ORIGINAL PAPER

Integrating Wraparound into a Schoolwide System of Positive Behavior Supports

Lucille Eber · Kelly Hyde · Jesse C. Suter

Abstract We describe the structure for implementation of the wraparound process within a multi-tiered system of school wide positive behavior support (SWPBS) to address the needs of the 1–5% of students with complex emotional/behavioral challenges. The installation of prerequisite system features that, based on a 3 year demonstration process, we consider critical to full operation of the Tier 3 wraparound intervention within a system of SWPBS is also described. We include examples of system implementation benchmarks that occur concurrently with student outcome data and are logically linked to full operation and sustainability of wraparound implementation. Challenges surrounding implementation and proposed advancements are also discussed.

Keywords Wraparound · Multi-tiered system · School wide positive behavior support (SWPBS) · Students with complex emotional/behavioral challenges · System implementation benchmarks · Student outcome · Full operation · Sustainability

Introduction

There is a growing body of evidence for school-wide positive behavior supports (SWPBS) reducing behavioral problems for all students (Muscott et al. 2008; Scott 2001; Sprague and Horner 2006; Sugai and Horner 2008), and helping students with higher levels of needs through specific interventions such as functional behavioral assessment (FBA) (Chandler and Dahlquist 2006; Steege and Watson 2009) and behavioral intervention plans (Scott et al. 2008). A National Blueprint for implementation of SWPBS (www.pbis.org), including organizational readiness, context, and installation features is available to guide schools wanting to adopt SWPBS. However, less guidance and empirical support is available for implementation of more intensive interventions for the 1–5% of students with the most complex emotional and behavioral challenges including those with or at-risk of emotional and behavioral disabilities (EBD).

Students with EBD have traditionally experienced some of the worst academic and quality of life outcomes of any group of students during their school years and beyond. Higher drop out rates, lower academic achievement, and unusually high rates of involvement in the juvenile justice system have been consistently documented for students with EBD compared to their peers (Anderson et al. 2001; Blackorby and Wagner 1996; Carson et al. 1995; Wagner 1995; Wagner et al. 2005). Dismal post-school outcomes include high rates of unemployment, incarceration, and poor family relationships (Bradley et al. 2004; Greenbaum et al. 1996). Kutash et al. (2006) suggest that up to two times as many students labeled as EBD are in need of intensive mental health support when compared to students with other special education disabilities, supporting the need for effective and comprehensive interventions for an even greater number of students.

A multi-year demonstration project in Illinois has worked to meet this need by integrating the wraparound process with the system supports and curricula of SWPBS. This systemic implementation of wraparound within

L. Eber (✉) · K. Hyde
Illinois Positive Behavior Interventions and Supports Network, 335 N. La Grange road, Suite 4, La Grange Park, IL 60526, USA
e-mail: lucille.eber@pbisillinois.org

J. C. Suter
Center on Disability & Community Inclusion, University of Vermont, 311 Mann Hall, 208 Colchester Ave, Burlington, VT 05405, USA

SWPBS has resulted in positive social, emotional, and academic outcomes for an increasing number of students with emotional and behavioral challenges as districts have expanded application through a multi-year implementation structure supported by the statewide Positive Behavior Interventions and Supports (PBIS) Network (Eber et al. 2009b). In addition, this demonstration project has helped clarify and refine the supports and structures necessary to implement and sustain wraparound within schools as recommended by Bertram and her colleagues in this issue (2010).

The purpose of this article is to explore how wraparound can be implemented successfully in schools to meet the needs of students with emotional and behavioral challenges, including those who may be identified as EBD. We begin with a brief review of wraparound and outcomes from its use in schools. Next we provide some background on SWPBS and how the Illinois PBIS Network has integrated wraparound and SWPBS. Finally, we move from what has been accomplished to how schools and districts could build capacity for and expand on the system, data, and practice components necessary for integrating wraparound into a system of SWPBS. This last section was structured to follow the *Stages of Implementation* proposed by Fixsen and his colleagues (Fixsen et al. 2005) based on their results of how to scale up evidence-based practices.

Context

Emerging from the fields of mental health and child welfare, wraparound is a team-based, collaborative process for developing and implementing individualized care plans for youth with and at-risk of EBD and their families (Burchard et al. 2002; Eber et al. 2009a; Walker and Bruns 2006). The core principles of wraparound (Bruns and Walker 2008), clarify that wraparound is not a single service, but instead a process through which specific school and/or community based interventions can be designed, implemented, and coordinated. The logic is that by bringing together a team made up of family members, natural supports (e.g., extended family, friends, mentors), and school and community professionals, the wraparound process will produce a plan that (a) is accepted by the family, (b) addresses the family's priorities, and (c) leads to realistic and practical strategies to support the student in his or her home, school, and community.

Wraparound is operationalized as a process with activities that occur across four distinct phases (Eber et al. 2009a, b; Walker 2008). The phases describe the steps in which a team is formed that develops, monitors, and continuously revises a plan that is focused on achieving success as defined by the student and family. Phase I of the wraparound process, *Engagement and Team Development* lays the foundation for success by building constructive relationships and support networks among students, their families, and selected team members. During Phase I, a wraparound facilitator meets with the student and family to engage them in the process, address concerns and explain how this process is different from traditional interventions, and help the family decide who they want on their wraparound team. Baseline strengths and needs data are established during Phase I for continued updating and use throughout the process. In Phase II, *Initial Plan Development,* the facilitator helps the family and team reach consensus and commitment on quality of life outcomes. Needs and strengths are used to identify specific strategies and clarify roles for all team members. Phase III*, Plan Implementation*, begins a problem solving process to effectively meet students' needs by combining supports for natural activities (e.g., child care, mentoring, making friends) with traditional interventions (e.g., function-based behavioral interventions, specialized reading instruction, medication). Wraparound teams can also arrange services for the adults who care for the student such as assisting family members in accessing stable housing, recreation opportunities, and social supports. Teams can also provide supports for teachers who may be challenged with meeting the unique needs of a student. In Phase IV, *Plan Completion and Transition*, the student and family are transitioned from the ongoing wraparound team to progress monitoring through less intensive structures, such as parent teacher conference or community agency contacts. Movement to Phase IV is determined by the ability to continue successful functioning with more natural supports and to possibly include continuation of one or more specific interventions that were put in place through the wraparound process (e.g., a behavior intervention plan at school, curriculum adaptations, and family connection to community-based mental health supports).

A recent meta-analysis of published, peer-reviewed, controlled research on the wraparound process (Suter and Bruns 2009) demonstrated positive effects for youth receiving wraparound compared to youth receiving traditional services from mental health, child welfare, and juvenile justice service settings. The strongest effects were found for positive changes in the youth's living situation (e.g., successfully living at home rather than residential or hospital placements), and smaller positive effects were found for emotional and behavioral outcomes, reduced juvenile recidivism rates, and improved functioning at school (e.g., improved grades and attendance). While there have been no controlled comparison studies of wraparound in schools, several studies have reported mixed positive results indicating that school-based wraparound can help retain students in their local schools and communities

(Eber et al. 1996a, b), reduce behavioral problems and improve clinical functioning (Robbins et al. 2003; Vernberg et al. 2008), as well as improve academic performance (Eber et al. 1996a, b; Robbins et al. 2003), however findings were not consistent across all studies.

Multi-Tiered Systems of Support in Schools

Typical practice in schools for the 1–5% of students with the most complex emotional and behavioral needs is to move them to highly restrictive segregated settings with little interaction with the environments and instruction recommended for improved functioning (Grosenick et al. 1991). Striving to move from this "identify and place" mentality to an intervention culture, SWPBS uses a public health multi-tiered model to conceptualize a school-wide prevention focus for all students (Kutash et al. 2006). Universal interventions (Tier 1) ensure evidence-based behavioral support for all students. Examples of Tier 1 behavioral supports include ongoing use of proactive behavioral instruction in classrooms and hallways, with frequent positive prompts and encouragement, including a school wide reinforcement system. Those students who do not show measured progress with Tier 1 supports become eligible for secondary interventions at Tier 2. Students may temporarily be grouped together for a particular intervention at Tier 2 (e.g., small group instruction on a specific social skill) or participate in a *Check-in-Check-out* system (Crone et al. 2004) where they receive scheduled prompts and recognition for pro-social behavior with effects monitored via daily progress reports. Students who are still unable to progress at Tier 2 become eligible for Tier 3 support through an individualized behavior support plan developed through an FBA process. We propose the wraparound process as an additional intervention process at Tier 3.

SWPBS and Wraparound

The addition of wraparound as a Tier 3 intervention offers schools a means for succeeding with students whose needs are so complex that starting with one identified problem behavior through an FBA process isn't always efficient. These are students who need more multifaceted plans that blend home, school, and community interventions into one comprehensive, yet practical plan that focuses first on quality of life indicators identified by the student and family-centered team. Tier 3 Wraparound (T3-W) is part of a continuum of interventions that progressively increase in intensity. Figure 1, the inverted pyramid, demonstrates this Tier 2 to Tier 3 continuum, moving from (a) small group interventions (behavioral and academic instruction), to (b) group interventions with unique features for individual

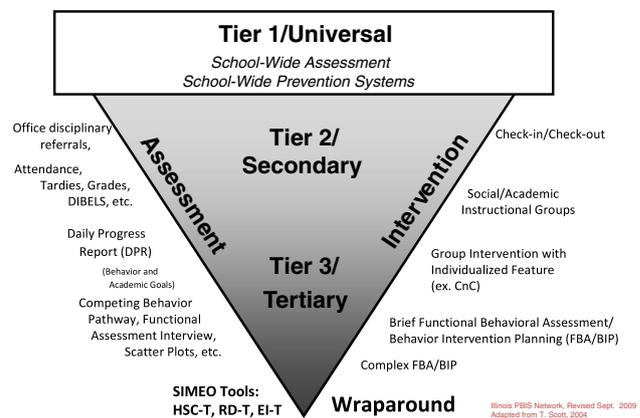**Positive Behavior Interventions & Supports: A Response to Intervention (RtI) Model**

Fig. 1 Inverted triangle

students, to (c) brief, individualized function-based behavior support plans, to (d) more complex behavior support plans that cross settings (e.g., include interventions at home and school), to (e) more complex and comprehensive wraparound plans that address needs across multiple life domains (e.g., safety, behavior, medical) and settings (home, school, and community).

Within SWPBS, the wraparound process provides a structure for schools to reposition themselves in a proactive partnership with families and community supports. Establishing voice and ownership of the process by the student and his or her family is a necessary context to ensure that behavioral interventions produce effective outcomes. Often family members and professionals may not get along well due to a series of failed interventions which can lead to blaming. For example, families may blame the school, school personnel may blame the family, and both may blame mental health or other professionals for not solving the problems. Schools need a comprehensive process that matches the intensity and complexity of problems experienced by students with emotional and behavioral challenges.

Systems, Practices, and Data Features

Like all interventions along the SWPBS continuum, T3-W includes systems, practices, and data structures that must be systematically applied over time to support high-quality implementation. Per the SWPBS blueprint, specific *practices* and interventions (e.g., curricula) need to have an established basis in evidence from rigorous research. Second, to support sustained implementation of the practices, *system* structures and procedures must be formally organized. For example, leadership teams at the school and district levels are necessary to guide implementation and

ensure practices are supported at all 3 tiers of SWPBS. Third, *data* must be continually gathered, analyzed, and used for decision making. Although outcomes have been emphasized in wraparound, the active use of data by child and family teams has not been evident. Therefore data-based decision-making, a hallmark of positive behavior supports, is integrated into the wraparound team process so that real-time data is consistently available to child/family teams as they design and monitor interventions.

Outcomes from Demonstration Sites

Between FY03 and FY09, a total of 395 students in Illinois receiving wraparound were tracked using the Systematic Information Management of Education Outcomes online database system known as SIMEO. During the formative years of the tertiary PBIS focus (2002–2005), school based wraparound was often limited to a few targeted students within select schools. In an effort to model successful practice, wraparound team facilitation and outcomes tracking were primarily conducted by the Illinois PBIS Network staff who provided the training and technical assistance to school personnel who were being coached to facilitate wraparound teams. In 2005 for example, 18 students from nine schools were tracked in SIMEO with 72% of the wraparound team facilitation conducted by PBIS staff. During the three years of the tertiary demonstration project, the participating schools demonstrated increased proficiency in implementing the continuum of PBIS systems including identifying, intervening, and tracking students in need of Tier 3 supports and services. As a result, 125 students from six districts and 39 schools were enrolled in the SIMEO online tracking system from August 07 through June 09 (Eber et al. 2009a, b). All 125 student wraparound teams were supported and facilitated by school-based personal, with 85% of all team facilitation being conducted by the school social worker. The majority of students were in elementary and middle school with a mean age of 9.95 and mean grade level of 5.15. Only 38% of students were identified as Special Education eligible.

The collected T3-W data targets the emotional, behavioral, and academic outcomes of the students. Three strengths based tools (Student Disposition Tool, Education Information Tool and Home, School, Community Tool) are used by the facilitator and the team to collect data for use at all phases of wraparound. Data are generally collected on students at baseline and every 30–90 days thereafter through the tertiary intervention period. Data are then entered in the SIMEO online database system which generates student graphs to assist teams with data-based decision making and change around student and family goals.

Most recent outcome data from the FY09 study (Eber et al. 1996a, b) on the 125 students tracked are promising yet preliminary given the logical learning curve that exists between effective implementation, systems change, and measuring student outcomes with fidelity. The most compelling findings within the data are on a sub-set of 70 of the 125 students who were tracked on average 3 months longer (6 months total) with three complete sets of outcome data available for analysis. It should be noted that the small sample size of students tracked is, in part, due to the limited number of students receiving intensive wraparound supports in the six targeted Tertiary Districts. It is also related to school ability to shift to ongoing and consistent use of data to drive team decision making. For example, 205 students were entered into the SIMEO system and had some data available during the FY09 study time period, but only 70 had three or more complete sets of data and were included in the study.

Preliminary outcome data from the 70 students tracked for 6 months between the 2007–2009 school years serve as an example of the outcomes noted for samples of students receiving T-3W supports. In summary, teams reported meeting on an average of 5.32 times in the 6 month period with data on students collected at baseline, 3, and 6 month intervals. At the beginning of the Intervention period, students were perceived as being at moderate risk of school placement failure due to their extensive need for academic and behavioral supports and services, with a risk rating of 2.61 on a 4.0 scale. Six months later the perceived risk of school placement failure decreased to minimal risk with a risk rating of 2.18 ($p < .009$, $t = 2.691$, $df = 69$). Behavior and academic outcome gains supported the decreased perception in placement risk. Students' office discipline referrals decreased from 4.01 referrals at baseline to 1.07 referrals 6 months later ($p < .003$, $t = 3.060$, $df = 69$). Academic performance (based on a four point scale) increased from a baseline rating of 61% (2.44) to a rating 6 months later of 73% (2.91) ($p < .020$, $t = -2.391$, $df = 69$).

When reviewing Illinois PBIS Network T-3W student outcomes over the past 4 years, the data continue to demonstrate that when students receive intensive school-based wraparound planning within a system of SWPBS for a period of 6 or more months, significant gains are noted in the areas of educational, behavioral, social, and emotional functioning (Eber et al. 2008, 2009a, b). Team perception of student success with the wraparound process is positively correlated with a longer length of intervention and how frequently a team meets. When a team meets consistently over a longer period of time (6 months or longer), team members' perception of students' being at risk in placements in the home, school, and community declines. In turn, students emotional and behavioral functioning in all three environments stabilizes. Student academic gains have also been found to parallel improvements in

classroom behavior. When behavioral needs in the classroom are adequately addressed, academic needs have been more clearly evident to the school personnel interfacing with the student. In the following section, we describe the T3-W implementation process to articulate the sequence of activities that, based on our experiences and data, are necessary to build the system capacity for T3-W within a school-wide system of PBS.

Implementation Process

Based on their review of implementation research, Fixsen and his colleagues (2005) offer the *Stages of Implementation* as a mechanism for understanding how implementation of evidence-based interventions unfold as a process rather than a single event leading to improved student outcomes. Each stage builds on the foundation of the last, logically yielding a more effective intervention. We have adapted Fixsen and his colleagues (2005) *Stages of Implementation* as an organizational structure for guiding implementation of wraparound within a system of SWPBS.

Exploration and Adoption

The *exploration and adoption* stage addresses the prerequisite decisions and commitments of key leaders to move forward with the implementation of T3-W as part of a SWPBS process. *Exploration* is defined as assessing the potential match between the intervention and the needs of the consumers and community, and *adoption* is described as the decision to proceed with implementation (Fixsen et al. 2005). Part of exploration and adoption is consensus by the district and school-based leaders to adopt the value-base inherent to the wraparound process. We have found that although district leaders have agreed to this shift (in theory), the actual shift to this value-base (in practice) is more challenging and needs to be addressed more directly with a wider group of personnel during this stage. Therefore we added a step to this stage of the process where administrators and clinicians at both building and district levels participate in a one-day "Tier 2/3 Overview" course where the challenges shifting to this type of practice are more directly addressed.

District and school-based leaders also need to commit the resources needed to ensure that the following six system components will be available to be installed and maintained: (a) a District Leadership Team, (b) a Tier 3 systems planning team in each school, (c) a district-based Tier 3 coach, (d) wraparound team facilitator(s) in each school, (e) ongoing training and technical assistance at a dosage commensurate with the complexity of the wraparound intervention, and (f) data management system for

wraparound teams to have access to relevant and useful data to support the wraparound process. The resource commitment typically involves the reallocation of existing resources, most specifically personnel, to new roles and functions rather than hiring additional personnel.

Installation

During the *installation* stage, the resources (e.g., personnel) that must be in place at the district and school levels before T3-W is implemented are determined. During this stage, the six system components become operational, with the expectation to continue these components during the stages that follow. The six components that need to be installed are described below.

A critical system feature is the *District Leadership Team* whose role is to ensure that *system* support structures are in place for schools to implement T3-W with fidelity, and provide timely access of T3-W to students with the greatest needs. This team should include: (a) district administrative staff such as Special Education Director, one or more clinical supervisors, district family coordinator, and community mental health representation; (b) a School-based Tier 3 Implementer per school (i.e. Special Education teacher, clinician, administrator), (c) the District Tier 3 Coach. District teams begin to meet at least quarterly to review roles of wraparound facilitators and coaches, existing practices for Tier 2 and Tier 3, and any policies or procedures that may affect intervention integrity of wraparound. Examples of policies that may need review include automatic reassignment of social workers to students based on movement to another grade or school (should not happen if the social worker is serving as the wraparound facilitator) and the need to provide extraordinary and careful transitions for students upon transition to new schools or grades or over the summer. During the installation stage, each District Leadership Team identifies a qualified T3-W Coach to support their schools as they implement the plan and schedule training and technical assistance (described below).

Each school building will have four to six staff who function as a Tier 3 *Systems Planning Team.* Appropriate individuals to be trained and positioned as Tier 3 Systems Planning Team Members include: administrator, clinicians (person with behavioral expertise, Social Worker, School Psychologist, etc.), wraparound team facilitator(s), Special Education teacher, general education teacher. These teams should meet at least monthly. During installation, these building-based teams begin monitoring implementation of Tier 3 system structures as well as Tier 3 intervention plans to include complex function-based behavior plans and wraparound plans.

The positioning of *Tier 3 Coaches* at the district level to support and guide implementation is a critical component

of the T3-W intervention. Coaching can be defined as providing direct instruction, support, and overall guidance on implementation. Our experiences in early development of T3-W have highlighted the need for coaches who support facilitators and other Tier 3 building leaders as the complexity of the systems, data, and practices at Tier 3 align with the complexity of student need at this level.

Scott and his colleagues (2005) argued that even with training and tools in place, individualized support plans for students with Tier 3 needs may not be implemented effectively unless key personnel are trained to effectively *facilitate* the team through the process with integrity. To this end, the installation stage of T3-W requires the identification and positioning of *wraparound facilitators* for each identified student in need of wraparound. These facilitators, typically school social workers, school psychologists, counselors, or others with clinical backgrounds, participate in ongoing training and technical assistance for facilitation of the wraparound process as well as facilitation of function-based behavioral interventions at the tertiary level of SWPBS.

During the installation stage, a plan and schedule for the *training and technical assistance for T3-W* is developed by the District Leadership Team. The dosage of layered professional development needed to build competency for wraparound facilitation is commensurate with the intricacy of the intervention required for this population. The Tier 3 training and technical assistance (TA) series developed in Illinois includes approximately ten days of training over a 12–14 month time period with an additional 3–4 days a year in the following two years. The training and TA addresses Tier 3 systems, tools, and practices including how to develop and maintain effective child/family wraparound teams and engage all team members to use data to guide individual child/family plans implementing the four phases of wraparound. The training plan also includes specific skill-training and practice refinement sessions in use of the on-line SIMEO tools to choose and create graphs for use at team meetings as well as practice refinement with facilitation of function-based behavior plans, which are often critical interventions in comprehensive wraparound plans. Some of the ongoing TA is offered in 2 h blocks using: (a) scheduled phone consults and Go-To-Meetings with groups of wraparound facilitators and coaches and (b) 2–4 h blocks at individual school sites and at the district-level based on need. The Tier 3 training series is initiated towards the end of the installation stage and continues through initial implementation and full operation as T3-W expands (see www.pbisillinois.org for detailed course descriptions of Tier 3 courses).

To ensure consistent and effective use of data, T3-W includes the SIMEO *data management system*. During the installation stage, districts and schools receive training and get set up to use SIMEO. The goal of SIMEO is to provide a real time, web-based, and secure data entry system that allows for immediate single subject graphing to guide decision making at each student's wraparound team meeting. Designated wraparound facilitators in school sites enter data on a set of individual Tier 3 tools and can immediately view and print graphs to use with students, families, and their wraparound teams. Administratively, the system is used as a data repository for the storage of individual Tier 3 level data that can be examined in aggregate for system decision making.

Initial Implementation

During the initial implementation stage, districts and schools implement and achieve fidelity in T3-W with a small number of students (one to three per school), make any needed adjustments to systems supports, then make the intervention more widely available during full operation. The purpose of starting small is to identify which aspects of the systems, practices, and data components are working effectively and which need additional refinement. A related factor is that the practice of wraparound often represents a significant departure from "business as usual" for schools. Teams receive ongoing coaching, training, and technical assistance as they move from Phase I (engagement) into Phase II of wraparound (planning). The wraparound facilitators regularly share progress and data indicating movement through the phases of wraparound with the Tier 3 Systems Planning Team at their school and with the T3-W Coach. Schools are ready to move from initial implementation into full operation when the individual wraparound teams are routinely using SIMEO tools, teams are reporting that wraparound is being implemented with fidelity, and when there are at least three students who have been in Phase III of wraparound (implementation) for a approximately four months. Although significant effort and activity is needed to move from initial implementation to full operation, the *content* of the systems, practices, and data activities for these two stages is largely the same.

Full Operation

Full operation for each school begins once the school provides T3-W to all students who would benefit from it (typically 1–5% of the school population). While in their first year of full operation, wraparound facilitators and other Tier 3 Systems Planning Team members continue their ongoing training and technical assistance. The T3-W coach provides ongoing support during the District Leadership Team meetings as well as at the building-based Tier 3 Systems Planning meetings. Generally speaking, it is expected that there will be approximately three to six students per school with ongoing wraparound teams and

plans in 3 or more schools at the end of the first year of full implementation for the district. This, naturally, varies depending on the number of schools in the district and students per school. Meeting this "full operation" criteria remains a challenge in some schools where the leadership and/or the clinical staff have not fully embraced the practice or experienced a threshold of success significant to feel competent in making the shift in practice. Additional coaching may be required and district leaders must carefully assess where continued support is needed.

Innovation and Sustainability

Fixsen and his colleagues' (2005) stages also include *innovation* (where the intervention is refined and expanded) and *sustainability* (where the intervention becomes part of common practice). Because the majority of the six Illinois districts and their schools are experiencing varying degrees of implementation progress, we will discuss innovation and sustainability from the state level structure, and also provide examples from a district that includes school, facilitator, and student experiences that reflect innovation and potential for sustainability.

Technical Assistance Structures

The IL PBIS Statewide Network is engaging in innovations including improvements in the SIMEO on-line system to allow for enhanced reporting and graphing of individual student data. Other innovations include adding more specific follow up sessions and consultations for facilitators through expanded use of phone and internet based consultations. There are plans to develop a "learning community" for experienced T3-W facilitators to collectively strategize around roadblocks using fidelity and student data to expedite student outcomes. As T3-W reaches full operation in more schools and is replicated in more districts and states, there will be an increasing number of opportunities to improve the systems, practices, and data components, as well as enhance current innovations.

Examples from the Field

A recent interview conducted with a school social worker in one of the demonstration districts provides examples of both innovation and sustainability. This school social worker has an established history of successful wraparound facilitation and her school has reached full operation at Tier 3 during the 2008–2009 school year. She believes that student success in her school is highly correlated with school and district wiliness to make the changes necessary to support wraparound within the context of a three tier SWPBS model. One change she noted has been with faculty attitudes and behaviors toward students with significant mental health needs. Before SWPBS, faculty often responded to behavior problems solely with reprimands and punishments, and now they are more positive and understanding that students with intensive needs require time and support to experience success. Overall, she has seen a shift in attitude to one in which all school personnel make themselves available to meet the needs of all students, including those students with more intensive needs.

Another change that she attributes to improving T3-W is a greater willingness towards flexibility in meeting the needs of students and families. Before SWPBS, the social worker spent a lot of time working only with Special Education Teachers and students to fulfill the social work requirements on their special education plans. She is now based full-time at one school, integrated into systems planning teams in the building, has more interactions with regular education faculty, and is more available to assist all students in having a successful school experience. She also noted that it is not uncommon for school social workers to meet with family members outside of the school (e.g., meeting with a mother during a break at her work). The social worker reported that this change in practice (e.g. meeting families where they are) has resulted in successful engagement of the family in their student's wraparound team. The student vignette below, shared by the social worker during the interview, provides an example of the effect of the family engagement techniques that are now becoming more routine within the district and, when applied at the full operation stage, can result in sustaining change in how students with significant emotional/behavioral needs are supported.

Benny, an 8th grader, received 80% of his instruction in a special setting during 7th grade. When his grandmother, who was his primary caretaker, enrolled him in a new school (August 2008) she stated that Benny usually has a "mental breakdown" every fall, requiring hospitalization. The school suggested a wraparound plan. His grandmother was hesitant at first, feeling it might be better to place him in a therapeutic school. After several conversations, she agreed and a wraparound team was formed. Benny's big need was to have a successful school year, defined as having no "meltdowns," no hospitalization, participating in general education classes, and making the basketball team. The team met consistently during Benny's 8th grade year. He was able to increase his time in general education and formed new friendships. His emotional outbursts dramatically decreased. He made the basketball team, and the coach became a member of his wraparound team. By the end of the school year he was receiving many A's and was in general education classes 100% of the time. He never had a breakdown and was never hospitalized. Figure 2 depicts the team's perception of Benny's risk of entering a more restrictive placement during his 8th grade year.
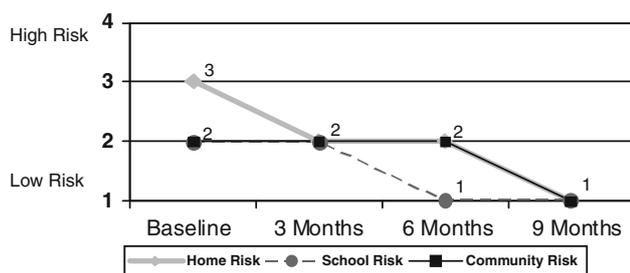
Fig. 2 Perceived risk of placement failure for "Benny"

Conclusions and Next Steps

Transitioning from a focused demonstration project to broader implementation requires constant learning from experiences at all involvement levels, including state, district, school, and student/family wraparound team. For example, the importance of district commitment to ensuring a full continuum of effective Tier 1 and Tier 2 interventions being employed in schools requires ongoing planning among district leaders to articulate priorities supported by resource reallocation as needed. Ongoing review of district-level process and outcome data can expedite the use of more complex interventions faster, such as T3-W with more students.

As previously mentioned, a shift to the value-base inherent in wraparound has significant challenges for schools which need to be anticipated. Schools have a history of "refer and place" for students with significant EBD, and believing that they can actually develop teams and plans that will succeed with these students requires ongoing planning, dialogue, and a closely monitored technical assistance process. A related challenge involves helping "natural implementers" (e.g. school social workers and other school clinicians) shift to consistent use of data to guide decisions at the student/family team level. While it is recommended that all students receiving wraparound supports also be tracked using the SIMEO online database system, the use of the system is voluntary. To encourage outcomes tracking participation, continuous effort is made to ensure data collection and data entry are efficient and linked to data-driven decision making opportunities for teams and families. By continuing to educate and train schools in the value of using student and family outcomes data during wraparound team meetings as a more objective means to drive decision making, the Illinois PBIS Network has noted a steady increase in the number of Tier 3 student outcomes tracked using the SIMEO system. However, this remains an ongoing challenge and warrants further study and intervention at the system level.

A needed innovation being explored in several districts in Illinois involves more deliberate partnerships with community members across the multi-tiered SWPBS framework. Local community agency practitioners, including family members experienced with wraparound, should also be trained and positioned to facilitate wraparound teams in partnerships with school personnel. A related necessity is for the development and testing of tools to assess professional competencies of school-based clinicians, often working in partnership with community partners, who are facilitating the T3-W process. Ongoing dialogue and professional development about the changing role of the school social worker have been an effective mechanism in many of the districts involved in this study and can be a vehicle for establishing assessment and feedback tools that can extend into community partnerships as well.

An additional area that needs to be pursued is the development of cost factors, including strategies to capture resources redirected into prevention and wraparound facilitation due to decreases in use of "label and place" and increase in use of effective interventions. An in-depth study of this cost analysis can expedite the system changes needed to ensure sustainability over time.

Overall, work continues to develop and refine T3-W further, resulting in a packaged intervention of systems, practices, and data components. This package will then be ready for efficacy testing and dissemination. As this model expands, it is important for schools and districts to share lessons learned that can support implementation, innovation, and sustainability for students with and at risk for EBD.

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