

Child Welfare and Social Services Preliminary Reform Plans

For several years, North Carolina has undergone an evaluation that resulted in the development of an improvement plan for its child welfare and social service structures. In 2017, the General Assembly passed [State Law 2017-41](#) that created a legislative Social Services Regional Supervision and Collaboration Work Group and also called for a consultant firm to recommend needed changes in the system. Most recently The Center for the Support of Families, completed the “Preliminary Reform Plans”, including many draft recommendations to revamp the social service and child welfare systems. These proposed plans have already been presented to the legislative work group and are now a part of a larger cadre of discussions, plans, and proposals to reform the social services and child welfare systems. Ultimately, the General Assembly will consider and act on the recommendations of their legislative work group, and NC DHHS will move forward accordingly using all of the information developed.

Social Services Preliminary Plan

The preliminary plan cites five primary resource issues in the social service and child welfare system:

1. Inconsistent policy development and dissemination;
2. Deficiencies in workforce development;
3. Underserved populations in need of mental health services;
4. Lack of high quality community resources;
5. No easy access to reliable program and performance data.

The report includes a recommendation to create an Office for County Support that will be housed in the NC Division of Social Services along with five other new offices: Child Safety, Family Support, Child Permanency, Professional Development, and Performance Improvement. The overarching goal is to align the State DSS office with the vision for the local social service and child welfare system. There are a myriad of specific recommendations as well that were divided by the immediacy by which they should be addressed.

Child Welfare Preliminary Plan

The preliminary plan identifies the following as a basic framework for the child welfare system: vision for outcomes; strong support and leadership from NC DSS, regional and county offices; partnerships to better meet the needs of children and

families; statewide practice framework; financing and data to improve practice and outcomes; capable and stable workforce at all levels; capacity to implement effectively.

A provision in the preliminary plan states, “Too many barriers exist to the timely provision of needed mental health services for children in foster care in North Carolina.” The consultants found that 81% of the DSS staff who were surveyed perceived “some” or “significant” barriers to meeting children’s behavioral health needs. One specific issue that has been raised is expediency of obtaining services that may be located out of the LME/MCO catchment area. No specific recommendations were made in this preliminary plan to address this issue. However, the Performance Improvement Plan developed by NC DHHS does include provisions to strengthen ties between local social services and LME/MCOs.

Background

A 2015 federal review found several systemic areas that require changes and update. Many of those areas were related to insufficient statewide information systems to gather/utilize data and track compliance in several key areas. The State stepped up to address these areas and generally evaluate the social service and child welfare systems. The preliminary plans just published were done by consultants under the auspices of the Office of State Budget and Management. These draft plans address the insufficiency of information systems and go beyond that to areas including judicial and behavioral health collaboration in the system. Specific to behavioral health, the consultants gathered stakeholder comments during the review that included general frustration with the adequacy of mental health and substance use services, Medicaid, transportation, housing, domestic violence support, services geared toward the Hispanic population, and services available in rural areas. Stakeholders also expressed concerns about delays if a child has to cross county lines and be served in a different LME/MCO catchment area. Finally, stakeholders commented that the system did not have the capacity to individualize services.

NC DHHS has already created a [Performance Improvement Plan](#) that includes goals, strategies and activities for revamping social services and child welfare such as strengthening policies and procedures and enhancing training and technical assistance for staff working in the social services and child welfare system; operationalizing a state quality assurance system; strengthening ties between local social service offices and the judicial system as well as with LME/MCOs. The goals also include developing processes to increase stakeholder knowledge and

engagement and ramping up efforts on foster and adoptive placements. Finally, NC DHHS is working to upgrade the North Carolina Families Accessing Services through Technology (NC FAST) system to ensure it has capacity to provide quality data, build reports, and create data dashboards.

LME/MCO Involvement in Child Welfare Improvements

The strategy the State used for local social leaders and LME/MCO leaders to consider joint changes was a series of summits that resulted in a report entitled, [“Bridging Local Systems”](#). From those deliberations, NC DHHS has established activities to be embedded in policies for county department of social services (DSSs) and LME/MCOs that will require them to collaborate on and hold each other accountable for accessible, quality, and timely behavioral health services for child welfare-involved children as well as families involved with the child welfare system who are referred to the LME/MCOs for services.

LME/MCOs and each county social services office in their catchment area were required to develop and sign a written agreement by June 2018 that:

- Establishes a standard for how and when that local DSS should make referrals of children and adults involved with the child welfare system;
- Incorporates standards that are included in the LME/MCO contract with NC Medicaid for timeliness of assessment and initiation of services, timeliness of utilization management decisions, and individualized service planning;
- Establishes protocols for access to services when a child is placed outside of the LME/MCO catchment area;
- Specifies how services gaps for the local child welfare system will be identified;
- Includes agreed upon collaborative or integrative service strategies and determine a way to track them.

NC DHHS will also track the collaboration between LME/MCOs and the county social service offices by developing a quarterly report on performance, providing consultation quarterly to those areas not achieving the performance standards, and, developing a statewide communication plan.

Next newsletter will include an update on the work of the Legislative Social Services Regional and Collaboration Work Group.

For additional information, read the i2i Center policy exchange, [“Strengthening DSS and LME/MCO Collaboration on Children In or At-Risk of Out-of-Home Placement”](#)