

Wraparound Team Minutes Template

Youth:	Parent:	Agency:
Attendees:		
Location:	Date:	Time:

Family Vision Statement:
Team Mission Statement:
Focus Needs in the Plan of Care:
Need 1:
Need 2:
Need 3:

<u>A</u>ccomplishments/Successes since last meeting:

Assess the Plan

Follow Through: Assignments from last meeting:

Who:	Task:	Completed?/Barriers/Notes

Facts: What are the results/behavioral outcomes showing?

Outcome #1:	
Start date:	Baseline Measurement:
Target Measurement:	Current Measurement:
Outcome #2:	
Start date:	Baseline Measurement:
Target Measurement:	Current Measurement:

Feeling: How are family members and team members experiencing progress?

How does the person with the need rate progress?	Who Rated?	Percentage Met Need	Comments

Team feedback around process and progress:

Aadjust the Plan

Need 1:
Current Direction:
Changes to Direction or Strategies:

Need 2:

Current Direction:

Changes to Strategies & Direction:

Assign: Identify commitments on activities

Next steps/Assignments:

Who:	Task:	By when:

Additional Notes:

Next meeting date, time & location: _____

Care Coordinator Signature/Credentials

Date

Date minutes distributed to team