborate on this principle, trainers conducted a mock interview, where they pulled strengths from different participants and discussed how their attributes could assist in a team environment.

Persistence
This principle stresses the importance of consistency throughout the wraparound process. In addition, it states that teams should be committed to achieving the agreed upon goals regardless of the individual's behavior, family circumstances, or place within the community.

Outcomes Based
This principle emphasizes that the wraparound team is accountable to all individuals involved in the process; these include the family, team members, individuals, and organizations. The wraparound team is responsible for achieving the goals stated in the plan.

Day Three – December 10, 2014

Strengths-Based Assessments
Day Three began with a summary on how to conduct strength-based assessments – particularly around approaches for drawing out different types of assets exhibited by the individual participating in wraparound:

- Descriptive: usually emerges in the form of an adjective describing an individual's attributes or features. For example, "She likes to play basketball;"
- Contextual: draws out strengths and attributes through storytelling and specific situations. For example, "He was able to make me laugh during a really hard time in my life;" and
- Functional: action based and relates to a specific skill, ability, or capacity. For example, "She can use jokes to make friends and keep them."

Trainers recommended that team members try to draw out all three asset categories when conducting an assessment. In addition, they stated the importance of both identifying and using strengths as part of the wraparound process.

Wraparound Phases, Activities, and Care Planning Processes
Trainers next led participants in a discussion on the four phases of wraparound:

- During Phase I, *Engagement and Team Preparation*, the goals are to: 1) orient the family and youth to the wraparound process to establish team ownership of the process; 2) stabilize crises by addressing urgent needs of the family participants so they can give their full attention to the wraparound process; 3) facilitate conversations with family participants to establish trust and a shared vision, and; 4) engage with other team members to set the stage for active and collaborative participation in the team.

- Phase II, *Initial Plan Development*, aims to promote team cohesion and shared responsibility towards the team mission and the goals of the youth and family. In contrast to traditional plan development, which involves assessing "problems" and plugging families into services, the wraparound approach offers a more family-centered and detailed process. As discussed above, wraparound plan development includes creating a family vision, developing a team mission, assessing strengths and needs, assigning action steps, and developing a crisis plan.

- In Phase III, *Implementation,* the purpose is to meet the needs of the youth and family and to build supports that reduce the need for formal wraparound. During this phase, team members engage in the activities detailed in the wraparound plan. The plan is Routine reviews and revisions ensure that the plan continues to meet the developing needs of the family when necessary.

- In Phase IV, *Transition,* during this phase programs prepare for the family to transition out of formal wraparound. Planning for transition begins at the earliest stages of wraparound, so by the time the family is close to reaching their goals; numerous options are available to help support the family to succeed outside the wraparound structure. A formal, written transition plan typically includes team members' contact information, assignments, and next steps with a "what if" approach (e.g., "What if the family loses housing?"), as well as details on how to access ongoing services/supports if necessary.

Following the discussion on the four stages of wraparound, trainers led participants through an activity involving developing a participant needs statement based on information collected during a mock strengths/needs assessment.

Day Four – December 11, 2014

Establishing Goals, Objectives, and Outcomes
The last day of the training began with a review of the needs statements that participants drafted at the end of day three. Trainers next transitioned into an overview of how to establish Goals, Objectives, and Outcomes (GOO) statements. GOO statements are useful tools for wraparound, because they help measure progress toward addressing a specified need. Development of GOO statements utilize SMART protocols:

Specific: linked to a rate, number, percentage, or frequency
Measurable: reliable process to measure the progress of achieving the GOO
Achievable: action items completed with a reasonable amount of effort
Realistic: ensuring the individual has the necessary skills to achieve a goal/task
Time Limited: the goal has a clearly stated beginning and end date

Participants drafted a number of GOO statements drawing from their active caseload, for example: "I will be drug and alcohol free within a six month period."

Following this activity, the group brainstormed a list of strategies and actions that could assist the participant in achieving the goal set out in one of the developed needs statements. Using role-play, one participant took on the role of client and selected a suite of activities from a strategies list. Trainers then engaged participants in the activity by providing them with potential services that could assist with the activities mentioned above.

Crisis and Safety Planning
Trainers next discussed the importance of developing crisis and safety plans early in the wraparound process. A crisis can represent a critical moment in the self-sufficiency pathway, and incidents often indicate that change is forthcoming and can often be negative if not properly addressed. Trainers then went on to discuss some of the factors that lead to a crisis, including new situations, medical issues, stressed relationships, and sudden changes in an individual's daily routine. Trainers provided tips on crisis planning and urged participants that proper planning could reduce the crisis frequency up to 50%. Some of the tips offered were anticipating a crisis based on past behavior and known antecedents, planning for worst-case scenarios, planning to meet the needs of the entire family, and scheduling a team meeting within three days following a crisis.

Team Meeting Facilitation Practice
The second half of the fourth day was reserved for practicing actual wraparound team meeting facilitation. Unfortunately, during the morning of the fourth day, CTSI staff announced the imminent arrival of a potentially highly destructive winter storm and began sending certain staff

home. Following this announcement, participants and trainers elected to suspend the remainder of the training due to safety concerns.

Next Steps
Since the training ended early, PTA staff agreed to facilitate scheduling a follow-up meeting with CSTI staff, the PSU trainers, and PeerTA leadership to outline next steps for delivering the final session of the training (team meeting facilitation practice).

Appendix A – Training Agenda

CONFEDERATED TRIBES OF SILETZ INDIANS
Wraparound Training Agenda

DAY ONE

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Monday, December 08, 2014

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9:30a	Morning Refreshments
10:00a	Welcome and Introductions • Opening Prayer • Opening Activity
10:00a	Introduction to Systems of Care and Wraparound • National, American Indian and Alaska Native and State Perspectives Introduction to Wraparound Specific to American Indian and Alaska Native Communities • Alignment of Wraparound and AI/AN traditional values • Details of Healthy Families Healthy Child Project/Tribal TANF-CW Coordination Grant
12:00p	Lunch
1:00p	Wraparound Principles • Each of the 10 Principles In-Depth • How does this Principle relate to your Tribal Community? • Strengths, Needs and Implications of Each Principle
2:30p	Break
2:45p	Wraparound Principles Continued
4:00p	Wrap-up and Discussion

Tuesday, December 09, 2014

8:45a	Morning Refreshments
9:00a	Welcome and Opening Prayer
10:00a	Wraparound Principles In-Depth (Cont'd)
10:30a	Break
10:45a	Wraparound Principles: In-Depth (Cont'd)
12:00p	Lunch
1:00p	Wraparound Phases and Activities

- A deeper journey through the 4 phases and activities of the Wraparound process
- Including Roles of Care Coordinator, Family Partner/Support, and Youth Partner/Support

2:30p	Break
2:45p	Wraparound Phases and Activities (Cont'd)

- Building a Cross-System Team
- Within the Tribe
- With other System Partners

3:30p	Wrap-Up and Discussion
4:00p	End

Wednesday, December 10, 2014

8:45a	Morning Refreshments
9:00a	Welcome Back and Opening Prayer • Follow-up Discussion
10:00a	Engaging Families • Gaining skills to effectively engage families, particularly from the Family members' perspective
10:30a	Break
10:45a	Assessing Strengths, Needs and Cultural Support • In-depth approaches to successfully assess strengths and needs of family including effective cultural and individualized strategies
12:00p	Lunch
1:00p	Creating an Individualized Plan of Care • Fostering skills necessary to complete an individualized Plan of Care specific to the Wraparound process by incorporating strengths, needs, outcomes and strategies into the Team planning process
2:30p	Break
3:45p	Crisis and Safety Planning • Provides an in-depth look at the crisis cycle and the implication for planning and skill development. Both proactive and reactive plans will be discussed
3:30p	Wrap-Up and Discussion
4:00p	End

DAY FOUR

Thursday, December 11, 2014

8:45a | Morning Refreshments

9:00a | Welcome Back and Opening Prayer
- Honors Participants (Video)
- Follow-Up Discussion

10:00a | Team Meeting Facilitation Skills
- Effective tips and tools for successful team meeting facilitation

10:30a | Break

10:45a | Team Meeting Facilitation Skills (Cont'd)
- Hands-on facilitation training with the use of a role-play to create a deeper understanding of the components of team meeting facilitation

12:00p | Lunch (propose a half-hour lunch)

1:00p | Team Meeting Facilitation Skills (cont'd)
- Hands-on facilitation continues with further emphasis on Care Coordinator, Family Partner/Support and Youth Partner/Support roles.

2:30p | Break

2:45p | Training Wrap-Up and Discussion
- Closing Prayer and Celebration

3:15p | Training Evaluations

3:30p | Adjourn