

Resource Guide for Wraparound Facilitator Applications

This reference guide is suggested for **all** Wraparound Facilitator, especially Supervisors or anyone that completes and submits applications.

DMHA YOUTH PROGRAM CONTACT INFORMATION:

For questions regarding the practice of Wraparound Facilitation, approval of résumés of potential Wraparound Facilitators, and training, **contact your agency's Wraparound Site Coach:**

- Amber Busch: Amber.Busch@fssa.in.gov
 - Heidi Gross: Heidi.Gross@fssa.in.gov
 - Jenifer Gibson: Jennifer.Givson@fssa.IN.gov
 - Jessica Morris: Jessica.Morris@fssa.IN.gov
 - Lyndsey J. Kappel Lyndsey.Kappel@fssa.IN.gov
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For questions related to:

- Policies for DMHA Youth Program
- New provider/agency enrollment and requirements for CMHW
- Community based Habilitation, Respite (including facility based), and Training & Support for the Unpaid Caregiver (FST)
- Résumé reviews and approval for training
- Training for HAB, FST, & RES.

Contact Julie Bandy, PROVIDER SPECIALIST: Julie.Bandy@fssa.IN.gov, 317-232-7892

For questions related to:

- Incident Reports (IRs), IR procedure and follow-ups
- Quality Improvement (QI) reviews
- Access site policies, key contacts, and changes for key contacts and access sites
- Reauthorizations for CMHW Access Sites

Contact Tanya Merritt-Mulamba, CLINICAL QUALITY IMPROVEMENT SPECIALIST:
Tanya.Merritt-Mulamba@fssa.in.gov, 317-232-7889

For questions related to:

- CMHW Provider applications and application processing
- CMHW Provider Reauthorizations
- Database licensing for Wraparound Facilitator (WF) direct user, supervisor, and/or access roles, including changes to your agency picklists (*and communicating all staff changes*)
- CRM (Tobi) database training, etc.

Contact Olga Murray, PROVIDER COORDINATOR: Olga.Murray@fssa.IN.gov, 317-232-7934

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GUIDE FOR SUBMITTING RÉSUMÉS TO YOUR WF SITE COACH:

Approval of a résumé is only the first part of the application process for Wraparound Facilitators. Once a résumé is approved, specialized training must follow, as well as the ***submission of a complete application packet for approval as a provider/staff.***

- Résumés for Wraparound Facilitators (WF) must be sent to your Wraparound Site Coach for approval. All other résumés for staff that will be providing Habilitation, Training and Support for the Unpaid Caregiver (FST), or Respite services must be forwarded to Julie Bandy, Provider Specialist, for approval.
- When submitting WF résumés to your site coach for approval via email, please put the **name of the applicant on the SUBJECT LINE.**
- Once your résumés has been approved, follow your site coach's instructions regarding registration for training on the University of Maryland website and the on-line registration for 'Intro to Wraparound Training.' Tobi training can be taken only after the WF's resume is approved by the site coach. The WF staff application doesn't have to be turned in before cohort trainings; However, WF services cannot be performed without first submitting a complete application and receiving an approval letter from DMHA. You must have an approval letter before receiving cases.

Tobi training is not a requirement. There are videos and guides on how to perform different tasks in the Tobi Documentation Page.

[Sign up for INSOC mailing list!](#)

All WFs should sign up for the INSOC mailing list for all announcements at <http://www.in.gov/fssa/dmha/2747.htm>

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Child Mental Health Wraparound Orientation (CMHW) for Wraparound Facilitators Webinar

The **new** and **only** webinar required for WFs is:

‘CMHW Orientation for Wraparound Facilitators’ Webinar

This webinar is found on the DMHA Provider Information Web Page (see link below). At the end of the webinar, a certificate is provided for the WF to fill out and sign. This certificate is included in the checklist as part of the required documentation on the Rendering Provider Application (*Section F*).

To find the required webinar, application forms and other documents, e.g., Tobi user agreement or Resource Guide for wraparound facilitator applications, go to the Provider Information web page for the latest copies: <http://www.in.gov/fssa/dmha/2764.htm>

Application Process Turnaround:

Please note that due to the ***new People Soft ID (PSID) process*** to obtain CRM (Tobi) licensing, there is a **four week turnaround** for the complete processing of WF applications. This includes new access site hires or backups. Please plan accordingly.

Staff and/or services are authorized for billing only when you receive a ‘Letter of Approval’ provided via email from Olga Murray, Provider Coordinator.

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- Q. May a wraparound facilitator transfer from one accredited agency to another?
- A. There has been much confusion about “transfers” of Wraparound Facilitators. To clarify, there are no “transfers” of Wraparound Facilitators or any other staff **between agencies**. All WF staff/employees must first resign from their employment at their current agency to include deactivation and removal of licensing **before** moving on to work for another agency. The new WF is considered a ‘new hire.’ Agencies must submit a new WF application with required documentation (for all required documents that should accompany the WF’s application, follow the checklist on page 7 of this document) and maintain a complete copy on site for all new hires. All completed background checks and screens should also be kept on site. After approval, the new WF staff will be provided with the new CRM (Tobi) licensing with new login ID, password, etc.

If the instructions above are not followed properly, the agency’s billing claim will pay to the previous agency.

For HIPAA licensing security and compliance, it is the agency’s responsibility to inform us of staff changes in order to keep the database and picklist up to date. You must report WF terminations and/or provide DMHA with resignation information for last day of employment, immediately. You may email olga.murray@fssa.IN.gov. Failure to inform DMHA of separation of employment allows your ex-wraparound facilitator/access site person to access participant records, in your agencies name. This exposes your agency and DMHA to liability.

Supervisors are still able to perform submissions, even if the WF is no longer at your agency.

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NEW! Follow this link to recorded instructions for completing applications forms to add a new WF employee/staff:

<https://indiana.adobeconnect.com/poqk1h69xndk/>

SUPPLEMENTAL INFORMATION FOR APPLICATIONS & DOCUMENTATION:

Please review before submitting your applications:

A new set of updated applications are on the Provider Information Website, including a new Tobi User Agreement. Always download your applications from the provider information page to ensure you have the latest versions for submission.

- Only complete application packets should be submitted to DMHA. Incomplete applications will not be processed.
- Include the approved résumé of the applicant as well as CANS SuperUser certificates.

Always include an Application Cover Sheet when submitting an application packet. Only use one cover sheet for the entire application packet. For the individual completing the application, make sure to provide your current contact information in case there are any questions or requests for more information (RFI). ***The Demographic Form and Provider Agreement is not required for new/additional staff application submissions for existing agencies:***

- To add a staff to an existing agency, the demographic form and provider agreement is not needed as part of the application submission. Note the recorded instructions above.
- User type (role) of licensing the Wraparound Facilitator is required on the Rendering Provider Application Form, Section F.
- For access licensing, we require your WF Site Coach's approval. Have your WF Site Coach email or include them on an email request to Olga Murray at olga.murray@fssa.IN.gov.

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- Please allow a four week turnaround period for the FSSA DMHA application process and approvals.
- A legible copy of a Driver's License must accompany the WF application. If necessary, use the 'enlarge' option on your copier when making this copy. We use the information on the DL to request PSIDs and need to have clear, legible copies.
- The *Child Mental Health Wraparound Orientation for Wraparound Facilitators* is found on the DMHA Provider Information Page: <http://www.in.gov/fssa/dmha/2764.htm>. This is a required webinar located under the subheading, ***Provider training webinars***. At the completion of the webinar, participants will have access to a certificate which should be printed, signed and completed in order to be submitted with the WF application.
- **Either** a copy of a WF training certificate from the University of Maryland, **or** a copy of your Wraparound site coaches' email approval of the applicant's résumé, must be include in the application packet.
- A signed copy of the latest Tobi *Database User Agreement* (found on the provider information web page) must accompany all WF, WF Supervisor, and or access applications/licensing requests (see page 7). An application is not complete without the database user agreement.
- Do not submit applications without copies of CPR training cards. They must be included in the application as it shows both whether the applicant passed the class and the dates of completion and expiration. Applications are incomplete without the proof of CPR.
- ***All required background screen results should be maintained at the accredited agency.*** Although these documents do not accompany the applications submitted to DMHA, they should be kept at the agency and available to provide to a State DMHA Representative conducting an Audit or Quality Assurance site visit.

*****CPR CERTIFICATIONS*****

- Wraparound Facilitator CPR Certifications should **not lapse**. Always maintain current CPR Status. It is a violation of Indiana Code and Policy to provide WF Services with a lapsed CPR Certification.

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NEW EMPLOYEE CHECKLIST for Accredited Agency

The Demographic Form and Provider Agreement is not required when submitting applications for new/additional staff for existing agencies. Keep background checks at the agency.

1. Application Cover Sheet (to be completed by the agency supervisor submitting the ap)
2. Rendering Provider Application Form (to be *initialed & signed* by new staff). Check Section B and include counties the staff will be serving in.
3. Section C: Resume (must be the same resume approved by DMHA prior to application)
4. High school diploma, GED, or advanced degree
5. Current CPR certification
6. Valid Driver's License (picture of person on ID must be recognizable, please lighten the copy and enlarge) do not submit illegible versions by email, they will be returned.
7. Section F: CANS Certificate(s) of Training
8. **Must submit one:** Either University of Maryland Training Certificate **or** copy of email approving resume from your WF site coach
9. CMHW Orientation for Wraparound Facilitator Webinar Certificate (signed and completed)
10. Database (Tobi) User Agreement (all WFs must READ this as they initial and sign)
11. Mark which 'Database User Type(s)' of licensing is needed in Section F. Make sure to check all appropriate licensing user role(s) the WF will need on this form.
 - ☐ Wraparound Facilitator
 - ☐ Wraparound Facilitator Supervisor
 - ☐ Access **or** Access Site Main Contact

At **application approval**, a PeopleSoft ID (PSID) and access to a state network account are established for the WF so that he or she may have access to Tobi database. Login credentials will be sent to the new WF from the Tobi (DMHA) Help Desk in a separate email. *Help and train your new users regarding their PSIDs, network accounts, training, & login requirements.*

Send all applications to:

Olga Murray,
Youth Provider Coordinator
Division of Mental Health & Addiction
402 W. Washington Street, Room W-353
Indianapolis, IN 46204
Phone: 317-232-7934

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REAUTHORIZATION CHECKLIST for Accredited Agency

Per the CMHW Module (manual, page 57), “All required trainings for Wraparound Facilitators and Wraparound Facilitator Supervisors are eligible as ongoing professional development training for the purposes of reauthorization.” Including CANS/ANSA training, booster trainings, and ‘Your Role in Wraparound.’ Use your agency’s provider summary for a checklist of CMHW employees to reauthorize!

Part 1: Accredited Agency Level Documentation

- ☐ Application cover sheet (Only 1 form per submission packet. Complete top & check reauthorization under application type.
- ☐ Provider demographic form (Complete Sections A, B, & G - initial and sign unless changes needed)
- ☐ Section B: Copy of current agency accreditation or certification from DMHA of CMHC status
- ☐ New DMHA Provider Agreement (new initials, signature, and current date)
- ☐ Enter Federal Tax ID Number
- ☐ Send a letter to your local SOC Governance informing them of the counties in which you are reauthorizing for and provide us a copy with your reauthorization submission. No response needed.

For each WF, complete a Rendering Provider Application. Complete Section A, and check the appropriate boxes for their appropriate service in Section B. Although the form should be filled out by the agency, it should be initialed and signed by the employee. If you’ve had a brand new hire less than one year before reauthorization end date and they’re on your summary list, include a copy of the previously submitted rendering form noting that this is a new employee. No docs or prorated continuing education required. Accredited agencies should complete background checks for all employees but keep them on file at agency. Do not submit background checks.

Part 2: Accredited Employee Level Documentation for Wraparound Facilitators (only these docs are required per WF for reauthorization):

- ☐ Rendering Provider Application -1 form per employee - complete Sections A, B, C, & G.
- ☐ Copy of current CPR certification listed in Section C (for all providers)
- ☐ Copy of employee driver’s license listed in Section C (enlarged and legible)
- ☐ Copies of all 30 training hours/credits (or 10 per year chronologically)

Note: If you have an employee providing Wraparound Facilitation, FST and HAB services, then mark the appropriate services in Section B of the Rendering Provider Application form. Combine the documentation requirements above.

FST, Habilitation, & Respite Employee

- ☐ Rendering Provider Application (new form – 1 form required for each employee)
- ☐ Copy of Employee Driver’s License (enlarged and legible)
- ☐ Copy of current CPR (for all providers)
- ☐ Copy of current auto insurance (for Hab & Respite providers only- must have matching VIN# of vehicle registration)
- ☐ Copy of vehicle registration (for Hab & Respite providers only - must have matching VIN# of auto insurance)
- ☐ All 30 training hours/credits for the past three years (in chronological order)

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NEW ACCESS LICENSES FOR ACCESS SITES:

If a staff already has a Wraparound Facilitator User License and/or WF Supervisor license and requires the access role added to current licensing, please send an email to Olga Murray, Youth Provider Coordinator at olga.murray@fssa.IN.gov, and copy your Wraparound Site Coach for acknowledgement or approval of this request.

For a **new employee** that will be handling the **access site role**, who is not a current CRM (Tobi) user or WF, and will be the designated access site key contact, please contact Tanya Merritt-Mulamba for access site contact list update and then submit the following to DMHA for processing:

- 1.) Complete an application cover sheet.

Under the shaded subheading “The following is ONLY for Access Site use...” located on the lower half of the cover sheet:

- ☐ Check the box by *Add/Edit Access Site Main Contact* and complete the contact information
- ☐ Include the counties this access site contact will be providing services for.
- ☐ Complete a rendering provider application **if** the individual will also be providing WF services along with the required documentation.
- ☐ Indicate the appropriate licensing user role(s) that will be needed

- 2.) ***If the access staff will not be providing WF services and will only be providing Access Site responsibilities***, leave out the rendering provider application. The completed application cover sheet with a copy of Driver's License and signed user agreement will suffice.

- 3.) Submit via email to DMHA – olga.murray@fssa.IN.gov