



Who We Are

- Center for the Support of Families: Nationwide leader in consulting and program redesign for human services agencies
- ♦ Westat: Research firm specializing in serving government agencies
- National Experts: Karen Baynes Dunning, Robert Doar, Amelia Franck Meyer and Terry Shaw





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Social Services and Child Welfare Preliminary Reform Plans in Context

SL 2017-41

Social Services Working Group

North Carolina's comprehensive approach to social services system reform which includes: Medicaid transformation, Memorandums of Understanding, Family First Prevention Services Act (FFPSA), and on-going implementation and assessment of data systems

Government Solutions

An Environment Right for Focused Reform

State, county and stakeholder recognition of need to reform – this is very unique!

Commitment to work to make strategic change to better serve citizens

Staff at every level with passion for the work, willingness to face challenges, and work collaboratively to improve outcomes for most vulnerable citizens





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Three-Phased Approach to CSF Work

Phase 1

Assess and make recommendations for state supervision and accountability for the social services system.

Assess and make recommendations specific to the child welfare program

Phase 2

Work with state and counties to expand detailed recommendation details, develop implementation plans, and monitor and provide technical assistance for reforms implemented without needs for new laws or budget authority

Phase 3

Continue technical assistance and monitoring for long-term reform implementation

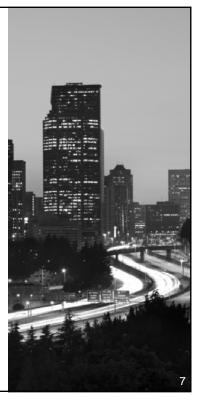




A Road Map for Reform

The reports provide a road map for social service child welfare reform

It culminates six months of intense, rewarding work and charts the course of exciting opportunities for reform in management of the delivery system, improved child welfare practice and better services for North Carolina citizens







Important Note about Findings and Recommendations

Variation exists in how individual counties deliver services and work with children and families. Many counties are engaging in best practices tailored to address their county's specific needs. Findings in this report may apply to counties to differing degrees.

Many of the recommendations in the reports identify the state as the primary responsible entity because of this variation broad-scale system improvement in all 100 counties will require state leadership and a state office that is equipped to lead.



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Methodology: Social Service Preliminary Reform Plan

Focus groups and individual interviews with DSS state and county leadership, county staff, and stakeholders

Analysis of "best practices" of organization and management in state supervised, county administered social service systems

Staffing survey for all 100 counties

Site visits to 15 selected counties to obtain representative detail on operations, budgets, and staffing.





GOVERNANCE

Recommendation 1

Enhance statutes to ensure that there is consistency of mission and authority of the county boards governing social service agencies. Establish minimum qualification for board members, and clearly delineate their duties and responsibilities.

Recommendation 2

Provide training resources for county board members, to include training for new members as well as provide annual training updates.





11

Findings and Recommendations

LEADERSHIP

The General Assembly must continue its strong leadership to provide oversight and support through appropriations to fund DHHS' expanded staffing, a strong regional structure, oversight, training and program development inherent in these social services and child welfare recommendations.

Recommendation 17

Charge the policy council with taking the lead on developing a DSS Strategic Plan.





LEADERSHIP

Recommendation 19

With county participation, assess the performance goals included in the 2018-19 MOU, enhance with specific outcome measures that correspond to better client outcomes, establish valid baselines for individual counties and create a process for measuring progress over time in regular intervals.





13

Findings and Recommendations

EFFECTIVE USE OF DATA

Recommendation 27

Identify data quality concerns and discuss available data alternatives that can be featured in the Wellness Dashboard, while state data improvement strategies are underway.

Recommendation 23

Craft and implement a CQI Plan for the referenced programs.





REGIONAL OFFICES – ORGANIZATION AND MANAGEMENT

Recommendation 3

Create a minimum of seven regional offices to support the counties. We also encourage exploring the option for DHHS/DSS to consider grouping the three very large counties into a region of their own. [Fundamental]





15

Findings and Recommendations

REGIONAL OFFICES - STAFFING

Recommendation 5

Staff each regional office with the positions listed in Recommendation 5.

Recommendation 8

Create a new "Office for County Support" team (OCS) in the Central Office. The Office would be led by a "Director for County Support", classified as a Deputy Director position. The team would report to the Division Director for Social Services. If DHHS elects to create a position in the Secretary's Office to supervise all support for county operations, this position should be placed in that office.





STAFFING LEVELS, EQUITY OF COMPENSATION

Recommendation 11

Review OSHR's recent compensation review of all DHHS/DSS positions, with an eye toward establishing new or redefining existing DHHS/DSS positions, based on the recommendations in this report

Recommendation 12

Ensure competitive salaries for Central Office Division of Social Services to enhance their ability to attract and retain highly-qualified staff.





17

Findings and Recommendations

STAFFING LEVELS, EQUITY OF COMPENSATION

Recommendation 13

Establish a statewide minimum salary for county social services positions. Devise a process for the state to augment county social service staff salaries, to achieve equity among the counties with regard to their ability to attract and retain highly-qualified staff.

Recommendation 14

Provide matching funds to counties who are not meeting caseload standards, so they can create and staff new positions.





TRAINING

Recommendation 28

Each program should maintain a Central Office training and professional development team to support regional trainers [Fundamental]





19

Child Welfare Preliminary Reform Plan

Methodology: Child Welfare Preliminary Reform Plan

Review of systemic factors

Three staff surveys

Review of quantitative data reports

Participation in meetings and conferences

Review of data from existing state case

record reviews

Theory of Change Session

Interviews, Focus Groups and Site Visits





24

Findings

Child Protective Services

Permanency Services

Prevention and In-Home Services

Health, Mental Health and Educational

Services

Child Fatality Reviews

Services to Older Youth

Placement into Foster Care

Reunification Services







VISION FOR OUTCOMES

Recommendation 1

Recruit and hire one person with implementation experience and expertise to create a core, representative implementation team to guide the implementation of these recommendations.

Recommendation 2

Convene a broad group of stakeholders to more fully develop a vision for improving outcomes in North Carolina – starting with the theory of change and identified outcomes developed in partnership with CSF on July 9 and 10 in Durham, North Carolina.





STRONG SUPPORT AND LEADERSHIP FROM THE STATE, REGIONAL AND COUNTY OFFICES

Recommendation 5

Create five new high-level positions in the state Division of Social Services at competitive salaries and then advertise, recruit, and select candidates qualified to lead.





25

Recommendations

PARTNERSHIPS ARE CULTIVATED AND NURTURED TO BETTER MEET THE NEEDS OF CHILDREN AND FAMILIES

Recommendation 11

Engage, collaborate and coordinate with courts to address and remedy existing barriers, while creating buy-in for the new vision and jointly tracking key outcomes for children, youth, and families.

Recommendation 12

Strengthen partnership between the state Division of Social Services and the Divisions of Medical Assistance and MH/DD/SAS to make sure behavioral health services are available to parents and ensure appropriate placements for children in foster care.





STATEWIDE PRACTICE FRAMEWORK

Recommendation 15

The state and CSF should begin immediately to further explore the fit and feasibility of adapting and effectively implementing Safety Organized Practice (SOP) as the comprehensive statewide practice framework to create consistency in child welfare practice that is trauma-informed, culturally-competent, family-centered, and safety-focused throughout North Carolina.





27

Recommendations

DATA AND FINANCING

Recommendation 31

Create an analytic data file, that can be periodically updated, that links NC FAST data with data from the legacy system.

Recommendation 32

Adopt outcome measures aligned with a safety-focused, family-centered, trauma-informed, culturally-competent system.





CAPABLE AND STABLE STATE, REGIONAL AND COUNTY CHILD WELFARE WORKFORCE

Recommendation 39

Pre-service training needs to be redesigned to better prepare a workforce, the majority of whom are coming to child welfare without a social work degree.

Recommendation 40

Training should be integrated into a larger strategy for professional development and a diverse, representative design team should be charged with co-creating an approach for designing and developing learning programs (preparation, training, coaching, transfer of learning and support) as opposed to stand-alone training modules.





20

Recommendations

CAPACITY TO IMPLEMENT EFFECTIVELY

Recommendation 46

Create a teaming structure for statewide decision-making that will provide input and feedback loops from key stakeholders that will also allow for nimble and efficient decision-making at the state level.





