

WRAPAROUND “WRAP”/INTEGRATED CASE MANAGEMENT

WRAPAROUND “WRAP”/ICM is a process for service delivery that is founded on the belief that all individuals/families have a central role in the process of planning.

WRAP/ICM is both a philosophy (set of guiding principles) and a process (way of delivering service). WRAP/ICM involves community service providers and individuals/families in a team process that focuses on strength-based action planning.



WORKING TOGETHER HANDBOOK

The WRAP/Integrated Case Management (ICM) process is supported by the dedicated people of Prince George and the surrounding areas

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1. PREFACE

1A. Purpose of Handbook

The purpose of this Handbook is to provide information regarding how to use the WRAP/Integrated Case Management (ICM) process to empower individuals/families to address their needs and service planning. A common understanding of WRAP/ICM principles will guide practice and help individuals, families and service providers to work together effectively.

1B. Acknowledgements

The Ministry of Children and Family Development, School Districts and other community service providers have been utilizing the WRAP and ICM process for many years. The development of the current training and this Handbook is due to the energy and passion of dedicated “champions” in this community who believe in strength-based action planning for individuals/families. Individuals, young and old, deserve a voice in their lives.

1C. Ongoing Feedback

This Handbook is a compilation of ideas and practices from many different resources. Although the information in the Handbook is designed to be useful, the actual practice of WRAP/ICM determines what is actually most helpful. We hope that those participating in WRAP/ICM will provide feedback to the WRAP/ICM Planning Committee regarding changes, additions or deletions to the training and/or this Handbook. The interactive nature of WRAP/ICM will become a truly ‘community owned’ initiative and develop into a model that will become an efficient, effective, respectful and accountable way to provide individuals/families with the services they need.

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2. INTRODUCTION TO WRAP/INTEGRATED CASE MANAGEMENT (ICM)

2A. Frequently Asked Questions

What is WRAP/Integrated Case Management (ICM)?

WRAP/ICM is a process for service delivery that is founded on the belief that all individuals/families have a central role in the process of planning. Although different organizations use different terms to describe the planning process for individuals, the Prince George and area WRAP/ICM Planning Committee agrees to use the term WRAP/ICM. Previous draft handbook documents used the term WRAP/ICM, however, feedback from those that have taken the training and used this handbook, the term WRAP/ICM is a better description of the process.

WRAP/ICM is both a philosophy (set of guiding principles) and a process (way of delivering service). WRAP/ICM involves community service providers and individuals/families in a team process that focuses on strength-based action planning.

What is the relationship between WRAP/ICM and Careteams?

WRAP/ICM can perhaps be viewed as generic reference to an individual/family-centered, collaborative approach to providing service, similar to the way the term 'car' refers to a generic type of vehicle. There are different makes and models of WRAP/ICM 'cars' such as 'WRAP', 'Careteams', 'Collaborative Action Planning', and 'Family Group Conferencing'.

What is a WRAP/ICM team?

A WRAP/ICM team is an individual/family-centered group of individuals (individuals/families, individual/family-support persons, community members, and service providers) who meet on a regular basis to coordinate service planning. Service providers already involved with the individual/family are usually present, along with other relevant individual/family-support persons and others. A WRAP/ICM team is created when an individual/family has complex needs, multiple service providers are involved, and the individual/family has agreed to participate.

Who can be on a WRAP/ICM team?

Individuals/families (including young children), individuals, parents, guardians or adults, extended family and family supports, other support persons, as well as service providers and community members can be on a WRAP/ICM team. Service Providers may include counsellors, school staff, social workers, probation officers, physicians, foster parents, or anyone currently involved with the individual/family.

Who can initiate the WRAP/ICM process?

Any service provider or individual/family can work toward initiating the process and calling a first meeting. Everyone should view the WRAP/ICM process as appropriate and useful. The responsibility for initiating the WRAP/ICM process does not belong to any one person or organization. When the first meeting is held, the initiator will serve as the chair/facilitator until a consensus is reached as to who will continue to chair/facilitate the meetings on an ongoing basis and who will act as the overall coordinator for the ongoing process of working together.

What is the purpose of the WRAP/ICM process?

The WRAP/ICM process provides an opportunity to assist individuals/families by identifying and understanding their strengths and needs. The individual/family and service providers work together to creatively and efficiently meet these needs by designing and monitoring a strength-based service plan that focuses on positive outcomes for the individual/family. Follow-up and documentation are paramount for success.

2B. Terminology and Language

Coordinator – oversees WRAP/ICM process; stays in contact with the individual/family between meetings; reviews progress; serves as primary support; maintains connections with other team members as action plan is implemented.

Facilitator/Chair – ensures that the meeting stays on track; reminds members of the code of conduct; mediates conflicts; directs the strengths-referenced action planning process; ensures someone is responsible for taking minutes and distributing them.

Case manager – an agency may use this term to identify who is responsible for the individual/family within the particular agency.

Recorder/Timekeeper – person responsible to take notes, record information in a positive, respectful manner, and keep time.

Domains – the factors that comprise and influence the well-being of an individual; examples include health, identity, family/social, employment etc.

Case conference – meeting to discuss issues and concerns without the individual/family present.

Code of Conduct – a set of conventional principles and expectations specific to WRAP/ICM.

Meeting – WRAP/ICM is a process and having meetings is part of that process. We would ask participants not to say “I am calling a Wrap/ICM meeting”; rather say “I am calling a meeting on behalf of Brandon’s support team as part of the Wrap/ICM process”.

2C. Guiding Principles¹

The following principles, which are common to many collaborative processes, will guide all team members in the WRAP/ICM process.

Person-centered Service: WRAP/ICM service providers are committed to putting individuals/families at the center of service planning whenever possible. The purpose is to help individuals/families build their capacity, to identify and address their goals, and direct their own lives to the greatest extent possible. This can only be achieved when individuals/families are respected, empowered, fully informed and willingly participate in the activities concerning them.

Confidentiality: Both service providers and individuals/families have a difficult task in continually balancing respect for privacy, with the need to share the information necessary to develop and collaborate on a plan. Each person comes to the team with his or her own ideas about what should be shared, and perhaps also with some employer regulations that he or she is expected to follow. The team will need to discuss and agree on what guidelines they will use in and outside of the meeting, always keeping the principle of “what is necessary to the process” in mind.

Building on Strengths: The focus of WRAP/ICM is on building on the strengths and successes of individuals/families. This approach provides the foundation for far more lasting changes in their lives. It also makes it easier for individuals/families to stay committed and the team to be collaborative.

¹ Adapted from: Ministry for Children and Families, Integrated Case Management: A User's Guide. 1999

Advocacy: WRAP/ICM provided individuals/families with the opportunity to play a central role in decision-making that affects their lives. It may be difficult, however, for individuals/families to attend meetings on their own and to speak for themselves. In these circumstances, individuals/families are encouraged to bring a friend, advocate or support person with them who can speak on their behalf.

Recognizing Diversity: WRAP/ICM recognizes that individuals/families have diverse needs, backgrounds, and abilities. The WRAP/ICM team needs to respect and respond to the social, cultural and economic factors that shape the individuals/families' lives.

Collaboration: WRAP/ICM brings together the varied disciplines, talents, perspectives, knowledge and experience of a broad range of people and encourages them to share their individual skills, knowledge and expertise with each other. This process not only supports the best possible outcomes for individuals/families, but it also offers opportunities for increased growth and understanding for all team members.

Mutual Respect: It is essential that mutual respect be shown by all team members to all team members if the WRAP/ICM process is to work effectively. This includes respect for each team members' unique knowledge, skills, experience and perspective, regardless of age, level of training, position, job classification, particular discipline, ministry or agency represented, or relationship to the individual/family.

Inclusive Membership: The primary 'WRAP/ICM team' for any individual is the family; the team should include extended family, other persons, as well as service providers at the discretion of the individual/family. Aboriginal individuals/families should involve band social workers, elders and others that are important to the culture and customs of the individual/family. Service providers may include counsellors, school staff, social workers, probation officers, physicians, or anyone currently involved with the individual/family. Because the WRAP/ICM process can be lengthy, the natural team that exists to support individuals/families may change over time depending on circumstances.

Participation: Team members must be willing to participate fully in the activities of the team. At the outset, full participation may involve a significant investment of time as team members become familiar with one another and the process. As time goes on, however, they will find that this initial investment is likely to both to save time for all team members and to improve outcomes for individuals/families.

Accountability: WRAP/ICM is committed to creating a system that is accountable to the people who use it. Individuals/families must be informed to the greatest extent possible of all activities that might affect them, and WRAP/ICM activities should be recorded and shared with everyone present. Follow-up and documentation is paramount for success.

A Holistic Approach: WRAP/ICM should provide for a complete understanding of the various aspects of an individuals/families' circumstances and needs. The development of a service action plan needs to be referenced to the strengths and challenges that the individual/family deals with on a day-to-day and long-term basis.

Continuity: Individuals/families need continuity in the services they are receiving – not only in how the services relate to each other, but also in how the services develop over time. To preserve a sense of continuity, every effort should be made to ensure that over the course of an individuals/families' involvement, at least one member of the WRAP/ICM is present from the beginning to the end of the process.

Planning for Transitions: WRAP/ICM should take special care to anticipate and plan for transitions in the lives of individuals/families – for example, changing schools or jobs, life transitions (i.e. individual to adulthood, parenthood), and changes in family structure.

Least Intrusive and Intensive Intervention: WRAP/ICM complements a prevention and early supports strategy, which is aimed at providing support to individuals/families before difficulties develop into crises. While it is clear that appropriate supports are necessary when individuals/families encounter difficulties, it is important to minimize the number, intensity, duration and degree of restriction of the interventions in order to acknowledge and build on the strengths and independence of the individuals/families.

WRAP/ICM Have a “Long View” as Opposed to a “Crisis Response” View: Although there are many situations that call for speedy action to protect children, the most important interventions to produce permanent positive change are long-term and ongoing. A crises management plan or protocol can be very helpful. Once this is in place, the real work of the team is to focus on those activities which enable the child to mature to adulthood with the sense of a meaningful place in the world, and with reasonable self-regard and regard for others.

2D. Code of Conduct when meetings are called

Remember, WRAP/ICM is a process of having all team members work together to support an individual/family. Many discussions will occur between team members with regular ongoing meetings involving the individual/family and their support system providers needing to occur.

The role of the facilitator/chair: The central responsibility of the facilitator/chair is to direct the flow of the meetings that occur to support the WRAP/ICM process. This will be accomplished by ensuring that the mandate of the meeting is clear and that discussion is related to that mandate. In addition, the chair/facilitator will help to give all those present an opportunity to speak and will attempt to draw out those less inclined to contribute.

Purpose: The purpose of the meetings called will be stated at the beginning of the meeting by the facilitator/chair as short, succinct purpose or mission statement. Though participants may come with their own agendas, efforts will be made by all, and in particular the facilitator/chair, to stay on task. Important issues may come up, and if there is not time to cover these in the same meeting, they will be noted in the minutes to be addressed at a later date.

Confidentiality: One of the tasks of the team will be to set some mutually agreed upon guidelines around confidentiality.

Input from all: It is important that all members have opportunities to express themselves. The atmosphere of the meetings should be one of mutual respect and recognition that everyone who attends has something unique to bring to the meetings.

Individuals/Families’ Needs Central: Special attention should be given to recognizing individuals/families as the center of meeting discussion and to support them in expressing what they believe they need to say. Members should be committed to protecting the dignity of individuals/families and of fellow team members. The meeting will be focused on how to best meet the needs of the individual/family.

Non-judgement and Accepting: Recognizing that a common element of WRAP/ICM is brainstorming, and that plans grow and develop over time, it is important that all members commit to

creating an environment where individuals believe that their views will be accepted, and they will not be judged.

Collaboration: Valuing the input of all members and making a commitment to working together are both key components in the process. No one team member has all the skills, ideas, or vision that an individual/family or the team might need. It is the collaboration of WRAP/ICM members that produces the most positive outcomes. The sum of the whole is greater than the parts.

Respect and value differences in mandates, agendas, and opinions: Team members come from a variety of agencies with varying mandates and agendas. Team members need to be open-minded and value the contribution of other team members. Team members do not necessarily have to agree with each other, but they do need to listen. All member contributions are equally valued.

Encourage Less Vocal Members to Speak

Either as a function of personality, professional background, or involvement with the family, some voices tend to play a more dominant role in WRAP/ICM discussions. All members need to have the opportunity to address important issues in the meeting.

Resolving Conflict: When interpersonal issues not specifically related to the family's needs surface, members should resolve these issues outside the meeting. When conflict around planning occurs, the chair/facilitator will take on a role of mediation and facilitating team decision making.

Use Good Communication: In many cases, conflict can potentially be avoided simply by making use of some basic principles of effective communication. These include using "I" statements, avoiding the word "but", displaying positive body language, using reflective listening, and avoiding statements which assume a higher moral ground, or which imply that one's personal opinion should, or does, reflect everyone's reality.

2E. Code of Ethics

WRAP/ICM team members agree that each has the right to:

Be Properly Informed: WRAP/ICM participants have the right to be properly informed about the nature of the WRAP/ICM process.

Refuse To Participate: WRAP/ICM participants have the right to refuse to participate in, or stop participating in, the WRAP/ICM process at any time. If the individual/family chooses to not attend or meeting, or is not invited to a meeting, the meeting is then considered a case conference.

Privacy: WRAP/ICM participants have the right to privacy and confidentiality and are not expected to share information not directly related to the WRAP/ICM process.

Complaints: WRAP/ICM participants have the right to voice a complaint if they feel they have not been treated properly or fairly in the WRAP/ICM process. The Ministry of Children and Family Development, School Districts, Northern Health and other organization or agencies have complaint processes in place.

2F. Confidentiality

Those engaging in the WRAP/ICM process agree, in principle, with the following guidelines surrounding confidentiality:

Relevant Information: WRAP/ICM participants agree that they will share only information relevant to the WRAP/ICM process which will assist better planning of services.

Disclosure of Information: It is understood that any information disclosed relating to the abuse or neglect of a child under the age of 19 years, or regarding a person being a danger to themselves or others, will need to be reported to the appropriate authorities.

Notes of Meetings: WRAP/ICM participants agree that notes of the meeting made at the meeting will be the only information that is distributed to participants. These notes will be safely and securely stored in the individual/family’s file by each participant in the same way as any and all other information about the individual/family.

Accessibility: WRAP/ICM participants agree that meeting notes will only be accessible to those who would normally and legally have access to them. They are not to be shared with anyone who is not part of the WRAPAROUND/ICM process without the consent of the individual/family.

Evaluation Purposes: WRAP/ICM participants agree, that for the purposes of making the WRAP/ICM process better, information related to their case that does not identify them directly or indirectly may be used to evaluate how well the WRAP/ICM process is working.

2G. WRAP/ICM Summary

WRAP/ICM Summary	
Framework	Focus on strengths and changing the environment to support the individual/child; partnership of family and others.
Identifying Needs and Goals	Family, service providers and supports form a team to develop a long-term vision, identify needs in a broad range of areas and create an action plan together.
Develop a Plan	The WRAP/ICM team develops priorities and creates an action plan together that is based on strengths.
Accessing Services	The WRAP/ICM team identifies roles and tasks for each member; additional members may be invited; special services may be accessed.
Monitoring Service Efficacy	The WRAP/ICM team shares information and monitors service efficacy on an ongoing and regular basis and adjusts the action plan as necessary.
Leadership	Any member can serve as a meeting facilitator.
Crisis Management	A crisis management plan is pre-arranged and modified as necessary.

3. INITIATING THE WRAP/ICM PROCESS

3A. Preplanning

Starting the WRAP/ICM process typically begins with a conversation between a service provider and a family member (individual, parent, guardian). Together they go through a number of steps:

1. Review the WRAP/ICM approach and decide whether the WRAP/ICM process may be helpful to the individual/family. It might be helpful to ask yourself: “Why wouldn’t we want to empower an individual/family?” If there is no reason, then engage in the WRAP/ICM process with this individual/family.
2. Identify all professionals and agencies involved with the individual/family. With the individual/family, determine who they wish to be involved in the process. Identify any other significant people who could support the family in the WRAP/ICM process. This may include extended family, clergy, Elders or an advocate. In some circumstances, an individual/family may not wish a certain service provider to be present. The initiator will work toward the inclusion of all relevant service providers, and can address this concern by indicating that this person is already in the individual/family’s life (even if they are “unwanted” person does not need to be a part of the individual/family’s life. Share the “Welcome to WRAP/ICM” information page.
3. Discuss issues of confidentiality, expectations regarding sharing of information, and respect for privacy. Service providers should ensure that the individual/family consents to having them contact the identified potential team members and to ask questions relevant to the WRAP/ICM process. At this stage, the service provider’s agency protocols regarding confidentiality should be followed; as well, the WRAP/ICM form should be discussed and signed by the individual/family. All individuals should be approached for consent when they are old enough to understand the process. Use the “Consent for Sharing” form.
4. Establish possible times and locations for the meeting and decide who will invite each of the identified participants. The person who does the inviting needs to feel comfortable explaining the WRAP/ICM process and encouraging involvement. Allow three weeks for the planning of the initial meeting.
5. To help prepare team members for the WRAP/ICM process, ask questions to help them identify the strengths and challenges of the individual/family. Some individuals may want to role play an issue they want to raise. To give a clear picture of the first meeting, you may wish to review and/or modify the sample agenda. See “Initial Conversations” and “Contact Summary”. A “Sample Meeting Agenda” is included in Part 4.
6. A team member who has a relationship of trust with the individual needs to explain and help the individual with understanding the WRAP/ICM process. The individual is expected and encouraged to attend meetings. It’s important that everyone is aware of the individual’s wishes and dreams. These need to be shared with other team members prior to any meeting so that the individual can get answers/information during the meeting. Agree that someone on the team will help ensure the individual is asked questions, provided opportunities to speak and encouraged to engage in discussions. Some individuals may need to know that they can take a break during the meeting

7. Ensure there are no “surprises” unloaded to individuals in meetings. Team members should not be disclosing major events or information to individuals and families in meetings.
8. Also ensure the individual/family has the supports to help debrief both the meeting and the process. When planning the meeting and working together to deliver services, remember that each individual/family is unique. S/he may have excellent, or limited, capabilities in the areas of cognitive ability, attention span, ability to process language, or ability to trust others etc.

For young children or those with severe limitations, it may not be appropriate to have them present in the meeting, but their thoughts, feelings, concerns and wishes should still be known and voiced.

9. If the individual does not participate in the process, including the meeting, then any meeting is called a case conference.
10. If possible, the team should debrief any meeting and, on an ongoing basis, discuss questions or concerns about the process. A meeting with many people can be very intimidating for the individual/family members, but with proper preplanning, the process can be empowering for all.

Inviting People to Join a WRAP/ICM

Ensure the participants understand the WRAP/ICM process and agree to use this strength- based approach.

In a conversation inviting someone to participate in a WRAP/ICM you will want to include the following:

- Provide a brief overview of the WRAP/ICM process.
- Assess whether s/he is willing/able to participate.
- Ask what his/her role is in the current situation, and his/her goals for the individual/family.
- Ask what strengths s/he sees in the individual/family.
- Assess his/her willingness to abide by the principles, codes of conduct/ethics, and confidentiality guidelines of the WRAP/ICM process.
- Ask what factors are important for each team member that they wish to have for discussion at meetings with others
- Ensure there are no “surprises” unloaded to individuals in meetings. Team members should not be disclosing major events or information to individuals and families in meetings.
- Ask if s/he is willing to fill the role of Meeting facilitator/chair, recorder/timekeeper or WRAP/ICM coordinator.

3A. Forms

3A.1 Welcome to WRAP/ICM

3A.2 Consent for Sharing

3A.3 Sample First Meeting Agenda

3A.4 Contact Summary

3A.1 Welcome to WRAP/Integrated Case Management (ICM)

The WRAP/ICM process provides children, youth or any individual and their families with the opportunity to play a central role in the decision making that affects their lives. It is strengths-based and client-centered. By responding to the needs of children, youth and their families in a comprehensive manner, there is greater potential to build on strengths. Building on strengths provides the foundation for greater success and lasting change.

The WRAP/ICM process is a team-based activity that helps groups of people who are involved with children, youth, and their families work together toward common goals. The team consists of individuals agreed upon by the child, youth and family and committed to them through informal, formal and community supports and service relationships. The team creates a plan that includes ways to ensure that children, youth and their families can experience success in their communities, homes and schools. Planning is grounded in children, youth and family members' perspectives, and the team strives to provide options and choices such that the plan reflects family values and preferences.

The WRAP/ICM process encourages and actively seeks out the full participation of team members drawn from the child, youth and family members' network of interpersonal and community relationships. The WRAP/ICM plan reflects activities and interventions that also draw on sources of natural supports. Team members work cooperatively and share mandates and resources. The plan reflects a blending of team members' perspectives, mandates and resources. The plan guides and coordinates each team member's work towards meeting the team's goals.

The WRAP/ICM process demonstrates respect for and builds on the values, preferences, beliefs, culture and identity of the child/youth and family. One of the tasks of the team will be to set some mutually agreed upon guidelines around confidentiality. The WRAP/ICM process is a shared learning experience for all team members; all participants make unique valuable contributions.

3A.2 Individual's Consent for Sharing

WRAP/ICM for _____

Consent for Sharing Information

An individual/family benefits most when those providing care are coordinated and consistently supportive of that individual/family and of each other. Exchanging information is necessary so that the WRAP/ICM team can identify and respond to the needs of an individual/family. However, all WRAP/ICM participants are asked to share only the information required for this purpose.

I, _____, give my consent for the following persons to share information as part of the WRAP/ICM planning process. Only relevant information is to be shared. I understand and give permission for these people to attend planning meetings with me.

Name

Relationship/Organization

Name	Relationship/Organization
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I understand that I may add or remove any names from this list at any time, or specify any limitation to this consent.

Date: _____ (consent is valid for one year from date signing)

Individual Signature: _____

Parent Signature: _____
(if applicable)

Witness: _____

3A.4 Contact Summary

Can be used by the initiator/facilitator of the first meeting as a summary of initial conversations.

Individual/family: _____

	Core Team Members	Role/Goal/Strengths
1	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:
2	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:
3	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:
4	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:
5	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:
6	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:

3B. Initial Conversations

3B.1 Goals & Outcomes of Initial Conversations

Goals:

1. Identify team members' perceptions of their roles and goals.
2. Identify team members' perceptions of current efforts around goals.
3. Identify the strengths of the individual/family from both their own perspective, as well as from the perspective of the other team members.
4. Identify barriers that may be preventing team members from reaching goals.

Outcomes:

1. Establish rapport.
2. Solicit involvement in the team process.
3. Evaluate logistical concerns such as daycare, transportation etc.
4. Obtain information for plan:
 - a. Roles: What type of involvement do people really have with the individual/family?
 - b. Strengths: What's working? What's worked in the past?
 - c. Dream/Vision: What goals do team members and/or the individual/family have?
 - d. Needs/Challenges/Priorities: What needs to be addressed? What are the priorities?
 - e. Potential Team Members: Who is involved with and/or supports the individual/family?

3B.2 Guiding Questions for Facilitators

For use with potential WRAP/ICM Team Members

1. For the service provider: What is your role with this individual/family (a function distinct from job title)?
For the individual/family: What is your role within your family?
2. For the service provider: What is your goal within your role?
For the individual/family: What is your goal for yourself/family?
3. For the service provider: What strengths have you observed in this individual/family?
For the individual/family: What do your friends say they like most about you?
4. For the service provider: What effort have you or others put forth to meet your goal?
For the individual/family: What have you done to try and reach your goal?
5. For the service provider: What has worked? What challenges have you faced?
For the individual/family: What's worked for you before?
What challenges have you faced?

6. For the service provider: What is your vision for this individual/family?
For the individual/family: What is your hope, dream or vision for you, your family, or this situation?

3B.3 Individual/Family Strengths Assessment

*The following are **examples** of the types of questions you might ask; they are not intended to be an exclusive or exhaustive checklist you need to ask every individual/family.*

What do you do for fun?

Who are you close friends and why are they special to you?

What kind of future do you hope to see for your children? Yourself?

What do you like to watch on television?

What are your favourite movies, book? Which celebrities do you like and why?

What are the best things about each of your children? Your parents?

How did you meet your spouse/significant other?

What is your neighbourhood like? How long have you lived there?

What were you like as a child? What do you think you'll be like as an adult?

What one thing do you do every week that you enjoy?

What was the best vacation you ever took? What made it the best?

How do you picture your life five years from now?

What makes you smile about your family at least once a day?

If you could have one goal met within the next year, what would it be?

3B.4 Student's Strength Assessment: Sample Questions to ask Teachers

*The following are **examples** of the types of questions you might ask; they are not intended to be an exclusive or exhaustive checklist you need to ask every individual/family.*

What is this student's favourite class?

Who does the student admire most in school? Peers? Staff?

What types of activities does this student do for fun?

What was the best day you can remember this student having in the past week? Month? Longer?

What kind of future do you see for this student if (s)he gets the right kind of supports?

What if you could create any type of support for this student?

What types of things would make him/her most successful academically?

How do you remember this student on the first day of school?

What one thing do you do with this student every week or two that you enjoy?

What types of help would you find most useful in improving outcomes for this student?

If you could have one goal met for this student within the next year, what would it be?

What are one or two strengths you see in this student?

3B.5 Child/Individual Preplanning

*The following are **examples** of the types of questions you might ask; they are not intended to be an exclusive or exhaustive checklist you need to ask every individual/family.*

Domains list may be very useful reference tool (see next page).

1. What is going well right now?
2. What are your strengths – what are you feeling good about?
3. What adults/peers are involved/connected with you?
4. What issues or concerns or worries do you have?
5. Who can help you with these concerns?
6. If you could change one thing in your life, what would it be?
7. (Explain WRAP/ICM) Who do you want on your team at the meeting?
8. What specific issues do you want to share with your team at the meeting/
9. What specific issues do you not want to share at the meeting?
10. Is there anyone you don't want to have on your team or at the meeting?

3B.6 DOMAINS

1. SAFETY

- needs
- plan

2. HEALTH/MEDICAL

- speech
- hearing
- vision
- height and weight
- immunizations
- dental and dental plan
- on-going medical conditions or disabilities
- medications
- recent illnesses or accidents
- developmental bio-markers
- has a dentist
- eating habits
- sleeping habits
- exercise
- hygiene
- smoking
- drinking
- drug use
- sexual activity
- pregnancy
- has a doctor

3. EMOTIONAL/BEHAVIOURAL NEEDS

- mental health needs
- other supports
- prior trauma
- wellness
- mental health support
- behaviours that indicate mental health needs

4. EDUCATION/EMPLOYMENT

- school history
- current educational program
- educational expectations
- work history
- work readiness
- employment plan
- transitioning plan
- special needs
- IEP
- transition planning
- work skills
- current employment
- job/program applications/skills

5. SOCIAL/RECREATION

- peer group
- sports
- strengths
- clubs
- hobbies/interests
- healthy use of free time

6. IDENTITY

- birth family
- culture
- sense of self
- language
- spirituality
- relation to natural family

7. FAMILY/SOCIAL RELATIONSHIPS

- safe place to live
- sense of belonging
- relationship with care givers
- children
- communication
- family supports
- has relationship with biological family
- place for special events, holidays
- positive peer group
- advocate and/or mentor
- responsibility
- attachment issues

8. SOCIAL PRESENTATION

- appearance of self-care
- communication skills
- appropriate clothing
- confidence

9. SELF CARE/LIVING SITUATION

- safe living situation
- manages money
- driver's license
- uses public and private services (fills out forms)
- shops for groceries
- source of income
- takes public transportation
- keeps appointments
- cooks
- uses laundry

10. LEGAL ISSUES

- legal status
- probation
- victim of criminal activity
- legal guardianship/custody
- details of probation
- "no contact order"

3C. Tips for a Successful Meeting

Meetings held based on the WRAP/ICM principles are part of the overall process. They are successful when all members are working together and the individuals/families have a key role in the process.

Some strategies that may increase the success of WRAP/ICM meetings are:

- start with a statement purpose and/or mission statement – both long-term and short-term
- involve individuals/families in all stages of decision-making
- allow adequate time to deal with issues and concerns BUT ensure that you set a time-limit (e.g. one hour) for the meeting
- provide access to someone who can answer questions about the WRAP/ICM process
- inform family members they can bring a support person/advocate
- ensure that the meeting facilitator is someone with whom the family has an open and reasonably trusting relationship
- address immediately any disrespectful comments or behaviour
- review WRAP/ICM membership as needed to ensure the relevant people are present
- review confidentiality and reasons why everyone is present
- discuss less continuous issues first
- focus the meeting and keep the discussion practical and concrete
- increase the involvement of the individuals/families as they are willing and able to take on increasingly responsible roles, such as chairing meetings, or leading the action planning process
- plan meeting logistics such as transportation, time, and location and babysitting
- start from a strengths based perspective – what is going well, what are this individual's strengths
- set a start and finish time and keep people on track
- assign a facilitator/chair, recorder/timekeeper
- plan and anticipate surprises – (e.g. someone who may try to monopolize with her own issues)
- collaborate, listen, validate and support.

In January – February of 2010, we welcomed the contributions of a University of Victoria Social Work practicum student, Erica Schlichter, to the Prince George and Area WRAP/ICM Planning Committee. Erica suggested the following strategies:

At the centre of everything you do/say/act, always have the interest of the individual and family in mind. Some tips that you might want to adopt in your WRAP/ICM practice could include:

- avoid “talking down”
 - be aware of the way your tone of voice may change depending to whom you are directing your comments
 - limit or extinguish your use of acronyms
 - use plain language; leave out unnecessary jargon
 - limit or extinguish “common expressions” because these may be culturally inappropriate or may not be understood in the same way by everyone in the room
- be aware of your facial expressions, body posture and actions
- be aware that dress can be intimidating

- allow the individual and/or family to seat themselves first
- the individual/family must approve all parties involved in the WRAP/ICM
- where possible, hold a meeting in a circle to open up the room for conversation and to promote equality
- make sure that meetings start with introduction; those who prefer to listen may wish to be introduced by an advocate
- ensure the individual/family and other participants understand confidentiality
- ensure the reason and goals for the meeting are understood prior to the meeting and revisited at the start of the meeting to avoid misguided anticipations,
- do not assume that the individual – parent relationship is that of a positive nature; provide the opportunity for the individual to be able to talk to someone they trust in a safe environment upon conclusion of the meeting
- address all the concerns of the individual and/or family, even if they seem minor
- respect the individual's boundaries and limitations
- hold meetings in a non-threatening environment and try to accommodate any wishes of the individual/family (i.e. time, location)
- when choosing a location, consider room size, windows for light and fresh air and privacy of the room from outside listeners
- acknowledge the fact that everyone comes from a different agency and background
- to make the meeting more comfortable, offer beverages or food where appropriate
- avoid use of the word normal/nature
- observe language barriers and recognize how these might limit conversations or understanding; have a plan for dealing with these potential challenges
- make sure that whatever is said during the meeting is directly relevant to the meeting i.e.: no "dirty laundry" or surprises
- identify the individual/family strengths and refer to them during the meeting; know that the individual is the expert in his or her life and be aware of your outsider status to the situation or experiences of the individual.

5. FIRST MEETING

4A. Sample First Meeting Agenda (aka “Cheat Sheet”)

The initiator of the meeting should act as facilitator at the first meeting.

1. Mission statement/purpose of meeting:
An example: We are here to make a plan together to help Susie have success in her transitioning to independent living.
2. Introductions
 - go around the group and ask each member to give his/her:
 - name
 - relationship to individual/family
 - role in meeting (i.e. facilitator, not-taker, etc)
 - goal for meeting/family
3. Housekeeping items:
 - review:
 - confidentiality
 - breaks (you can leave, but please come back)
4. Strengths of individual/family in various domains
 - ask each person to name one strength of the individual/family
5. What has been/is working
 - review what has been working/what is working
6. Identify needs/challenges of individual/family in domains
 - determine which needs:
 - require immediate action
 - require more information
 - prioritize needs
 - with effective preplanning, the most important needs areas will have been identified
7. Develop and record S.M.A.R.T.*action plan with specific strategies, outcomes, timelines, review process and person responsible for implementing the strategy
8. Closure to the first meeting
 - who should be there?
 - confirm roles for the next meeting
 - set date and time
 - sign consent form
 - debrief
9. Make a plan for distributing action plan to all members present including the individual/family.

*specific, measurable, achievable, realistic, time-limited

4B. Roles in Meetings

It is important that roles are clearly defined within the meeting, that a consensus is reached as to who will be acting in these roles, and that these individuals are supported by all WRAP/ICM members in their roles. In the absence of a 'neutral' WRAP/ICM facilitator/chair, it may be necessary for an individual to wear several 'hats' in the meeting – i.e. their 'hat' as a service provider, and their 'hat' as a meeting facilitator. It is essential to avoid confusion that WRAP/ICM members be made aware of which 'hat' is being worn and when.

Reminder: The facilitator at the beginning of the first meeting will normally be the initiator of the WRAP/ICM process – the one who has already had prior contact with each of the team members and who has arranged the initial meeting. At each subsequent meeting, the roles of the chair/facilitator and recorder/timekeeper need to be assigned.

The Meeting Facilitator/Chair

The facilitator/chair is responsible for:

- Ensuring that the meeting stays on track – related to the purpose and mission
- Reminding members of the WRAP/ICM Code of Conduct
- Helping mediate any conflicts that may arise during the meetings
- Directing the strength-referenced action planning process
- Ensuring someone is responsible for taking minutes and distributing them

The Recorder/Timekeeper

The recorder is responsible for:

- Noting pertinent information
- Recording information in a positive, respectful manner
- Keeping track of the time; informing facilitator/chair of time limits

The WRAP/ICM Coordinator

Some specific duties of the WRAP/ICM coordinator include the following:

- Staying in contact with the individual/family between team meetings
- Reviewing the progress of the action plan from the individual/family's perspective
- Serving as primary support to the individual/family in accessing services
- Maintaining connections with other team members as the action plan is implemented
- This includes the ability to maintain contact with those involved with the individual/family and to remain WRAP/ICM coordinator for, ideally, the duration of the WRAP/ICM team's work.

The WRAP/ICM coordinator would, in most cases, be a service provider and likely be the one who has the most frequent contact and the closest relationship with the individual/family. In some instances, the individual/family may feel they are willing and able to take on this role. However, it is essential that the WRAP/ICM coordinator share decision-making equally with all team members; the role does not confer authority on the individual who holds it. It is important for the WRAP/ICM coordinator to understand the role and have the ability and desire to fulfill it.

NOTE: Several of the service providers on the WRAP/ICM team could be "case managers" for their own particular service or organization; however, the WRAP/ICM coordinator is a distinct role from this.

4C. Action Plan

The action plan is the key component of the WRAPROUND/ICM process. It builds on existing strengths and current individual/family supports and directs team members' energy to the same goals. When developing an action plan, the WRAP/ICM team will:

- Collect information about strengths and needs
- Establish priorities
- Identify desired outcomes or goals that **S.M.A.R.T.:**
 - **S**pecific, **M**easurable, **A**chievable, **R**ealistic, **T**ime-limited
- Develop actions or strategies to achieve these goals that are, if possible, referenced to and built upon a strength of the individual/family
- Assign responsibilities and timelines
- Ensure document is shared with all team members, including the individual/family
- Regularly review and adapt the plan and the process
- Evaluate outcomes with reference to initial needs of individual/family

NOTE: The headings in each row of the "Action Plan" form are examples of life domains. Not all action plans will contain interventions in each domain. Also, sometimes interventions from one domain might be referenced to strengths from another. The "Action Plan" form can also serve as the meeting minutes and can be photocopied and distributed to each member directly following the meeting.

4C.1 Example of Creating an Action Plan for a Goal

The key components of any action plan are the same: vision and strengths are used as a basis for developing concrete strategies. To see how the following case study example is translated into an Action Plan, see the form on the next page.

Long-term goal: James will have positive peer friendships as an adult.

Strengths: James enjoys basketball and has a good sense of humour.

Goal: James will develop positive social skills.

Outcome 1: James will spend 2 afternoons per week in a positive peer experience.

Strategy: A child and individual care worker will accompany James to the local basketball court to decrease anxiety, to strategize around appropriate communication skills, and to trouble-shoot around conflict. A referral will be made by James' social worker next week and she will report back about how long the wait might be for a child and individual care worker.

Outcome 2: James will have more positive school experiences.

Strategy: His school counsellor will help him join a lunch-time club at school. He will get answers to James' questions and talk to him further at their meeting tomorrow.

Outcome 3: James will be less anxious before going to an event.

Strategy: James' parents will prepare him ahead of time and coach him about what to expect. Their therapist will help them with this over their next few sessions.

WRAP/ICM STRENGTHS-BASED ACTION PLAN EXAMPLE

INDIVIDUAL/FAMILY			TEAM MEMBERS PRESENT		
MEETING #:	DATE:	NEXT MEETING:	MISSION STATEMENT:		
	April 21, 2010	May 30, 2010	Long-term: We are working together to help James have success. Short-term: James will have positive peer friendships as an adult.		
Domain	Strength(s)	Need(s)	Realistic Goal	Intervention/ Who's responsible?	Timeframe
Placement/ Living Situation					
Health/ Medical					
Educational/ Vocational		Positive school experiences	Join noon-hour club at school	School counsellor to arrange.	Start next week
Identity/ Culture/ Religion					
Family/ Social Relationships		Communication skills needed			
Social/ Recreational	James enjoys basketball		James to spend 2 hours/wk after school playing B-ball	Childcare worker will organize and accompany James	To begin in two weeks
Emotional/ Behavioural	James has a good sense of humour	Trouble resolving conflict Anxiety around upcoming events	James will be informed of upcoming events and taught to prepare	Parents will assist in conjunction with therapist	Next week
Self-care Skills					
Basic Needs					
Legal/Other					

4D. WRAP/ICM Meeting Consent Form

I agree with the goals, outcomes, interventions and actions discussed today. If I disagree with the written plan, I will contact the case coordinator. I agree to honour the rights, privacy and confidentiality of any persons and/or issues discussed in this meeting.

Name of Individual/Family: _____
 Coordinator: _____

Date of Meeting: _____

NAME (Please print)	SIGNATURE	ROLE	Please send action plan to me at*:

*Insert your email or fax or mailing address

4E. WRAP/ICM Debriefing

The following form can be used to help your WRAP/ICM team evaluate its strengths and weaknesses. Use it as a discussion tool at the end of one of your meetings.

HOW WAS THE PROCESS?	Excellent	Good	Working to improve	Need a plan for this
1. WRAP/ICM members feel comfortable with, and understand, the process.				
2. The meeting facilitator was able to keep the meeting on track.				
3. WRAP/ICM members support and value one another, and work well together.				
4. The individual/family's voice is heard and respected.				
5. Being a part of this process is a positive experience				

HOW WELL DID WE MEET OUR OBJECTIVES?	Excellent	Good	Working to improve	Need a plan for this
1. The meeting began with, and stayed focused on, the strengths of the individual/family.				
2. WRAP/ICM members work towards the individual/family's vision.				
3. WRAP/ICM members keep confidential information confidential.				
4. WRAP/ICM members respect each other's opinions and deal with conflict appropriately.				
5. WRAP/ICM members identify strengths well and use these to develop the action plan.				
6. The action goals are S.M.A.R.T. (S pecific, M easurable, A chievable, R ealistic, T ime-limited).				
7. Notes are made so everyone has the same understanding of what happened at each meeting.				
8. A crisis management plan is developed and reviewed as needed.				

COMMENTS:

What has been the most positive part of these meetings/this process for you?

What would you change about these meetings/processes?

What is the most positive aspect of this team?

What would you change about this team?

Other comments:

4F. Meeting Summary

PRINCIPLES:

Person-centered Service	Confidentiality
Building on Strengths	Advocacy
Recognizing Diversity	Collaboration
Mutual Respect	Inclusive Membership
Participation	Accountability
A Holistic Approach	Continuity
Transition Planning	“Long View”

CODE OF CONDUCT:

The role of the facilitator/chair – direct flow of meeting
 Purpose – clear, stay on task
 Confidentiality – team must follow guidelines
 Input from all – everyone needs to be heard
 Individual/family’s needs central – should be focus of meeting
 Non-judgemental/Accepting – positive atmosphere
 Collaboration – everyone works together
 Respect and value differences – all contributions
 Resolving Conflict – use effective communication

CODE OF ETHICS:

All participants have the right to:

- Be Properly Informed
- Refuse To Participate
- Privacy
- File Complaints

CONFIDENTIALITY:

Relevant Information – that which is necessary for the process
 Disclosure of Information – for statutory reasons
 Notes of Meetings – safe and secure storage
 Evaluations – identity concealing information may be used.
 Accessibility – notes made available only

MEETING ROLES:

Meeting Facilitator/Chair:

- The facilitator/chair is responsible for:
- Ensuring that the meeting stays on track – related to the purpose and mission
- Reminding members of the WRAP/ICM Code of Conduct
- Helping mediate any conflicts that may arise during the meetings
- Directing the strengths-referenced action planning process
- Ensuring someone is responsible for taking minutes and distributing them.

The Recorder/Timekeeper:

The recorder/timekeeper is responsible for:

- Noting pertinent information
- Recording information in a positive, respectful manner and time keeping
- Filling out Action Plan Form for distribution.

The WRAP/ICM Coordinator:

- Some specific duties of the case coordinator include:
- Staying in contact with the individual/family between meetings
- Reviewing the progress of the action plan from the individual/family’s perspective
- Serving as primary support to the individual/family in accessing services
- Maintaining connections with other team members as the action plan is implemented.

FIRST MEETING AGENDA

1. Mission statement/purpose of meeting
2. Introductions (name, role, relationship, goal)
3. Housekeeping (confidentiality)
4. Strengths of individual/family in various domains
5. What has been/is working
6. Identify needs/challenges of individual/family in domains:
 - determine which needs:
 - require immediate action
 - require more information
 - prioritize needs
7. Develop and record S.M.A.R.T. action plan (specific strategies, outcomes, timelines, review process and persons responsible)
8. Closure to the first meeting (next meeting – who, roles, date and time; consent form; debrief)
9. Make a plan for distributing action plan to all members present including the individual/family

FOLLOWUP MEETING AGENDA

1. Introductions/Purpose of today’s meeting
2. Review minutes of last meeting
3. Status of goals/interventions from last meeting:
 - progress in home, community, school, with focus on strengths and concerns
4. New issues:
 - how can these be addressed in action plan?
 - additional issues before the next meeting?
5. Revised Action Plan:
 - Are there barriers to achieving these goals?
 - How can we remove those barriers?
 - What strategies will be used? Timeline?
 - Who is responsible for each strategy?
 - What is our crises response plan?
6. Next meeting/feedback/Action Plan copies.

5. ONGOING PROCESS

5A. Follow-up Meetings

Follow up meetings ensure that everyone is working collaboratively with a focus on building strengths. These meetings provide an opportunity to review and evaluate progress and process, address new challenges and revise action plans. New issues and any barriers are addressed. See the "Sample Agenda for Follow-up Meetings".

As far as the first meeting, minutes for each meeting are distributed quickly to all members so that everyone has the same information and record of the action plan and members' responsibilities.

Follow-up meetings provide an opportunity to invite guests who could inform the WRAP/ICM team about available resources or about certain issues.

A crisis management plan or protocol can be developed whenever there are indications that a crisis of some kind may emerge. This reduces the anxiety and uncertainty of individual members and encourages a coordinated response when a crisis does arise. The use of a crisis management plan often means that a special meeting of the WRAP/ICM team does not need to be called and the crisis and response can be reviewed at the next scheduled meeting.

The frequency of follow-up meetings will depend on a number of factors:

- The family members' wishes, as they will have the best sense of "how things are going".
- The stage of the WRAP/ICM planning process: more frequent meetings may be required early in the process to ensure that the plan is working, or when new members join the WRAP/ICM.
- Stressful life circumstances may mean that the child, individual or family require more support during that period.
- Developmental milestones such as starting the school year, transition to high school, puberty, or other changes specific to the child or individual may be vulnerable times.
- Significant events such as anniversaries, Christmas, birthdays, family visits, may also be vulnerable times.

5A.1 Follow-up Meeting Sample Agenda

1. Mission statement
2. Introductions (name, relationship, role in meeting, goal/vision)
3. Review minutes of last WRAP/ICM meeting
4. Review action plan created at the last meeting, and revise as needed.
 - Progress in home, community, school? Focus on strengths and concerns.
 - Have goals changed, new ones added?
 - Are there challenges/barriers to achieving these goals?
 - How can we deal with or remove those challenges/barriers?
 - What strategies will be used within what timeline?
 - Who is responsible for each strategy?
 - What is our crisis response plan?
 - Are vulnerable times coming up?
5. Add to vision or develop a vision in a new area.
6. New Issues
 - How can any new issues be addressed in the action plan?
 - Are there any additional issues that might arise before the next meeting?
7. Closure to meeting:
 - Next meeting (date, time, location, who, roles)
 - Sign consent form
 - Debrief
 - Make a plan for distributing action plan

5B. Reviewing Progress and Process

Reviewing the progress of an action plan is essential to successful integrated case management, but it is also the easiest to “let slip”. Reviewing progress occurs at each follow-up meeting when goals and strategies are reviewed and any needed changes are made. It is these regular meetings of the WRAP/ICM team that will keep all members informed, will measure progress, and will allow for changes in response to new circumstances or to an ineffective plan. This is the process that can often prevent the crises that can be so damaging to the individual and time-consuming for service providers. It is important to remember that “meetings” are just one part of the WRAP/ICM process. The real success of WRAP/ICM is the ongoing strengths-based implementation process that occurs between meetings.

Reviewing progress is also the most rewarding aspect of the WRAP/ICM process. It reminds everyone involved of the overall gains made in spite of any difficult circumstances, crises arising, or “back-

sliding”. It helps both the family and service providers stay focused on positive outcomes and supporting the individual.

5C. Final Meeting

A final meeting occurs when the outcomes of the WRAP/ICM process are achieved. This meeting can include feedback to all members about successes. The “WRAP/ICM Process Feedback” form can be completed and copies can be forwarded to the WRAP/ICM Planning committee chair as a way of helping the committee assess the state of WRAP/ICM in the community.

Ending a WRAP/ICM Process

A WRAP/ICM is a supportive network that meets on a regular basis to plan and respond to the complex needs of a child or individual. WRAP/ICM often has a natural ending when the child or individual needs less support and time between meetings increases.

At the final meeting, reviewing the WRAP/ICM team’s work can be highly satisfying. Spend time reviewing the progress made and giving each other feedback about successes and ability to work together through challenging periods.

If the WRAP/ICM is ending because the individual/family is moving to another area of the province, tell them that WRAP/ICM or Integrated Case Management is used throughout British Columbia. They can ask service providers in their new community how to continue with a similar process.

5C 1. WRAP/ICM Process Feedback

To help evaluate the WRAP/ICM process, please complete and, if possible, discuss this form.

OUTCOMES	Strongly Agree	Agree	Not sure	Disagree	Strongly Disagree
1. The team came up with good plans that built on the strengths of the individual/family.					
2. The case coordinator did a good job of reminding people to follow-through on their part of the plans.					
3. Team members actually followed through on what they were supposed to do between meetings.					
4. The WRAP/ICM process had good results for the individual/family.					
5. WRAP/ICM worked better than what was going on before the process was in place.					

What are the best outcomes that happened because of this process?

What could the team have done to make the outcomes turn out better?

What were some of the challenges? (Give examples if possible):

OUTCOMES	Strongly Agree	Agree	Not sure	Disagree	Strongly Disagree
1. Practical obstacles/challenges stopped the team from getting better results. FOR EXAMPLE:					
2. A lack of information about the WRAP/ICM process stopped the team from getting better results. FOR EXAMPLE:					
3. The negative way team members were thinking about this process or each other stopped the team from getting better results. FOR EXAMPLE:					
4. The lack of time, money or services stopped the team from getting better results. FOR EXAMPLE:					
5. The fact that there are too many government rules and regulations stopped the team from getting better results. FOR EXAMPLE:					

What is the biggest single obstacle/challenge standing in the way of the team getting better results?

What do you think should be done to remove or change this obstacle/challenge?

6. APPENDICES

6A. Crisis Management Plan

Developing a Crisis Management Plan

A crisis management plan or protocol can be developed whenever there are indications that a crisis of some kind may emerge. The process and the plan reduce the anxiety and uncertainty of individual members and encourage a coordinated response when a crisis does arise. The use of a crisis management plan often means that a special meeting of the WRAP/ICM does not need to be called.

1. Identify potential crises:
 - What has happened in the past?
 - What types of triggers/precursors make this type of crisis more likely?
2. Identify a prevention plan:
 - What has helped in the past to keep this crisis from occurring?
 - What can be done after a trigger to prevent the crisis?
3. Identify a crisis response plan:
 - What has helped in the past in response to a crisis? What has not helped?
 - What do we agree to try?
 - Who needs to do what?
 - Do others need to be involved who are not present on the WRAP/ICM team? How do we make them aware of the plan and get them involved?
4. After a crisis occurs, review the plan at the next meeting for success and alter as needed.
 - What happened? Was the plan followed?
 - Was the plan feasible? Did it work?
 - How should we change the plan?
 - Family members feel criticized or unsupported
 - Different expectations of team members
 - Uncertainty about sharing information
 - Disagreement on how an incident was handled
 - One member talks more than anyone, and it is all about problems and complaints.

6B. Conflict Resolution: WRAP/ICM

As in any other group, different types of disagreements and conflict will emerge in a WRAP/ICM. Identifying and addressing the issue that underlies the disagreement is the job of the team. Successfully, dealing with conflict strengthens team relationships and makes the WRAP/ICM team's work more effective.

Everyone on a WRAP/ICM comes with a different background, knowledge base and relationship history with the others on the team. As well many members may feel heightened anxiety due to the concerns that led to the creation of the WRAP/ICM in the first place. The result will likely be some disagreements. However, conflict can be beneficial. Conflict means that different perspectives are being expressed; this allows opportunities for clarification and creativity. The result can be stronger, more effective WRAP/ICM.

Here are some examples of common disagreements with WRAP/ICM:

- Disagreement on who should provide what service
- Misunderstanding someone's job or role on the team
- Disagreement about the needs or capabilities of the child or individual
- Frustration with slow progress
- Family members feel criticized or unsupported
- Different expectations of team members
- Uncertainty about sharing information
- Disagreement on how an incident was handled
- One member talks more than anyone, and it is all about problems and complaints.

The following strategies may be used to set the stage for positive resolution of conflict:

- Focus on areas of agreement, especially the long-term vision; this provides a broader perspective for the team.
- Ask questions about each member's role and consider how the team might support the role.
- Review achievements so far, and ensure everyone shares realistic expectations about what the WRAP/ICM team is able to do.
- Look for the emotions that may be underlying a conflict – it is often a shared anxiety for the individual and desire to make things better.
- Go through the process of identifying strengths again. It can be very helpful to everyone to hear what every other member appreciates about the individual and family. It can help the individual/family to feel better understood and respected.
- When there is disagreement about what service to put in place, focus on the desired outcomes and identified strengths. This will often clarify the best approach.
- Following a written agenda can help WRAP/ICM members bring others back to the desired topic.
- Give everyone permission to think of creative approaches to a problem. This means brainstorming even very unrealistic ideas in hopes of discovering a new direction.
- Personal conflict between two members of a WRAP/ICM should be addressed outside of the meetings. The WRAP/ICM may offer assistance for this if needed.

Sometimes directly discussing WRAP/ICM process can be helpful:

- Have an open discussion about how to support one another to achieve the WRAP/ICM's goals.
- Discuss a topic such as sharing of information. Review the consent form and Confidentiality Guidelines.
- Review "Tips for a Successful Meeting".
- Complete the "Debriefing" form.
- Invite someone to facilitate a meeting to get the WRAP/ICM back on track.

**POTENTIAL BENEFITS OF CONFLICT
IN WRAP/ICM**

- Fosters more creative and realistic alternatives
- Creates better communication
- Creates equality
- Provides a model for conflict resolution in other settings
- Promotes trust
- Provides an opportunity to clarify expectations
- Increases awareness of/respect for/learning about different cultures and values
- Provides an opportunity to understand the situation from another point of view
- Identifies gaps or missing pieces
- Broadens perspectives
- Enhances appreciation of and sensitivity to diversity and differences
- Increases the number of perspectives that are brought to the process
- Provides opportunity for clarification of roles and mandates
- Leads, through discussion, to deeper understanding of the challenges
- Increases understanding of road blocks
- Builds awareness of service gaps in community

6C. WRAP/ICM Summary

- identify strengths
- create a long-term vision
- identify needs
- center on the individual/family
- develop an action plan
- deliver the services
- monitor the plan
- communicate regularly!

And think outside the box!

7. FORMS

These forms are recommended, not prescribed. Please ensure that your individual agency's policies and procedures are followed for consent and sharing of information.

The following forms appear with handbook page numbers and headings:

Welcome to WRAP/ICM
Consent for Sharing
Contact Summary
Child/Individual Preplanning
Domains
Strengths Based Action Planning Form 1
Strengths Based Action Planning Form 2
Meeting Consent Form

Welcome to WRAP/Integrated Case Management (ICM)

The WRAP/ICM process provides children, youth or any individual and their families with the opportunity to play a central role in the decision making that affects their lives. It is strengths-based and client-centered. By responding to the needs of children, youth and their families in a comprehensive manner, there is greater potential to build on strengths. Building on strengths provides the foundation for greater success and lasting change.

The WRAP/ICM process is a team-based activity that helps groups of people who are involved with children, youth, and families work together toward common goals. The team consists of individuals agreed upon by the child, youth and family and committed to them through informal, formal and community supports and service relationships. The team creates a plan that includes ways to ensure that children, youth and their families can experience success in their communities, homes and schools. Planning is grounded in children, youth and family members' perspectives, and the team strives to provide options and choices such that the plan reflects family values and preferences.

The WRAP/ICM process encourages and actively seeks out the full participation of team members drawn from the child, youth and family members' network of interpersonal and community relationships. The WRAP/ICM plan reflects activities and interventions that also draw on sources of natural supports. Team members work cooperatively and share mandates and resources. The plan reflects a blending of team members' perspectives, mandates and resources. The plan guides and coordinates each team member's work towards meeting the team's goals.

The WRAP/ICM process demonstrates respect for and builds on the values, preferences, beliefs, culture and identity of the child/youth and family. One of the tasks of the team will be to set some mutually agreed upon guidelines around confidentiality. The WRAP/ICM process is a shared learning experience for all team members; all participants make unique valuable contributions.

WRAP/ICM for _____

Consent for Sharing Information

An individual/family benefits most when those providing care are coordinated and consistently supportive of that individual/family and of each other. Exchanging information is necessary so that the WRAP/ICM team can identify and respond to the needs of an individual/family. However, all WRAP/ICM participants are asked to share only the information required for this purpose.

I, _____, give my consent for the following persons to share information as part of the WRAP/ICM planning process. Only relevant information is to be shared. I understand and give permission for these people to attend planning meetings with me.

Name

Relationship/Organization

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I understand that I may add or remove any names from this list at any time, or specify any limitation to this consent.

Date: _____ (consent is valid for one year from date signing)

Individual Signature: _____

Parent Signature:

(if applicable)

Witness: _____

Contact Summary

Can be used by the initiator/facilitator of the first meeting as a summary of initial conversations.

Individual/family: _____

	Core Team Members	Role/Goal/Strengths
1	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:
2	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:
3	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:
4	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:
5	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:
6	Name: Organization: Job Title: Phone: Email: Fax:	Role: Goal: Ind/Family Strengths:

Child/Individual Preplanning

The following are **examples** of the types of questions you might ask; they are not intended to be an exclusive or exhaustive checklist you need to ask every individual/family.

Domains list may be very useful reference tool (see next page).

1. What is going well right now?
2. What are your strengths – what are you feeling good about?
3. What adults/peers are involved/connected with you?
4. What issues or concerns or worries do you have?
5. Who can help you with these concerns?
6. If you could change one thing in your life, what would it be?
7. (Explain WRAP/ICM) Who do you want on your team at the meeting?
8. What specific issues do you want to share with your team at the meeting/
9. What specific issues do you not want to share at the meeting?
10. Is there anyone you don't want to have on your team or at the meeting?

DOMAINS**1. SAFETY**

- needs
- plan

2. HEALTH/MEDICAL

- speech
- hearing
- vision
- height and weight
- immunizations
- dental and dental plan
- on-going medical conditions or disabilities
- medications
- recent illnesses or accidents
- developmental bio-markers
- has a dentist
- eating habits
- sleeping habits
- exercise
- hygiene
- smoking
- drinking
- drug use
- sexual activity
- pregnancy
- has a doctor

3. EMOTIONAL/BEHAVIOURAL DEVELOPMENT

- mental health needs
- other supports
- prior trauma
- wellness
- mental health support
- behaviours that indicate mental health needs

4. EDUCATION/EMPLOYMENT

- school history
- current educational program
- educational expectations
- work history
- work readiness
- employment plan
- transitioning plan
- special needs
- IEP
- transition planning
- work skills
- current employment
- job/program applications/skills

5. SOCIAL/RECREATION

- peer group
- sports
- strengths
- clubs
- hobbies/interests
- healthy use of free time

6. IDENTITY

- birth family
- culture
- sense of self
- language
- spirituality
- relation to natural family

7. FAMILY/SOCIAL RELATIONSHIPS

- safe place to live
- sense of belonging
- relationship with care givers
- children
- communication
- family supports
- has relationship with biological family
- place for special events, holidays
- positive peer group
- advocate and/or mentor
- responsibility
- attachment issues

8. SOCIAL PRESENTATION

- appearance of self-care
- communication skills
- appropriate clothing
- confidence

9. SELF CARE/LIVING SITUATION

- safe living situation
- manages money
- driver's license
- uses public and private services (fills out forms)
- shops for groceries
- source of income
- takes public transportation
- keeps appointments
- cooks
- uses laundry

10. LEGAL ISSUES

- legal status
- probation
- victim of criminal activity
- legal guardianship/custody
- details of probation
- "no contact order"

WRAP/ICM STRENGTHS-BASED ACTION PLAN EXAMPLE

INDIVIDUAL/FAMILY			TEAM MEMBERS PRESENT		
MEETING #:	DATE:	NEXT MEETING:	MISSION STATEMENT:		
			Long-term: Short-term:		
Domain	Strength(s)	Need(s)	Realistic Goal	Intervention/ Who's responsible?	Timeframe
Placement/ Living Situation					
Health/ Medical					
Educational/ Vocational					
Identity/ Culture/ Religion					
Family/ Social Relationships					
Social/ Recreational					
Emotional/ Behavioural					
Self-care Skills					
Basic Needs					
Legal/Other					

WRAP/ICM PLANNING FOR:

(DOB) _____

Current Date:		Previous Meeting Dates:		Closing Meeting Date:	
Facilitator:		Coordinator:		Recorder/Timekeeper	
Mission Statement (long-term)					
Living with:			Legal Guardian:		
Name:			Name:		
Address:			Address:		
Phone:			Phone:		
Core Team Members (see "Contact Summary"):					
Name:			Name:		
Extended Team Members:					
Name		Role/Relationship		Phone	
Background Information (Previous Relevant Assessments and Reports)					
Assessment		Location		Contact Person	

SAFETY:				
Strength:				
Issue:				
Action:				
Outcome:				
Safety Plan:				
Person Responsible	Reporting to Whom	Means of Reporting/Evaluation	Timeline	Review

HEALTH/MEDICAL:				
Strength:				
Issue:				
Action:				
Outcome:				
Person Responsible	Reporting to Whom	Means of Reporting/Evaluation	Timeline	Review

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EDUCATION/EMPLOYMENT:				
Strength:				
Issue:				
Action:				
Outcome:				
Person Responsible	Reporting to Whom	Means of Reporting/Evaluation	Timeline	Review

SOCIAL/RECREATION:				
Strength:				
Issue:				
Action:				
Outcome:				
Person Responsible	Reporting to Whom	Means of	Timeline	Review

		Reporting/Evaluation		

IDENTITY:				
Strength:				
Issue:				
Action:				
Outcome:				
Person Responsible	Reporting to Whom	Means of Reporting/Evaluation	Timeline	Review

FAMILY/SOCIAL RELATIONSHIPS:				
Strength:				
Issue:				
Action:				

Outcome:				
Person Responsible	Reporting to Whom	Means of Reporting/Evaluation	Timeline	Review

SOCIAL PRESENTATION:				
Strength:				
Issue:				
Action:				
Outcome:				
Person Responsible	Reporting to Whom	Means of Reporting/Evaluation	Timeline	Review

EMOTIONAL/BEHAVIOURAL DEVELOPMENT:				
Strength:				
Issue:				
Action:				

Outcome:				
Person Responsible	Reporting to Whom	Means of Reporting/Evaluation	Timeline	Review

SELF-CARE/LIVING SITUATION:				
Strength:				
Issue:				
Action:				
Outcome:				
Person Responsible	Reporting to Whom	Means of Reporting/Evaluation	Timeline	Review

LEGAL ISSUES:				
Strength:				
Issue:				

Action:				
Outcome:				
Person Responsible	Reporting to Whom	Means of Reporting/Evaluation	Timeline	Review

Additional Services Required:

Coordinator:	Date of Next Review:	
Action Plan Review with:	By Whom:	Date:
Individual:		
Parent(s):		
Others:		

WRAP/ICM Meeting Consent Form

I agree with the goals, outcomes, interventions and actions discussed today. If I disagree with the written plan, I will contact the case coordinator. I agree to honour the rights, privacy and confidentiality of any persons and/or issues discussed in this meeting.

Name of Individual/Family: _____
Coordinator: _____

Date of Meeting: _____

NAME (Please print)	SIGNATURE	ROLE	Please send action plan to me at*:

*Insert your email or fax or mailing address