Organization and Governance of NC Human Services Agencies

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County Options

✓ Stay the same
✓ Options under “old” laws
✓ Options under new law (H 438)
Options Under “Old” Laws

- Public health
  - District health departments
  - Public health authorities
  - Public hospital authority (Cabarrus only)
- Social services
  - Share a Director
- Both
  - County departments
  - Interlocal agreements
  - Intra-county collaboration and consolidation

Options under New Law (H 438)

- **Option 1**
  - BOCC assumes powers and duties of local boards.
  - Agencies stay the same.

- **Option 2**
  - BOCC creates a consolidated human services agency (CHSA).
  - BOCC appoints a CHS board.

- **Option 3**
  - BOCC creates a CHSA.
  - BOCC assumes powers and duties of the CHS board.
Option One

- Departments not consolidated into single agency
- BOCC assumes powers & duties of board(s) after public hearing w/30 days’ notice
- BOCC appoints dept. directors
- If public health affected, must appoint health advisory committee
- Employees subject to SHRA

Option Two

- BOCC creates CHSA & appoints board
- Manager hires CHS director w/advice & consent of CHS board
- CHS director appoints person with health director qualifications
- SHRA option
**Option Three**

- BOCC creates CHSA
- BOCC assumes powers & duties of CHS board after public hearing w/30 days notice
- Manager hires CHS director w/advice & consent of BOCC acting as CHS board
- CHS director appoints person with health director qualifications
- SHRA optional
- If agency includes PH, must appoint health advisory committee

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**Key Differences**

<table>
<thead>
<tr>
<th>Board</th>
<th>Hire Agency Director</th>
<th>HR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DSS</strong></td>
<td>Appointed; 3-5 members</td>
<td>Board hires</td>
</tr>
<tr>
<td><strong>PH</strong></td>
<td>Appointed; 11 members</td>
<td>Board hires</td>
</tr>
<tr>
<td><strong>One</strong></td>
<td>Elected (BOCC)*</td>
<td>BOCC hires</td>
</tr>
<tr>
<td><strong>Two</strong></td>
<td>Appointed; up to 25 members</td>
<td>County manager hires with advice &amp; consent of CHS board</td>
</tr>
<tr>
<td><strong>Three</strong></td>
<td>Elected (BOCC)*</td>
<td>County manager hires with advice &amp; consent of BOCC</td>
</tr>
</tbody>
</table>

* If public health affected, must appoint health advisory committee
Governing Boards

• If create a CHSA, governing board is either:
  – Consolidated Human Services Board
  – Board of County Commissioners

• Governing board
  – Assumes powers and duties of any board that is abolished (PH and/or SS)
  – Assumes other express powers and duties, such as
    • “Assure compliance with laws related to State and federal programs”
    • “Conduct audits and reviews of human services programs, including quality assurance activities...”

Hire Agency Director

• If create a CHSA
  – County manager hires with advice and consent of governing board:
    • Consolidated Human Services Board
    • Board of County Commissioners
  – Options regarding leadership
    • Hire or appoint new CHS director?
    • Move DSS or PH director into role?
    • Delegate authority from CHS director to agency staff?
Personnel

• Now DSS and PH employees subject to State Human Resources Act (formerly known as State Personnel Act or SPA)
• If create a CHSA, BOCC may elect to remove employees from SHRA
  – If so, employees must be subject to policies that comply with the Federal Merit Personnel Standards

Federal Merit Personnel Standards

• Recruiting, selecting, and advancing employees based on merit
• Equitable and adequate compensation
• Training employees
• Retaining/separating employees on the basis of performance
• Correcting inadequate performance
• Assuring fair treatment of applicants and employees
• Assuring employees are protected against coercion for partisan political purposes

5 CFR § 900.603
Defining Goals

- Before heading down this road, discuss the county’s goals. Goals could include, for example:
  - Improve service delivery
  - Create a new vision for human services programs
  - Create a unified personnel system for all county personnel
  - Change the relationship between board of county commissioners and the departments
  - Identify efficiencies and reduce human services spending

Budget Impact

- How might a county save money in human services programs when creating a CHSA?
  - Not filling vacancies, including agency director position
  - Cross-training program staff to work in both PH and SS
  - Combining back office functions such as finance, HR or IT
  - Moving operations into new, less expensive, shared space
  - Realizing efficiencies through operational changes
  - Reducing or eliminating optional services
  - Entering into interlocal agreements with neighboring counties for select services
**Budget Impact**

- How might a county save money in human services programs *without creating a CHSA*?
  - Not filling vacancies, including agency director position
  - Cross-training program staff to work in both PH and SS
  - Combining back office functions such as finance, HR or IT
  - Moving operations into new, less expensive, shared space
  - Realizing efficiencies through operational changes
  - Reducing or eliminating optional services
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**Who pays for local public health?**

![Figure 4.1: Median Proportion of Expenditures by Funding Source FY2010](chart.png)

*Percentages do not total 100 percent for every agency type since median, not mean, figures were used.*

Data Source: NC DHHS Revenue Source Book, FY2010
How much does it cost?

Table 4.4. Median, Minimum, and Maximum Total Expenditures per Capita, FY2010

<table>
<thead>
<tr>
<th></th>
<th>Median</th>
<th>Minimum</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHD - High Pop (n=24)</td>
<td>59</td>
<td>37</td>
<td>90</td>
</tr>
<tr>
<td>CHD - Med Pop (n=23)</td>
<td>85</td>
<td>39</td>
<td>129</td>
</tr>
<tr>
<td>CHD - Low Pop (n=28)</td>
<td>91</td>
<td>48</td>
<td>282</td>
</tr>
<tr>
<td>DHD (n=6)</td>
<td>98</td>
<td>31</td>
<td>189</td>
</tr>
<tr>
<td>PHA (n=1)</td>
<td>210</td>
<td>210</td>
<td>210</td>
</tr>
<tr>
<td>HA (n=1)</td>
<td>105</td>
<td>105</td>
<td>105</td>
</tr>
<tr>
<td>CHSA (n=2)</td>
<td>50</td>
<td>48</td>
<td>51</td>
</tr>
</tbody>
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Data Source NC DHHS Revenue Source Book, FY2010

Hot Topics

- What should we do before we remove employees from SPA? After?
- Do we need to change our county’s personnel policies to comply with federal regs?

Information sharing

- Once we create a single CHSA, can we share information within the agency more freely?
- When the BOCC is the governing board, may the commissioners have access to confidential client information?

Personnel
Delegation

- Once the new CHSA director assumes the powers and duties of the DSS/PH director(s), what responsibilities may be delegated to others?
- How should delegation be accomplished?

Role of boards

- What does “consent” mean?
- When the BOCC is the governing board, what is the role of the advisory board?
- What kind of training should the board receive?

Questions?

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More information about this topic:
http://www.sog.unc.edu/node/31296