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INTEREST

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May 21, 2008

Mr. Kevin D. Ray Arizona Attorney General's Office 1275 West Washington Phoenix, Arizona 85007-2926

Re: Settlement Agreement, Paragraph 55

Dear Kevin:

When we met last week in Phoenix, Plaintiffs said they would identify by letter the issues to be addressed at our June 3, 2008 meeting which will focus on Paragraph 55 of the Agreement. We propose the meeting be a working meeting where we try to reach agreement on (a) whether and how the WAFAS process will be improved and (b) additional sources of information the State will use to measure "whether services to class members are consistent with and designed to achieve the Principles." We propose the meeting focus on the following matters:

- Collecting richer information on fidelity to the JK Principles. We think that refining the guidance given to interviewers and record reviewers would allow the State, without changing the questions asked, to collect richer information and provide more meaningful feedback to providers. This could be accomplished, for example, by ensuring that reviewers take full advantage of opportunities to explore the adequacy of the CFT's assessment and service planning. Reviewers could be asked to explore and perhaps determine whether the services in the plan are likely to be effective in meeting a child's needs.
- Integrating the information from the family interviews and the record review. We propose that the same individual score both the interviews

and the record review or that the family interviewer and the record reviewer jointly score both the WFI and the record review instrument.

- Ensure that reviewers are competent to make the judgments required by the WAFAS. We think the WAFAS would be a more effective vehicle for improving practice if the standards for reviewers were raised, and if the necessary infrastructure was in place at the RBHA and at the family organization to ensure proper training, oversight and competence.
- Ensure that systemic issues that emerge from the review process are identified and communicated, for example, issues of working with CPS.
- Ensure an appropriate number of cases from a provider are actually reviewed. In some cases there were as few as three cases in which the caregiver and the facilitator were interviewed.
- Ensure caregivers and family members are interviewed in person, and increase the number of other team members interviewed to gather a clear picture of the case.

## **Additional Measures**

Attached for your review is a comparison of the JK Principles and the questions in the WAFAS. We welcome your comments on whether we have omitted relevant WAFAS questions and whether our comments in the third column are accurate.

The SOC Plan says that the State is using information from the WAFAS and other sources of information (referred to as children's performance measures) to evaluate fidelity to the Principles. We asked for a description of the additional sources of information. We propose that at the meeting the parties attempt to reach agreement on the additional measures that will be used, including:

- Measures of compliance with required practice protocols.
- Measures of whether services are designed and implemented to achieve the JK functional outcomes. These measures may include both outcome measures and measures that look at the adequacy of assessment and

Kevin D. Ray May 21, 2008 Page 3

service planning. The CASII may provide information relevant in this regard.

- Measures of whether services are provided in the most integrated setting.
- Measures of the sufficiency of interagency collaboration.
- Measures of stability and the sufficiency of efforts to achieve stability (e.g., minimize multiple placements, avoid removal in crises).
- Measures of the adequacy of the array of services offered by the RHBA, including direct supports, case management, and substance abuse services. We understand that the State can quantify these services and is developing methods for evaluating whether they are of acceptable quality.

Please let us know if you have questions concerning the above. Thank you.

Sincerely,

Anne Ronan Ira A. Burnim

cc: Dr. Laura Nelson Brian Lensink Michael Fronske Logan T. Johnston Leezie Kim

## JK Principles & WAFAS Questions

Principle	Content	WEI Interviews	т не гемем
Collaboration	* Parents treated	1.1, Y1.1 (family/youth	1 (family and youth's
with the child	as partners in	given time to talk about	needs/concerns are
and family	assessment,	strengths beliefs and	documented)
	planning,	traditions and for youth,	2 (documentation that
	delivery and	things like and good at;	identifies and prioritizes
	evaluation;	shared with team)	needs for child and family)
	* Parent	1.2, Y1.2 (explaining	[scoring appears to give
	preferences taken	wraparound process and	consideration to whether
	seriously	family's choices)	documentation reflects
		1.3, Y1.3 (family/youth	family's view]
		given opportunity to tell	6 (child and family team is
		things have worked in past)	doing the planning and
		1.4, Y1.4 (family/youth	implementation)
		select who on team)	7 (service plan specifies
		Y1.6 (youth happy with the	family's goals/objectives)
		members of the team)	8 (clearly articulated long
		2.1, Y2.1 (family/youth and	range vision of the future
		team created plan describing	for youth and family)
		how team will meet needs)	[scoring indicates this
		2.10 (family makes final	should be family's
		decision in designing	articulation]
		wraparound plan)	10 (goals and objectives of
		2.11, Y2.5 (team took time to	service plan relate to needs
		understand family's/youth's	family has prioritized)
		values and beliefs and plan is	25 (evidence that family
		in tune with them)	and/or youth making
		Y2.3 (team knows what	decisions about direction
		wouth likes and things do	and method of team)

Collaboration with others	outcomes	Functional
ion * Joint assessment, joint plan, and joint implementation for multi-system involved kids	designed and implemented to achieve:  * Success in school  * Children live with families  * Avoid delinquency  * Become stable and productive adults  * Stabilize child's condition  * Minimize safety risks	Services
1.5 (if difficult to get members to attend team meetings) [reviewer probes issues related to getting participation by others including other agencies]	what leads to crises/dangerous situations) 2.8, Y2.7 (crisis/safety plan specifies what everyone must do to respond to crises and how to prevent crises) 2.9 (confidence that team can keep child in community in event of crisis)	1.6 (process of identifying
11 (services/activities coordinated through integrated service plan) [grading tool says reviewer is looking for collaboration between system partners in	restrictive environment includes strategies to move to a LRE)  21 (crisis plan based on comprehensive functional assessment on predicted crises and includes strategies to prevent crises)  22 (crisis plan identifies signs/behaviors of impending crisis and ways to deescalate crises)  23 (crisis plan includes specific steps to be taken if crisis occurs and assigns responsibilities for steps)	16 (service plan developed
* No question directly asks whether there is a joint assessment or plan for multi-system kids * No question on whether team includes representa-	catalogued here) that look at whether the team has set goals and whether progress is being made toward goals. However, the questions do not look at whether services are designed and implemented to achieve the outcomes specified in JK * Information relevant to whether services are designed and implemented to achieve the outcomes specified in JK may be available via CASII * Some information relevant to whether services are designed and implemented to achieve JK outcomes may be available from questions on LRE and crisis planning	* There are questions (not

Acc	
Accessible services	
* Comprehensive array of behavioral health services, sufficient to ensure children receive the treatment they need * Case management as	* Team includes representatives from other agencies needed to develop an effective plan including teacher, Child Protective Service and/or Division of Developmental Disabilities case worker, and probation office * Team includes any foster parents
3.2, Y3.2 (when team has good idea for support/service, it finds the resources/figures out some way to make it happen) 3.8, Y3.7 (whether services/supports are hard to access b/c they are far away or b/c transportation issues)	2.6 (whether member of team do not have a role in implementing the plan) [example in grading: if school rep comes b/c "has to be there" but doesn't participate] 3.12, Y3.10 (all team members, including friends, family and natural supports, participate in meetings)
13 (services/supports based on needs, not on availability of services/supports)	the development of service plan] 27 (evidence that individuals on CFT working together to provide coordinated services/supports)
* No question on whether services on plan are likely to be effective in meeting child's needs * No questions about case management * No question on whether plan identifies and addresses transportation needs	tives from other systems (e.g., education, child welfare, juvenile probation, DD) when needed to develop an effective plan * No question on whether teacher included if needed to develop an effective plan * No question on whether foster parent is on team *How is the concept of wraparound ending or finishing (see 4.5, 4.8) harmonized with the idea that all children have CFTs?

	Best practices	
competent individuals who are adequately trained  * Services delivered in accordance with ADHS guidelines that incorporate evidence-based Abest practice@  * Plans identify and appropriately address behavioral symptoms that are reactions to death, abuse/neglect, LDs, trauma,	* Services provided by	needed * Plans identify transportation needs to access services * Services adapted/created when needed but not available
family's needs change or something isn't working)	3.7, Y3.6 (team comes up with new idea for plan when	
action steps has been monitored) 29 (child and family are making progress towards their goals)	28 (documentation that progress towards goals and	
providing service  * No questions re: whether services incorporate evidence-based practice  * No questions on whether teams/plans identify and address behavioral symptoms that are reactions to death, abuse, neglect, substance abuse, DD, maladaptive sexual behavior, etc.  * Questions on service modification do not reference JK functional outcomes	* No questions looking at competence of individuals	

Most appropriate a	
Most appropriate setting	
* Services in child's home and community to extent possible * Services in most integrated setting appropriate * If residential necessary, most integrated and home-like setting	substance abuse, DD, maladaptive sexual behavior, and need for stability and permanency (esp for kids in foster care) * Services continuously evaluated and modified if not meeting desired outcomes
2.5, Y2.4 (plan includes strategies to get youth involved in community activities)	
16 (service plan developed in the LRE and if in a more restrictive environment includes strategies to move to a LRE) 19 (service plan includes opportunities for youth to engage in community activities)	
* There does not appear to be a direct look at whether child is being served in most integrated setting. The focus is on "LRE," which while related to integration, is different.  * Interview does not include questions on LRE.  * No inquiry into whether residential program is most integrated and home-like residential program possible	

1 (family and yo needs/concerns a documented) 3 (examples of s assets, resources cultural consider included for area priority need) 7 (service plan sy family's goals/ol 13 (services/supports 16 (services/supports 16 (services/supports) 16 (services/supports) 17 (services/supports) 18 (services/supports) 19 (services/supports) 19 (services/supports) 10 (services/supports) 11 (services/supports) 12 (evidence that and/or youth mal decisions about of the services supports)	1 (family and youth's needs/concerns are documented) 3 (examples of strengths, assets, resources and cultural considerations are included for areas of priority need) 7 (service plan specifies family's goals/objectives) 13 (services/supports based on needs, not on availability of services/supports) 16 (services/supports) 16 (services/supports based on strength of youth/family) 25 (evidence that family and/or youth making decisions about direction
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Stability	
* Plans strive to minimize multiple placements * Plans identify if child at risk of placement disruption and steps to take to minimize/elimina te the risk * Plan anticipate and plan for crisis * In responding to crisis, use all service possible to help child	
1.6 (process of identifying what leads to crises/dangerous situations) 2.8, Y2.7 (crisis/safety plan specifies what everyone must do to respond to crises and how to prevent crises) 2.9 (confidence that team can keep child in community in event of crisis) 4.4, Y4.4 (team helped child prepare for major transitions through planning) 4.6, Y4.2 (wraparound has helped the family develop/strengthen relationships that will support them when	family's/youth's values and beliefs and plan is in tune with them) Y2.3 (team knows what youth likes and things do well) Y2.8 (youth feels like he and his family gets the help they need) 3.3, Y3.3 (youth involved in activities that builds on strengths)
20 (transition planning documentation identifies needs, services and supports that will continue to need attention after formal supports discontinued or when transitioning to adult service system) 21 (crisis plan based on comprehensive functional assessment on predicted crises and includes strategies to prevent crises) 22 (crisis plan identifies signs/behaviors of impending crisis and ways to deescalate crises)	
* Questions don't examine efforts to minimize multiple placements, minimize placement disruptions * Questions don't examine efforts, in crises, to avoid removal from home and inappropriate use of police/criminal justice system	

adult services	transitions to	placements, and	schools and new	transitions to new	including	children's lives,	transitions in	plan for	appropriately	anticipate and	* Service plans	justice system	of police/crim	inappropriate use	avoid	disruptions, and	placement	minimize	remain at home,
																			wraparound finished)
																responsibilities for steps)	crisis occurs and assigns	specific steps to be taken if	23 (crisis plan includes

* No inquiry into		support to parents	
		* Plan identify and provide training and	
self-management (although is question on whether		children in self- management	•
whether child is given training and support in		include support and training for	
* No questions on	,	* Services	
themselves	child solve own problems)	child's need	
training and support to	choices)	and training to	
whether parents are given	process and family's	include support	
*	1.2 (explaining wraparound	* Services	Independence
	respect for youth and family)		
	speakers]		
	barriers for non-English		
	needing to address language	primary language	
	understand) [scoring refers to	that is family's	
areas of priority need)	language the family can	Spanish when	
beliefs are included for	3.10, Y3.8 (team uses	provided in	
	in tune with them)	* Services	
4 (examples of family and	values and beliefs and plan is	heritage	
	understand family's/youth's	traditions and	heritage
included for areas of	2.11, Y2.5 (team took time to	respects cultural	cultural
cultural considerations are   Spanish as required	traditions; shared with team)	manner that	family's
assets, resources and	about strengths beliefs and	provided in	child and
3 (examples of strengths,   * No inquiry into whether	1.1 (family given time to talk	* Services	Respect for

supports)	own with help from natural	4.7 (family can succeed on	wraparound finished)	support them when	relationships that will	develop/strengthen	helped family	4.6, Y4.2 (wraparound has	positive youth)	friendships with other	helped child develop	4.2, Y4.3 (wraparound has	going right)	supports when things aren't	with friends and other natural	Y3.5 (team helps youth talk	participate in meetings)

The WFI interview questions in the chart with no lettered prefixes are from the Caregiver, Facilitator and Team Member Forms. The questions on these forms are identical. Questions from the youth form contain the prefix Y and then the question number.