

WAYSIDE YOUTH AND FAMILY SUPPORT NETWORK INDIVIDUAL CARE PLAN

Youth's Name: MICHAEL KULA Date of Birth: 09/18/2000 Client ID #: MK091800M0

Youth's name:	KULA, MICHAEL	Date of this plan:	11/14/2017
Date of Birth:	SEP 18 2000	Youth(12 and over) attended:	No
Primary care provider:	Dr. Chong So	PCP Contact Information:	978-323-2808
Date of Well-Child Care Visit:	03/20/2017	Date ICP sent to primary care provider:	
Intensive Care Coordinator:	Adam Lacasse	Family Partner:	Heather Labbe
CSA Name:	Wayside Youth & Family Support Network	Date of Risk Management/Safety Plan Review:	08/03/17

Ongoing Supports and Services

Instructions: Indicate all ongoing supports and services (formal and natural) received by the family. This will become the sustainability plan for the family.

Date Identified	Support name/type	Relationship to Child	Frequency of contact

Signatures:

Intensive Care Coordinator: [Signature] Date: 11/21/17 Supervisor: [Signature] Date: 11/21/17

Family Partner: _____ Date: _____ Youth: _____ Date: _____

Family Member 1: _____ Date: _____ Family Member 2: _____ Date: _____

Note: By signing this document, I acknowledge that I was fully included in the development of the ICP and agree with its contents.

WAYSIDE YOUTH AND FAMILY SUPPORT NETWORK INDIVIDUAL CARE PLAN

Youth's Name: MICHAEL KULA

Date of Birth: 09/18/2000

Ground Rules: (including confidentiality and how the team will make decisions)

Everyone will contribute, share their point of view respectfully, and collaborate with one another. Family voice & choice; focus on how the team can support Michael and the family as a whole. No shame/ No blame; team will use strength-based problem solving.

The team will be persistent in working towards identified goals.

All team members will be responsive and accessible throughout the wraparound process.

Measurable levels of success will be used to monitor progress of Michael and his family.

Vision:

Michael has a clear diagnosis and is in a setting that is appropriate to meet his needs.

8/3/17: Family scored vision as a "2" on a scale from 1-5.

Team Mission:

Team will provide emotional and physical support to Michael as he explores skills and strategies to manage his behaviors, while exploring resources with the family to best suit their needs.

Care Planning Team (CPT) Members:

Name	Role	Strength	Date On	Date Off
Michael Kula	Client	Able to use coping skills, can identify supportive family members	07/24/2017	
Michele Kula	Guardian/Parent	Compassionate and loving with family, dedicated to helping find supports and resources	07/24/2017	
Jared Planter	Parent	Established and reinforces structure and organization with charts and routines	07/24/2017	
April McCarthy	ICC	Organized, persistent, dedicated to needs of clients	07/24/2017	08/22/2017
Heather Labbe	Family Partner	Personal experience as a parent of a child with emotional and behavioral needs	07/24/2017	11/14/2017
Richard Caplan	Outpatient Therapist	Experience in working with clients with sexualized behaviors	07/24/2017	08/22/2017
Ed Wolf	CBAT Director	Strong, effective, and persistent communication	07/24/2017	11/14/2017
Erin Walker	DCF	Persistent with advocating for funds to assist client needs	08/03/2017	
Adam Lacasse	ICC	Communication, Good Listener	08/22/2017	11/14/2017
Sara Murphy	DCF SW		10/03/2017	

Life Domain

Michael has a difficult time managing his sexual impulses and desires, and has engaged in inappropriate sexualized behaviors at home and in the community. Michael's behaviors have compromised the trust between he and his care givers. Also, Michael has been inpatient at various hospitals as well as at the Brandon School CBAT program. Michael has left home for hours at a time, and has lied about his whereabouts, which compromises the family's ability to supervise Michael's behaviors as well as his safety in general. Michael greatly enjoys opportunities for writing and creativity as well as spending time with his pets.

Michael's inappropriate sexualized behaviors have been a great source of stress for his family. His care givers are extremely concerned for the safety and well-being of

YOUTH'S Name: MICHAEL KULA

Date of Birth: 09/18/2000

the other three young children living in the family home. Historically, Michael has left pornographic web sites open on shared family technology devices, engaged in self-pleasure while in the same room as his younger male cousin, stolen undergarments belonging to his female younger cousin, and been caught trying to sneak into the bedroom of the same female younger cousin. The family has expressed concerns surrounding their ability to balance Michael's needs with maintaining the safety of all family members. This stress has been exacerbated by ineffective communication between treatment facilities and the family.

Needs Identified at CPT:

- 1) Future Planning- Assessing and accessing services and supports to provide Michael with the most effective level of care post discharge from the Brandon School CBAT program.
- 2) Behavior - Michael has inappropriate sexualized behaviors and is not honest with his parents about his whereabouts and activities
- 3) Diagnosis- Accessing services for Michael to have a Neuropsychological assessment to provide a definitive diagnosis to better serve his needs and gain access to services and resources.

Goals:

Michael is using structured supports to manage his inappropriate sexualized behaviors.

Short Term Objective (first signs of success)		
Objective Number	Meeting Date	Objective
1A	AUG 3 2017	1A Michael will actively engage with structured supports daily during his stay at the Brandon School CBAT program.

Strengths for this Need:

Michael is very creative, charismatic, and caring. He continues to develop his writing by working on poetry and stories, and feels these skills are a strong coping mechanism. Michael loves his animals, and enjoys spending time with the family on outings and activities.

Culture for this Need:

Michelle and Jared, Michael's care givers, report that Michael's inappropriate sexualized behaviors have led to many problems in the home, especially around the other three young children being exposed to pornographic material and Michael's masturbation practices. Michelle and Jared state that the complexities of Michael's hospitalizations and treatment needs have required Michelle to take time off from work, and created additional stressors for the family.

Brainstormed Options listed by team (bold are chosen):

For Options Chosen - Tasks Assigned		Responsible Person	Target Start Date	Target End Date	Task Status
Objective					
1A	Behavioral - Michael will actively engage in therapeutic interventions while at the Brandon School CBAT program.	Michael	07/24/2017	11/07/2017	Discontinued
1A	Behavioral - Michele and Jared will check-in weekly with Ed at the Brandon School CBAT program for updates regarding Michael's progress.	Michelle, Jared, and Ed	07/24/2017	11/07/2017	Discontinued
1A	Behavioral - Adam will continue to communicate with Ed from the Brandon School CBAT regarding treatment plans and update the care plan team on Michael's status as needed.	April and Ed	07/24/2017	11/07/2017	Discontinued
1A	Behavioral - Heather will gather resources and applications for SSI and DDS to help the family plan for Michael's future after he completed his stay at the Brandon School CBAT program.	Heather	07/24/2017	11/07/2017	Discontinued
1A	Behavioral - April will begin researching providers and resources that will be	April	07/24/2017	09/03/2017	Complete

Youth's Name: MICHAEL KULA

Date of Birth: 09/18/2000

	able to conduct a Neuropsychological Assessment on Michael.				
1A	Behavioral - Ed will make photo copies of all records provided by Michele in order for the team to have a better sense of Michael's history and needs.	Ed	08/03/2017	09/03/2017	Complete
1A	Behavioral - Michele will transport Michael to the CRA hearing and follow through will all processes and requirements for filing.	Michelle	08/03/2017	09/03/2017	Complete
1A	Behavioral - Erin will continue to advocate for approval for Michael to have the ASAP evaluation, and follow up with the care plan team regarding the status.	Erin	08/03/2017	09/03/2017	Complete
1A	Behavioral - April will attend the CRA hearing with Michele and Michael to provide support and help answer any questions asked by the probation officer or judge.	April	08/03/2017	09/03/2017	Complete
1A	Behavioral - Heather will research support groups in the family's home area.	Heather	08/03/2017	11/07/2017	Discontinued
1A	Behavioral - Sara Murphy (DCF SW) will contact Brian, the evaluator for the ASAP and ask for the completed evaluation	Sara Murphy	10/03/2017	11/07/2017	Complete
1A	Behavioral - Ed Wolfe (CBAT Director) will provide Sara Murphy with a brief write up of Michael's history and a summary of his evaluations	Ed Wolfe	10/03/2017	11/07/2017	Complete
1A	Behavioral - Nicole (Youth Villages) will provide a the safety plan to all team members	Nicole (Youth Villages)	10/03/2017	11/07/2017	Complete

For Goal	Date of Meeting	Progress	Accomplishments/Progress and Barriers (narrative)		
1	08/03/2017	Partially Met	All tasks have been continued. Due to the limited amount of time between the first and second care plans, there was not enough time to complete tasks. All initial tasks are ongoing. Michael continues to engage in services at the Brandon School, Michele and Jared continue to check in with the program. April continues to communicate with the team members, April has located a provider to conduct Michael's neuropsych evaluation and is in the process of filling out the referral packet with Michele, and Heather is preparing applications for SSI and DDS for the family in the next session.		
1	10/03/2017	Not Met	Michele and Jared rated the family vision as a 3 or 4 out of 5, where 1 is not yet begun and 5 is completely accomplished. While there are still many unanswered questions, they feel like progress has been made towards Michael getting the appropriate treatment that he needs. No team member yet have seen the ASAP evaluation even though it was said to have been complete on 9/22. DCF will be reaching out to the evaluator to acquire the assessment. Because there has not been anyone who has read the report, it is impossible at this time to determine the next steps regarding placement and treatment for Michael. Preliminary reports about the evaluation indicate that home placement is not possible at this time due to the risk it poses to other family members in the home. There is a DCF meeting regarding placement on 10/11 where there may be more answers to the question of an appropriate placement for Michael and how DCF may help support the family in the process. Michael continues to reside at Brandon School (CBAT) simply because he has no other option at this time. Michael's depressive symptoms have dissipated, according to Ed Wolfe and is no longer considered 'acute'. All major decisions and next steps are hanging on the results and recommendations of the ASAP evaluation. Both Michael and his family continue to receive treatment from Youth Villages team.		
1	11/14/2017	Partially Met	Michelle and Jared rated the family vision as a "3", on a scale from 1-5 where 1 is just beginning and 5 is vision has been met. Michael has recently been accepted into the Stetson group home to receive treatment. DCF now has partial custody of Michael. Youth Villages has been working with Michael on life skills using the PAYA program. Adam (ICC) provided Michael's family with information for eligibility of MassHealth as well as how to find and make referrals for mental health services for their family members in the future. Heather (FP) followed up with DCF to make sure that Michael's IEP testing and school placement will be arranged when he stays at Stetson group home.		

Current Medications for Target Youth

Name and Contact Information of Prescriber Target Symptoms

Youth's Name: MICHAEL KULA

Name Of Medication

Date of Birth: 09/18/2000