

High Fidelity, Low Morale: Using WFI-4 Principles and Phase Scores to Assess Wraparound Facilitator Burnout

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Abstract

The current study utilized a three-pronged feedback and evaluation system to investigate facilitator morale as it relates to caregiver satisfaction, wraparound fidelity, and phases of wraparound care.

The study was conducted as part of a local evaluation of Action for Kids (AFK). All family support providers and care facilitators interviewed expressed low morale evidenced by feelings of isolation, lack of support at the local and state level, productivity demands, and disengaged family members. Although results from the WFI-4 indicate that overall fidelity was reached, possible evidence for facilitator burnout was found in the analysis of responses pertaining to outcome-based and community based elements, as well as low fidelity during the transition phase.

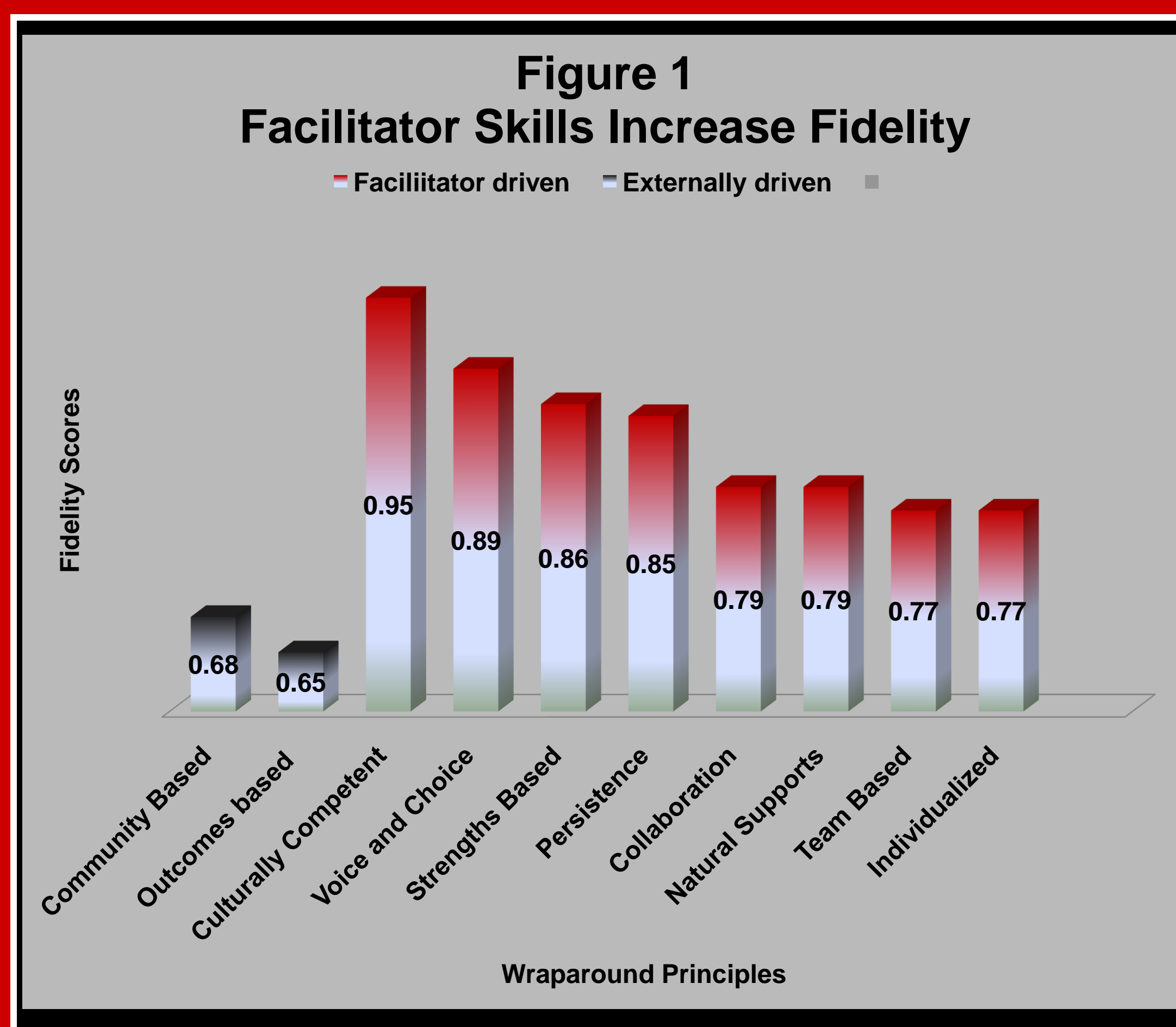
Background

Rast and Vandenberg (2008) found that retaining facilitators by providing adequate supports helps wraparound fidelity. Thus, facilitator morale is important to maintain.

We examined fidelity in ACTION for Kids (AFK), a system of care in Arkansas. AFK serves 4 mostly rural low SES counties. Of the families interviewed, time in wraparound care averaged eight months. Each county maintains one family support provider and two care coordinators (facilitators). Each facilitator manages a 15-family caseload.

Method

- Eleven female family support providers and wraparound facilitators were interviewed (using open-ended questions) on 3 elements of AFK: (1) day-to-day operations, (2) overall vision of AFK, and (3) sustainability. (see sample questions below)
- Twenty-two caregivers were interviewed on their level of satisfaction with support providers.
- The WFI-4 was administered to 69 individuals.



Sample Questions for the Facilitator Evaluation Component

- Are you spending your time as you thought you would?
- What is working well in the AFK program?

Findings

All support providers indicated low morale (2 tendered resignations). What was working included (1) mutual support with other providers, (2) flex funds, and (3) mentors. Problems emerged with (1) isolation, (2) lack of local and state support, (3) productivity demands, and (4) disengaged families.

Regardless of providers' discouragement, 95% of caregivers were satisfied with the services and care they received.

The WFI-4 shows that overall fidelity for AFK was adequate at .80. Also, four wraparound principles reached high fidelity at .85: voice and choice, strengths-based, cultural competence, and persistence.

The WFI-4 also shows how fidelity may be related to provider morale. Outside supports for the providers are missing. Outcome-based and community-based elements, as well as phase scores for transition, did not reach fidelity.

Conclusions

The WFI-4 findings support Rast and Vandenberg's (2008) conclusion that system and organizational supports, particularly community supports, are necessary to achieve high fidelity wraparound.

The combination of high fidelity scores in areas which rely on facilitator skill (e.g., including families in decisions, persistence, and cultural competence), and low scores in areas that integrate the youth into his or her community (community-based) with specific, measurable goals (outcomes-based) may adversely affect morale in key service providers.