## Intensive In-Home Services (IIH)

Services provided by a QMHP for youth under age 21 are intensive, time-limited interventions provided to youth who have or are at-risk of serious emotional disturbance. All interventions and the settings of the intervention shall be defined in the Individual Service Plan. All IIH services shall be designed to specifically improve family dynamics, provide modeling, and the clinically necessary interventions that increase functional and therapeutic interpersonal relations between family members in the home.

### Program Components
- Service to children under 19 in the youth’s home.
- Up to 10 hours of home-based services per week provided by a QMHP*
- Crisis intervention
- 24 hour emergency response
- Care coordination with other required services
- Family counselling
- Outpatient therapy provided by the IIH provider or coordinated with another provider
- Training to increase appropriate communication skills
- Parent or Guardian participation required
- Various treatment Modalities (i.e. CBT, DBT, MI, love and logic, etc.)

### Intervention Strategies
- Initial Service plan (ISP)
- Case Management and connection to other services
- Crisis Intervention techniques and services
- Various person-centered activities based on age and development (i.e. videos, workbook, role-play, etc.)
- Individual/ Family interventions:
  - Psychoeducational,
  - teaching,
  - Provide Modeling
  - Interpersonal interaction/ Social Skills training, etc.
- Communication Skill development
- Anger Management
- Individual therapy sessions with LMPH (included in IIH or coordinated with IIH)

### Targets
Increase protective factors & decrease risk factors in the following YASI Domains:
- Family
- Attitudes/ Beliefs/Consequences
- Skills/ Temperamental/Personality
- Aggression
- Community/ Peer Association
- Mental, emotional, and behavioral disorders

### Immediate Outcomes
- Services may be used to facilitate the transition to home from an out-of-home placement
- To keep the youth in the home and community
- Improved Family Dynamics
- Improved interpersonal relations between family members in the home
- Improved intrapersonal functioning

### Long Term Outcomes
- Improved Pro-Social Behavior
- Improved management of Mental Health symptoms
- Improved family communication
- Improved relationships with community and natural supports.

*Minimal standard. Refer to DBHDS regulations for requirements.
# High Fidelity Wrap | Intensive Care Coordination

HFW is a team-based, collaborative planning process for developing and implementing individualized care plans for children with behavioral health challenges and their families. HFW is a process (not a traditional treatment service), coordination of systems/services and natural supports family capacity; positive outcomes result when the process is followed to fidelity.

<table>
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<th>Program Components</th>
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| Wraparound case coordination process with Four phases: Engagement, Planning, Implementation, and Transition | • Family-driven need identification.  
• Risk of placement and multiple system involvement.  
• Family (conflict Management, parental support)  
• School/Education (attendance, conduct)  
• Community/Peers, Attitudes/Beliefs, Skills  
• Attachment to positively influencing peer(s)  
• Tolerance for frustration  
• Consequential Thinking Skills  
• Development of Impulse-control skills  
• Problem-solving skills  
• Goal-setting skills  
• Empathy/ Understanding impact of behavior on others  
• Willingness to make amends | • To meet the stated needs (not services) prioritized by the youth and family,  
• Improve the youth/family's ability and confidence to manage their own services and supports.  
• Develop or strengthen the youth/family's natural support system over time  
• Integrate the work of all child serving systems and natural supports into one streamlined plan (Single Plan of Care)  
• Lower caregiver stress  
• Higher coordination among professionals and family.  
• Youth stabilize in the home community or transition from out-of-home placement | • Youth at home and in school.  
• Self-Efficacy  
• Development and engagement with Natural Supports  
• The goal is for the family to become able to successfully identify, plan for, and meet their own needs. |

Specific tools include:  
Band Aid (safety) Plan, Strength, Needs, and Culture Discovery, Initial Action Plan, Crisis Prevention Plan, ongoing action plans, and transition plan throughout the HFW model.
Wraparound
Multiple Proposed Mechanisms of Effect, Two Main Paths to Positive Outcomes

Defined Practice Model

Wraparound Care Coordination

System and Program Supports

High fidelity practice:
- Family-driven needs identification
- Family Engagement
- Integrated Teamwork
- Social Support
- EB Strategies based on Needs
- Plan Implementation Oversight
- Progress monitoring and feedback

Building Family Capacities:
- Skills to manage behaviors/emotions
- Self-Efficacy
- Optimism
- Problem Solving
- Social Supports

Services and supports work better:
- Youth/Families engaged
- Top Problems Addressed
- Strategies implemented
- Single Plan of Care

Positive outcomes
- Behaviors less problematic
- Emotions less extreme
- Caregivers feel less stressed
- Youth are at home, in school, and out of trouble
- Systems do not use institutions unnecessarily