**Wraparound with Intensive Services (Wise) Program**

Youth Participants and Caregivers reflect on the Impact of Receiving Services

Wraparound with Intensive Services (Wise) serves youth under the age of 21 who experience behavioral health symptoms that cause severe disruption in behavior, and/or interfere with their relationships or functioning in school. Wise delivers a range of Medicaid services that are individualized, intensive, coordinated, comprehensive, culturally competent, and provided in the home and community. The Wise model focuses on the strengths and voice of participants, and their families, in every phase of treatment: screening, assessment, teaming, service planning and implementation, monitoring and adapting, and transition.

In 2018 and 2019, around 70% of youth participants (age 13 and older) reported doing better in school because of new actions they learned in therapy. In 2020, 63% reported doing better in school. Slightly fewer, but still a majority, of caregivers reported their child was doing better in school (57%-63%). Across years 80% or more of youth and around two-thirds of caregivers indicated that they, or their child, are doing better at home. For youth, doing better out in public drops from 81% in 2018 to 72% in 2020, while caregiver responses remain relatively stable at two-thirds. Overall, most youth participants and their caregivers, across survey years, report positive outcomes because of receiving Wise services. Survey results suggest that doing better in school and out in public are possible as for program improvement for youth participants and that some focus be given to caregivers as they support their children.

**About the 2020 Wise Participant and Caregiver Survey**

The Division of Behavioral Health and Recovery (DBHR) within the Washington State Health Care Authority (HCA) contracts with the Social & Economic Sciences Research Center (SESRC) to conduct an annual statewide survey of Wise participants and their caregivers.

The purpose of the survey is to assess participant engagement in Wise and indirectly measure provider competence by assessing participant and caregiver experience in the program.

Youth participants 13 years and older and their caregivers were each asked to complete the survey. Caregivers of participants under age 13 were asked to complete the survey on behalf of their child. Participants and caregivers had the option to complete the survey online, by telephone, or mail-in questionnaire. Survey response rates from 2018 to 2020 varied from 19% to 20% for youth participants, and 27% to 29% for caregivers.

In the 2020 survey, 53.5% of respondents were female and 46.5% were male. Twenty-five percent were of minority status. The mean age of youth respondents was 15 years.
Caregiver perception of their child’s behavioral health care providers

To better understand caregiver perspective regarding behavioral health care providers, two questions were added to the 2020 caregiver survey. The first question asked caregivers how well their child’s behavioral health needs were being met by the child’s behavioral health care provider. A total of 526 caregivers responded to the multiple-choice question. Fifty-five percent (n=291) of caregivers responded “Well” or “Very well,” 26% (n=134) answered with “Not very well” or “Not well at all” and 19% (n=101) indicated that they were “Not sure.”

In a second question, caregivers were asked in an open format to elaborate on their multiple-choice response. Below are some of the explanations that caregivers provided for why they answered the way they did about their child’s behavioral health care provider.

“Very well” or “Well”

“The WISe team was absolutely amazing. Not only did they help [my child], but they helped the whole family. They helped me realize I can reach out to my support system without feeling bad. And now I feel more confident dealing with things.”

“I feel comfortable where my family’s at and finally starting to have positive outcomes. It’s because the team built trust with us. They gave us a safe space.”

“Not very well” or “Not well at all”

“My child needs higher level of care than the Wraparound program can provide.”

“Because we had three facilitators in one year, and during Covid it was bad. They didn’t give us any insight of what to do. The Zoom meetings are really bad. We’ve been doing Zoom meetings the past 18 months for WISe. We haven’t gone back to CFT (child family team) meetings in person yet because the facilitator said that some people are going but the people on the WISe team are not because they’re scared of Covid.”

“Not sure”

“She stopped seeing a provider because it was not in person and she didn’t have anything to really talk about.”

“Right now, she doesn’t really have any counselor or anybody. With COVID we were supposed to take her to the children’s hospital but there’s no answer with that right now. There is stuff still not being done.”

Accessing WISe services during the pandemic

Approximately 90% (n=325) of youth and 94% (n=936) of caregivers indicated that they, or their child, had received at least some of their WISe services remotely since the start of the COVID-19 pandemic in March 2020. Of those, forty-four percent (n=154) of youth and 48% of caregivers reported having very difficult and somewhat difficult experience accessing remote services. The difficulty of accessing remote services may provide context to caregivers’ responses about how well their child’s behavioral health needs were being met by their behavioral health care provider. More than half of youth and caregivers who accessed services remotely reported it was not difficult at all.

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