

Butler County Community Wraparound Report of Outcomes – FY12

Throughout fiscal year 2012, Community Wraparound provided service coordination to nearly 200 Butler County families. Evaluation of program data indicates that families involved with Wraparound continue to experience improved parent empowerment, improved child and family functioning and improved family stability. Families also reported satisfaction with the services they received while enrolled in Wraparound.

PROCESS OUTCOMES

Number of Children Served	199	No. of New Referrals	130
Gender		Source of New Referrals	
Male	60%	Mental Health Agencies/Hospitals	61
Female	40%	Children Services	22
Average Age	12.3 years	Parent/Self-Referrals	18
Race		Juvenile Justice Center	15
Caucasian	76%	Schools	9
Bi-Racial	12%	Other	7
African American	8%	Level of Care at Referral (New Cases)	
Custodian		Own Home	89
Single Parent	46.73%	Out of Home Placement	41
Two Parents	25.63%	Number of Closed Cases	107
Kinship Caregiver	23.62%	Reason for Closing	
TANF Eligible	163 (82%)	Family & Youth Success	62
On Individualized Education Plan	114 (57%)	Inability to Engage/Family Declined	34
School District		Other	11
Hamilton	36%	Families on Waiting List (6/30/12)	4
Middletown	23%	Average Wait Time for Facilitator	6 days
Lakota	13%	Average Length of Involvement	11 months
Fairfield	10%	No. of Families with Parent Advocate	121
Primary Diagnosis		No. of Youth in Planned, Out of Home Placement at any time during the year	16
Mood Disorders	64	No. of Youth at risk for Out of Home Placement	84
Attention/Disruptive Disorders	58	System Involvement or Area of Need for Children Served in Wraparound FY12	
Anxiety Disorders	26	Mental Health	182
		JFS	153
		Children Services	68
		Juvenile Court	66
		Board of DD	51

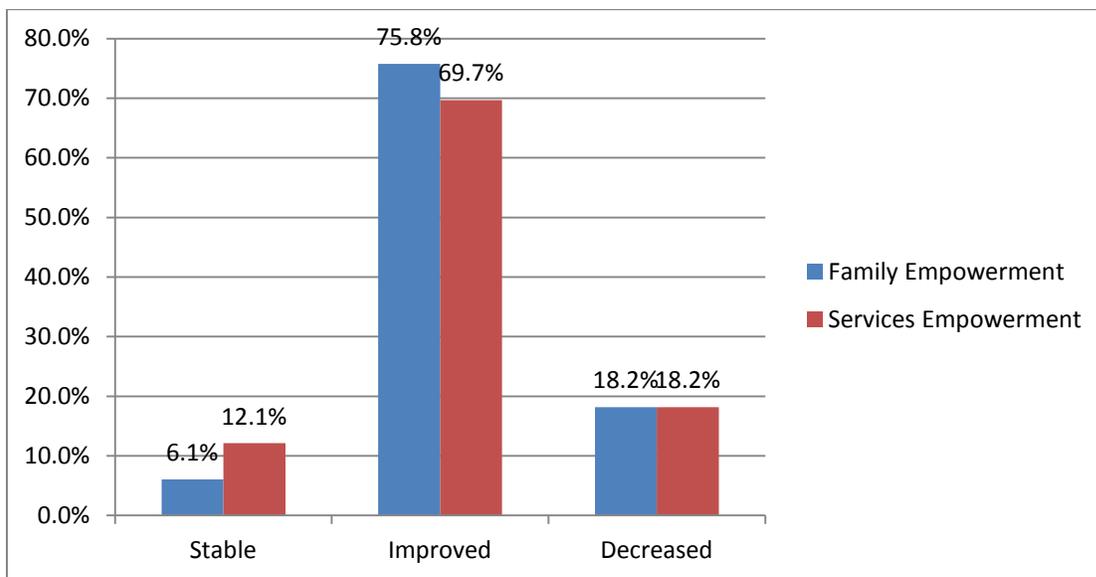
PROGRAM OUTCOMES

Improved Family Empowerment - Achieved ✓

Outcome: Families who participate in and complete the Wraparound process report improved empowerment related to their ability to meet the needs of their family and access needed services

Family Empowerment is measured at intake and discharge through administration of the Family Empowerment Scale (FES). The scale is completed by the parent or caregiver and measures the individual’s feelings of empowerment related to their family and child with special needs (“Family Empowerment” subscale) as well as with the services and supports in which they participate (“Services Empowerment” subscale).

Change in Parent/Caregiver Empowerment as measured by the Family Empowerment Scale (N=33):

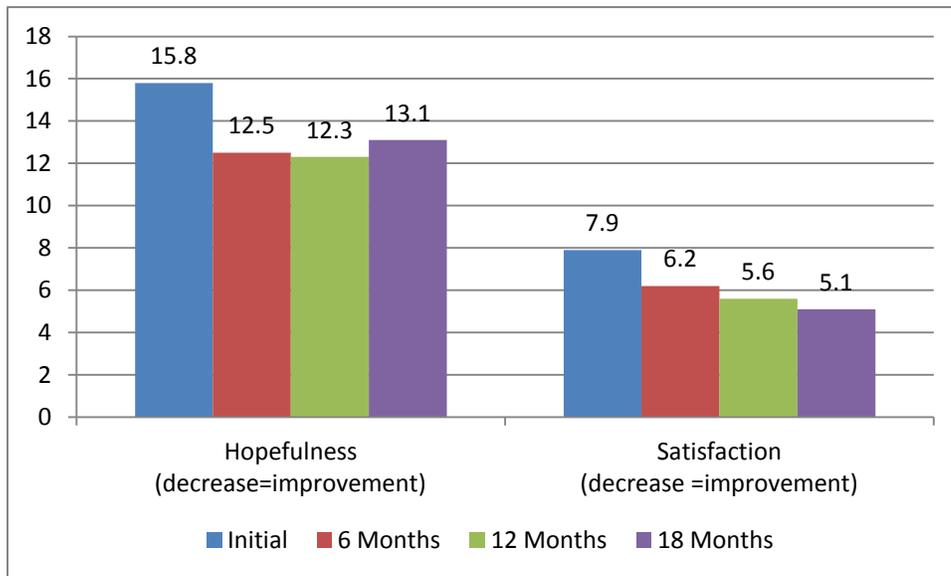


Specific questions on the FES showed a greater degree of improvement over time. Those questions with the greatest percentage increase in mean scores from intake to discharge are listed below.

Family Empowerment Scale Statement	Percentage Increase
I feel my family life is under control.	28.11%
I feel confident in my ability to help my child grow and develop.	22.21%
When problems arise with my child, I handle them pretty well.	20.72%
I know what services my child needs.	20.36%
I have a good understanding of the service system that my child is involved in.	18.92%
I know what to do when problems arise with my child.	18.01%
I believe I can solve problems with my child when they happen.	17.13%

Additionally, the Ohio Scales measures parent/caregiver hopefulness and satisfaction. Several questions within these subscales relate to the concept of parent empowerment, engagement and feelings of competence to address the needs of their child.

Change in Parent/Caregiver Hopefulness and Satisfaction average score as measured by Ohio Scales:

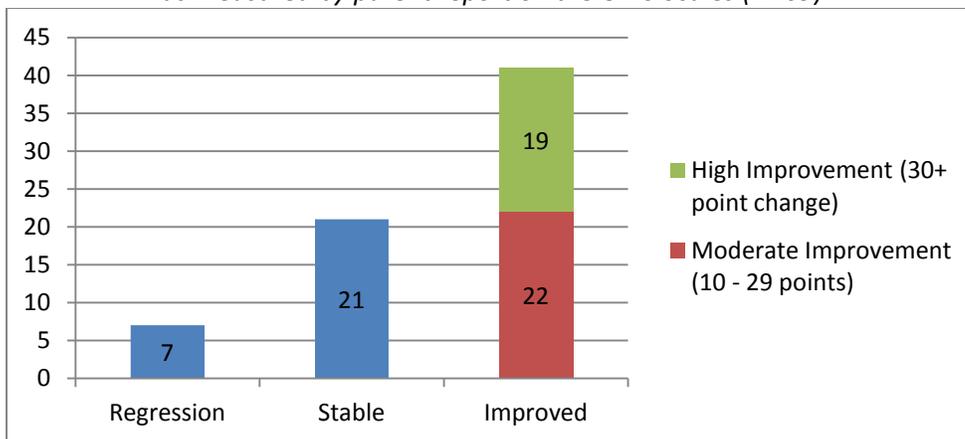


Improved Child Functioning - Achieved ✓

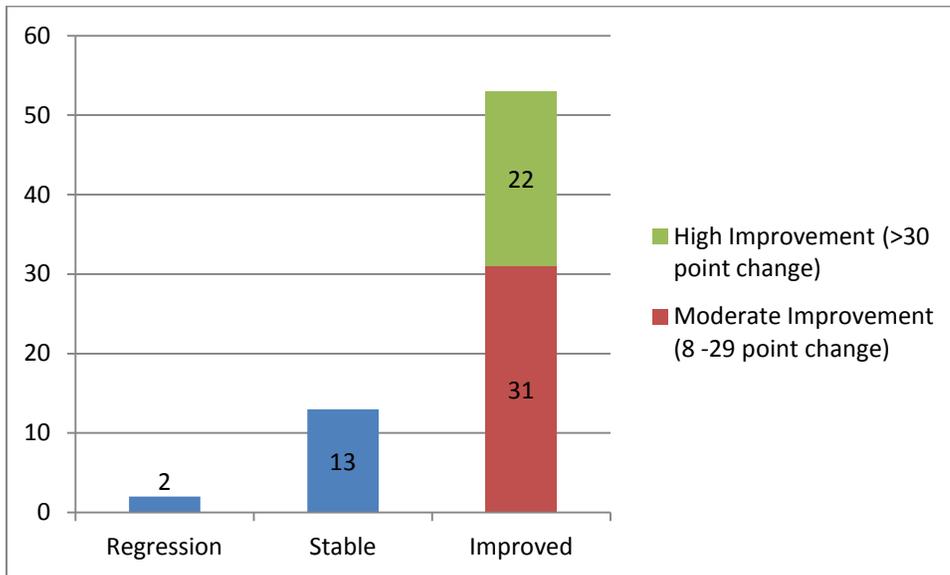
Outcome: Youth who participate in Wraparound demonstrate reduced problem behaviors, improved functioning and increased strengths

Improvement in child functioning is measured using the Ohio Scales and the Behavioral and Emotional Rating Scale (BERS-2). Administered at intake, six month intervals and at closing, the tools are completed by parents and age-appropriate youth. Analysis of the results of the parent reports on each of these tools shows that children’s functioning improves, problem behaviors decrease, and emotional and behavioral strengths increase during their engagement in the Wraparound process.

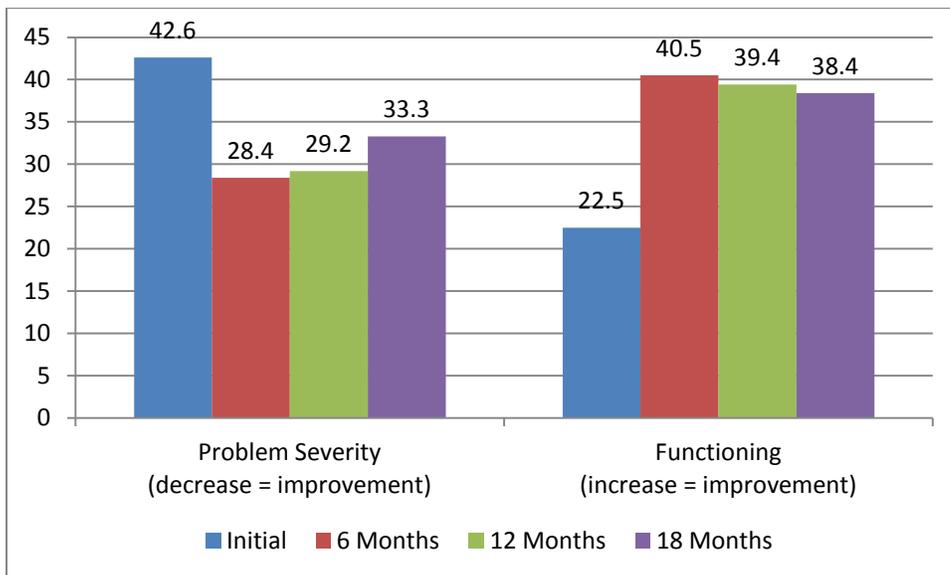
Change in Problem Behavior sub-scale (from initial to last report) as measured by parent report on the Ohio Scales (N=69)



*Change in Youth Functioning sub-scale (from initial to last report)
as measured by parent report on the Ohio Scales (N=68):*

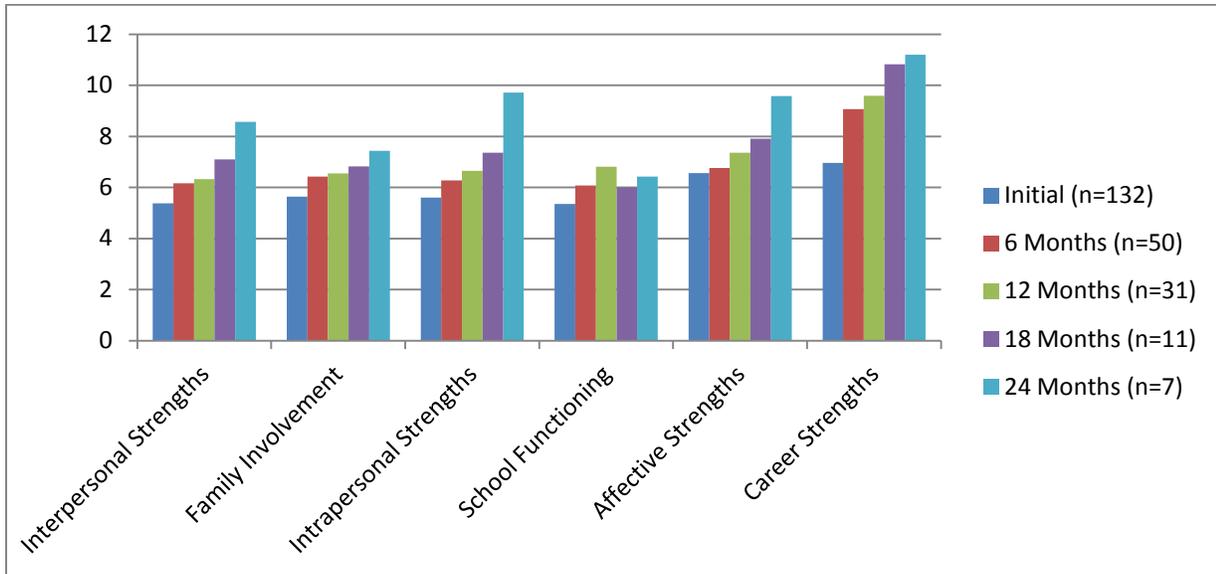


Ohio Scales average score, change over time (parent report):



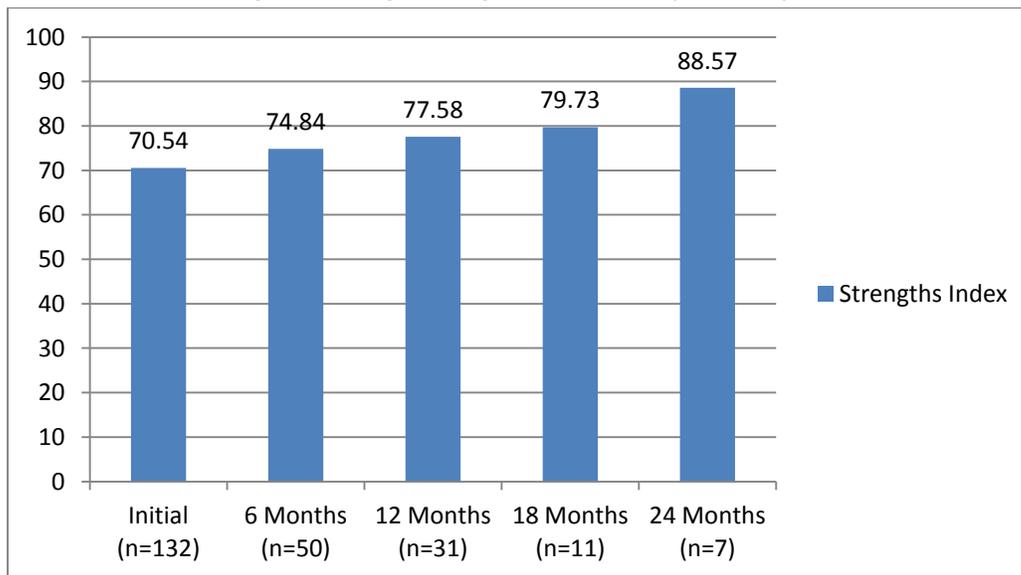
The BERS-2 is comprised of five domains of behavioral and emotional ratings with focus on strengths and resiliency. Emotional and behavioral strengths of children and adolescents aged 5 to 18 are measured in key areas related to school, family, relationships, and personal competence.

Change in BERS-2 average sub-scale scores (parent report):



The overall strength index of the BERS-2 has a range from 34 to 164, with scores below 90 indicating below average strengths. The graph below shows that the strength index for youth at referral is well below average (70.54). By 18 months the score is approaching average (88.57).

Change in average strength index score (parent report):

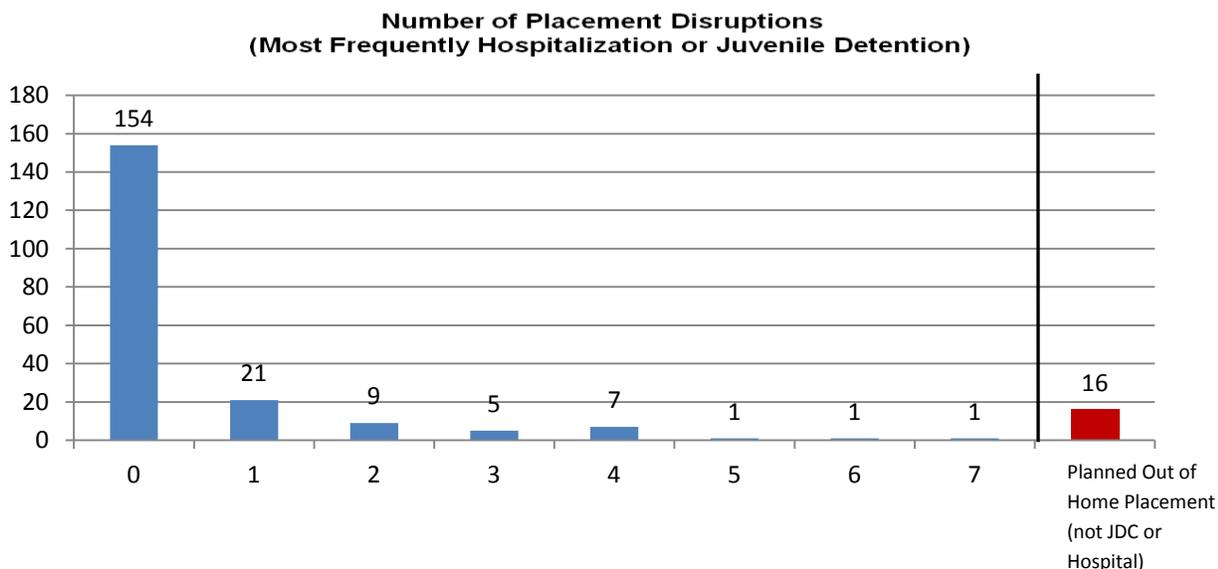


Family stability - Achieved ✓

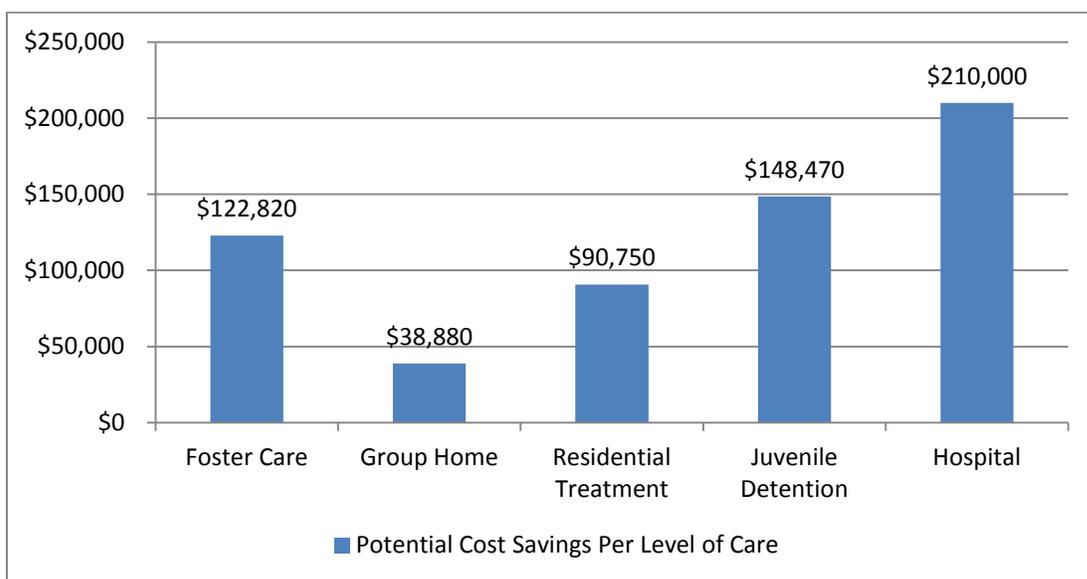
Outcome: Youth who participate in Wraparound experience few placement disruptions

Children referred to Community Wraparound have often experienced numerous placement changes due to their significant behavioral and mental health challenges. Therefore, a primary goal of a wraparound team may be the stabilization of the child’s placement with his family. Most placement disruptions are due

to either a brief psychiatric hospitalization or incarceration in the Juvenile Detention Center. Only 16 youth experienced a placement that was planned by the team and involved foster care, group home care or residential treatment.



Minimal use of out of home placement for those youth at risk resulted in potential cost savings for the child serving systems. The graph below is a conservative estimate of potential cost savings based on a monthly assessment of each child’s risk for out of home placement and the level of care for which they were at risk.



Outcome: Youth who participate in Wraparound are able to be successful in least restrictive settings

In addition to the prevention of placement disruptions, Wraparound teams also strive to maintain a child in the least restrictive setting in which they can be successful, preferably their own home or the home

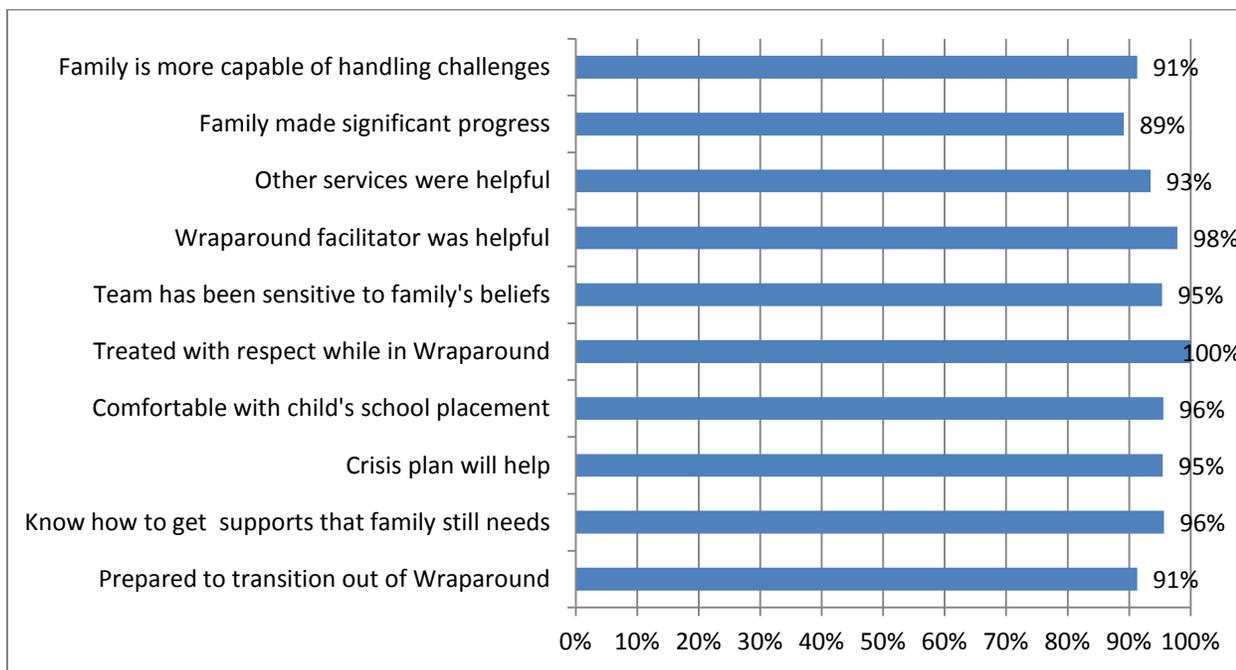
of a kinship caregiver. Of the 199 children served during FY12, 74% were living in their parent’s home or the home of a kinship caregiver at the time of the referral to Wraparound. For the 107 cases which closed for any reason during the year, 89% resided in their parent’s home or the home of a kinship caregiver at closing. In addition, 99% of these 107 children were in the same or less restrictive setting at closing as compared to when referred to Wraparound. For families whose case was closed due to successful completion of goals or child improvement, 100% of children were in the same or less restrictive placement.

Participants satisfaction and benefit - Achieved ✓

Outcome: Families who participate in and complete Wraparound report satisfaction and benefit from the process

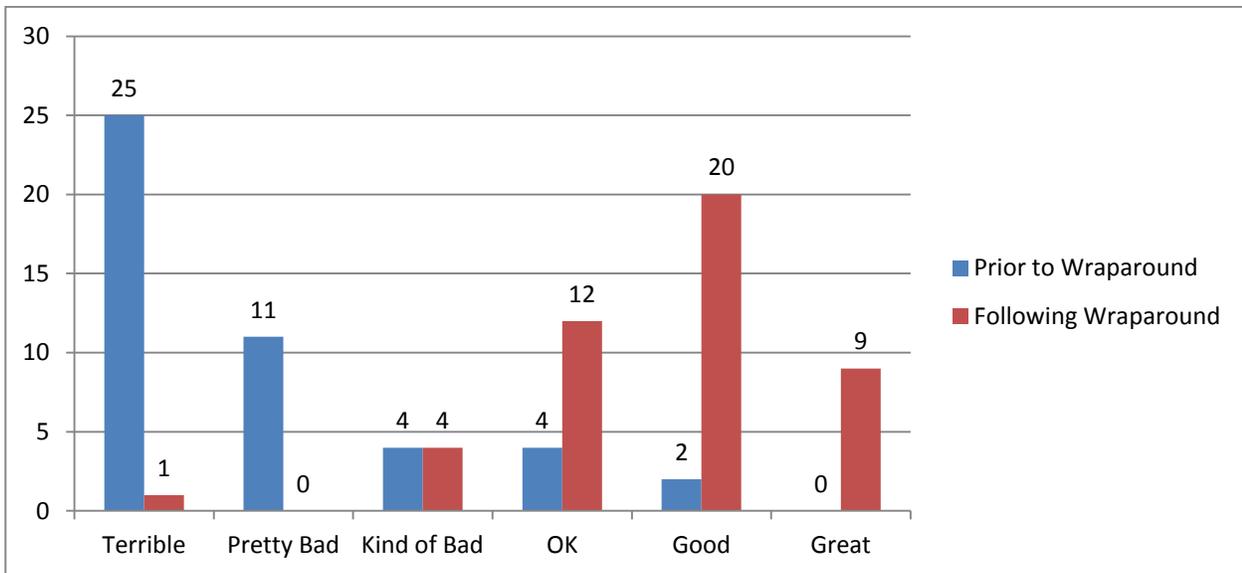
Overall family satisfaction with the Wraparound process is measured via a survey administered as families graduate from the process. Results of this transition survey from both parents and youth indicate a high level of satisfaction with the process.

Percentages of caregivers who report agreement with statements on the transition survey (N=46):



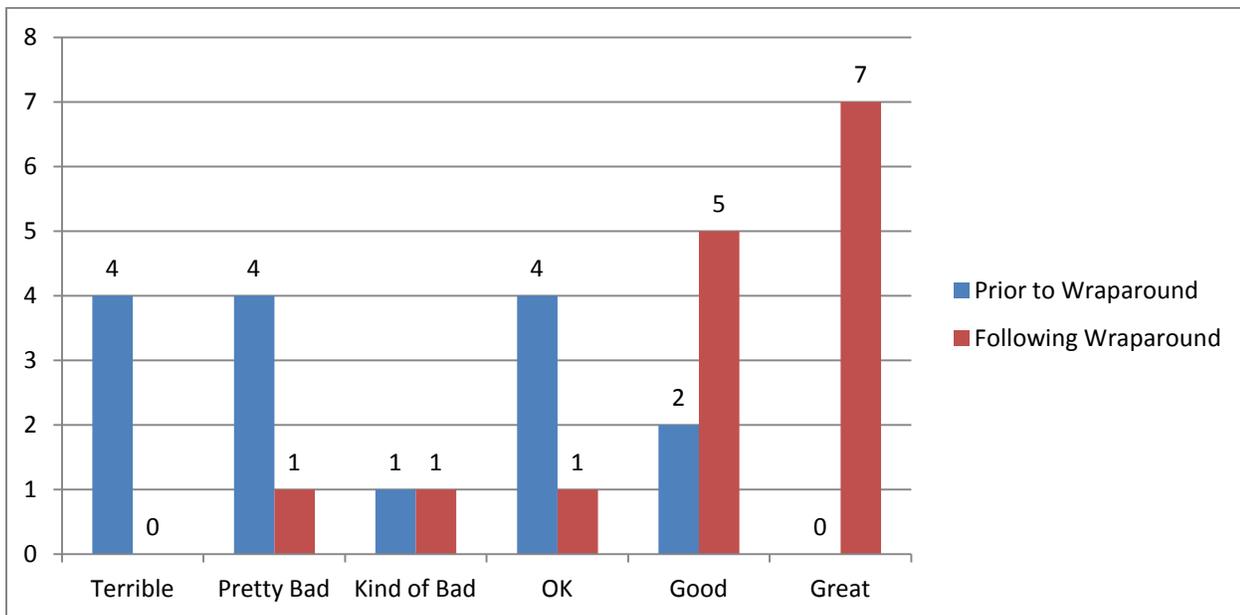
Parents were asked to compare their family’s functioning prior to and following their involvement. Of the 46 families who completed the survey, **100% reported stable or improved family functioning at the time of discharge.**

Change in Family Functioning as Reported by Parents/Caregivers (N=46)

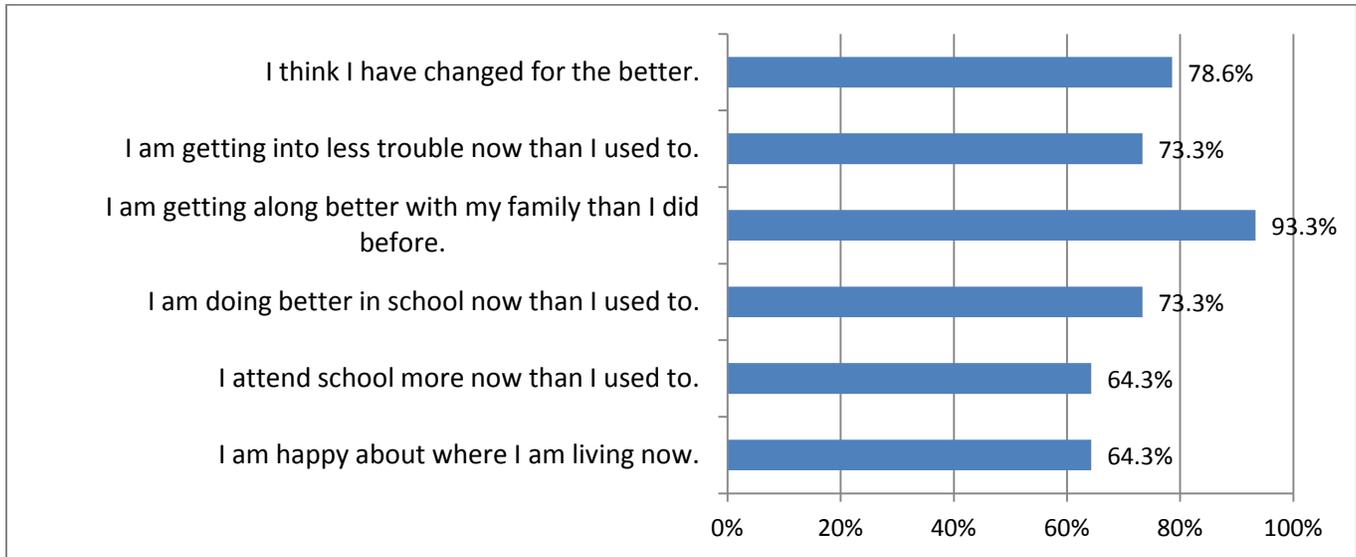


Youth were also asked to rate how they felt they were doing when transitioning from Wraparound and to compare their family functioning prior to and following their involvement. **100% reported stable or improved family functioning at the time of discharge.**

Change in Family Functioning as Reported by Youth (N=15)



Percentages of Youth who report agreement with statements on the transition survey (N=15):



Services provided during the Wraparound process

Outcome: Families involved with Wraparound benefit from a broad range of informal and formal supports

Through the Wraparound process, teams develop individualized service plans to meet the needs of children and their families. One way to meet needs is through the provision of supportive and/or therapeutic services. These services may be provided by members of the families natural support network or by an agency offering professional services. The following table contains a list of professional services which were most frequently accessed by families while in Wraparound:

Service Provided:	Number of Families:
JFS - Medicaid/Cash/ Food Stamps	64
Butler County FCFC Parent Partner	63
St. Joseph Orphanage - CARE Case Management	45
Butler County Juvenile Court - Probation	24
Butler County Children Services	22
Butler County Board of Developmental Disabilities - Service Coordination	18
Faith-Based Supports	15
Butler Behavioral Health - WINGS Program	15
St. Aloysius - Med/Som Clinic	15
YMCA Membership-Camps	14
Cincinnati Children's Medical Center - Outpatient Therapy	14
Butler Behavioral Health – Outpatient Therapy	12
JFS – Medicaid Transportation	11
St. Aloysius - Outpatient Therapy	11
Butler County Board of Developmental Disabilities - Family Focus Program	10

In addition, families may access Mental Health Flexible funds or Family Centered Supports & Services (FCSS) funds for services and supports which may not be readily available or for which there is no identified funding source. Authorized by the Community Resource Team, these flexible funds allow for increased creativity and access to a broader array of supports in the development of the team’s response to identified family’s needs.

