

# **1 OUTCOMES 018**

## **2 ABSTRACT**

(018) This 1-year, 'Before-after' pilot project will use the Wraparound planning process to bring at least 50 children with complex needs who have been placed outside of the Hamilton/Niagara region back into the region and hopefully back into their home community. Its purpose is to demonstrate the impact and cost minimization of the Wraparound planning process in developing a system of care approach for children with complex needs who have been placed in out of home and out of community care outside of the region by the five child welfare agencies across the Hamilton/Niagara region.

Study 2 is a multicentered five-year prospective randomized trial. The purpose of the multicentered five year randomized trial is to assess the comparative effects and expense of a regional Wraparound approach (versus usual approach) to the complex needs of children in the care of CAS, placed out of community, out of region, and in their own community.

### **2.1 ABSTRACT DATE / UPDATE**

March 29, 2005

## **3 SERVICE TYPE**

Wraparound Services & usual Children's Aid Society (CAS) Care

## **4 SERVICE DESCRIPTION**

Wraparound Services: Wraparound mobilizes the community to help children with complex problems and their families to find solutions so that they can stay together and have a better life. The Wraparound process provides a single plan of care, builds on the capacity of the family and the community to support the child in their home, and is flexible and able to be individualized to each child and family's situation.

The Wraparound planning process builds a team of individuals including friends, family members and professionals who work together to identify, provide and connect the child and family to the most helpful services and supports. The team, guided by a Wraparound facilitator, develops an individualized plan that builds on existing strengths. The process in essence "wraps" services and supports around the child and family!

A Community Resource Team (i.e., similar to but different from a Steering Committee) guides the work of the facilitator. It is made up of representatives of the formal child and youth services and the community as well as representatives from informal services from the areas of recreation, faith, business, and concerned citizens. The Chair of this team is often a locally recognized champion for children. Sponsoring agencies take care of all the programmatic and administrative aspects of the delivery of Wraparound in the community.

A facilitator-led team of individuals including friends, family members, and professionals identify, provide and connect the child and family to the most helpful formal and informal services and supports to meet their needs. Specific goals are identified. Flexible funds are used to purchase necessary in home and other support services in a timely fashion.

Usual CAS Care: The child and family are assessed by a caseworker who in turn refers children and families to appropriate formal community services, often with waiting lists and/or to out of home institution or foster-home services.

## **5 AGENCY CONTEXT: REFERRAL TYPES AND VOLUMES**

The region of Hamilton/Niagara has five Children's Aid Societies in Hamilton, Niagara, Brantford, Haldimand and Norfolk. The number of children/youth placed out of home and out of community care across the region was 440 in 2004. A majority of those face a number of mental health issues.

## **6 OUTCOMES SAMPLE TARGET**

50 guardian/children dyads - 10 children from each of the 5 CAS agencies, 4-18 years of age in CAS care with severe emotional and/or behavioural problems and now placed out of the region (Pilot Study), and placed out of community or at risk for being placed out of home (Study 2)

Study #2 - Information in the pilot study will be used to calculate sample size and number of centres for study #2.

## **7 DATA GATHERING POINTS AND METHODS**

Brief Child and Family Phone Intake at intake, 6 and 9 months

Wraparound Fidelity Index 3.0 at 6 and 9 months

Goal Alignment Scale at intake, 6 and 9 months

Parental Stress Scale at 6 and 9 months

Behavioral & Emotional Rating Scale at intake, 6 and 9 months

Child and Adolescent Functional Assessment Scale at intake, 6 and 9 months

Restrictiveness of Living Environmental Scale at intake, 6 and 9 months

Health and Social Service Utilization Inventory at intake, 6 and 9 months

Study 2 – the measures for study 2 will be finalized and described once assessed for reliability, validity and responsiveness to change in Study #1

## **8 START DATE**

February 2005

## **9 QUARTERLY UPDATES**

### **9.1 PROGRESS**

### **9.2 PROBLEMS**

### **9.3 REVISIONS TO PLAN**

## **10 INTERIM AND FINAL REPORT**

### **10.1 REFERRAL, DISCHARGE AND FOLLOW-UP PROFILES**

### **10.2 CLIENT SATISFACTION UPON DISCHARGE**

### **10.3 EFFECT SIZES FOR CASES WITH HIGH 'BEFORE' SCORES**

### **10.4 EFFECT SIZES COMPARED TO AVAILABLE BENCHMARKS**

### **10.5 SERVICE COST**

### **10.6 CONCLUSIONS**

## **11 CONTACT INFORMATION**

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