



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF SOCIAL SERVICES

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

WAYNE E. BLACK
SENIOR DIRECTOR FOR SOCIAL SERVICES
AND COUNTY OPERATIONS

February 1, 2017

SENT VIA ELECTRONIC MAIL

The Honorable Louis Pate, Chair
Joint Legislative Oversight Committee on
Health and Human Services
North Carolina General Assembly
Room 1028, Legislative Building
Raleigh, NC 27601

The Honorable Josh Dobson, Chair
Joint Legislative Oversight Committee on
Health and Human Services
North Carolina General Assembly
Room 301N, Legislative Office Building
Raleigh, NC 27603

Dear Chairmen:

Session Law 2016-94, Section 12C.1.(b) requires the Department of Health and Human Services to submit, to the Joint Legislative Oversight Committee on Health and Human Services by December 1, 2016, a Statewide Strategic Plan for child welfare services that complements the required federal Program Improvement Plan (PIP) in addition to other key findings and considerations.

On November 23, 2016, the Department advised the Committee that, due to several factors including State and county – level ongoing response and recovery efforts regarding Hurricane Matthew, the report due on December 1, 2016, would be delayed no later than 60 days. Pursuant to that notice, the Department is pleased to submit the attached report.

Should you have any questions concerning this report, please contact me at 919-527-6335 or Wayne.Black@dhhs.nc.gov.

Sincerely,

A handwritten signature in black ink that reads "Wayne E. Black".

Wayne E. Black
Senior Director, Division of Social Services

cc:	Kolt Ulm	Wayne Black	Deborah Landry	Lindsey Dowling
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Child Welfare Strategic Plan
Session Law 2016-94, SECTION 12C.1.(b)



Report to the
Joint Legislative Oversight Committee on Health and Human Services

By
North Carolina Department of Health and Human Services

February 1, 2017

Reporting Requirement

SECTION 12C.1.(b) Statewide Strategic Plan. – The Division of Social Services shall develop a statewide strategic plan for child welfare services that complements the required federal Program Improvement Plan. The statewide strategic plan shall, at a minimum, address the findings of the North Carolina Statewide Child Protective Services Evaluation, which was conducted as required by Section 12C.1(f) of S.L. 2014-100, in the areas of county performance, caseload sizes, administrative structure, adequacy of funding, social worker turnover, and monitoring and oversight. The plan shall also address measures for ensuring that Native American children in this State are served in a culturally appropriate manner, including in placements for adoption and foster care. The Division shall submit the plan to the Joint Legislative Oversight Committee on Health and Human Services by December 1, 2016, for consideration by the 2017 General Assembly.

Executive Summary

North Carolina's Child Welfare strategic plan outlines a comprehensive and clear approach to accomplishing the complex work of achieving safety, permanency, and well-being for North Carolina's children. While large-scale, it addresses what needs to be done to accomplish the mission and vision for North Carolina's Child Welfare program.

DHHS partnered with stakeholders to complete the strategic plan, and will continue to work with community partners, providers, foster families, legislators, citizens of North Carolina, and other stakeholders to ensure children are safe and families are strong. DHHS further recognizes that the plan must lay out strategies to both immediately address urgent issues facing the State as well as build a strong foundation for the future. Therefore, the strategic plan includes several levels of activity that will move the State forward over the short term and will set the State up for long term success.

Although the strategic planning team sought to encompass many of the priority areas to address the long-term system improvements, two areas need further resources to adequately develop a comprehensive plan.

- An analysis of the current "Administrative Structure" of the Child Welfare System must encompass the many programs and services at state and local levels.
- Consideration of the "Adequacy of Funding" will require collaboration of multiple stakeholders from State, County, and private entities, as well as a thorough analysis of funding options.

Throughout the process of developing this plan, adequacy of funding was noted as a critical component to any improvement in the delivery of services, and ultimately, positive outcomes for children and families. In reality, we would recommend that for effective planning purposes, administrative structure and adequacy of funding be considered together.

Introduction

In preparing this Strategic Plan for Child Welfare in North Carolina, the planning group sought to create a roadmap that will guide the work of the N.C. General Assembly, the Department of Health and Human Services, the County Departments of Social Services, and other key stakeholders to:

- Strengthen our child welfare system to assure that every child in North Carolina is protected from abuse or neglect,
- Assure that families who interact with the child welfare system receive assistance from well trained and skilled practitioners,
- Insure that an array of quality services are available to meet the needs of children and families involved with child welfare,
- Assure that all components of the Child Welfare system work collaboratively to build stronger communities.

A significant investment in strengthening the Child Welfare System in North Carolina from the N.C. General Assembly has been achieved over the past few years by:

- Funding additional child protective services workers in County Departments of Social Services
- Strengthening training, consultation, and monitoring oversight capacity of the Division of Social Services
- Enhancing child abuse prevention and support services available to families
- Increasing the capacity of the Foster Care system to serve emerging adults age 18 -21
- Ensuring all children served by the Foster Care system are able to participate in developmentally enlightening activities.

A continued commitment to invest in the goals and objectives detailed in this Strategic Plan over the next five (5) years will enable North Carolina to continue to significantly improve in the provision of child welfare services.

In preparing this plan, we have captured the objectives and activities in three primary goals:

1. North Carolina's Child Welfare workforce is culturally aware, supported in practice, and instrumental in the development of an improved, responsive system.
2. A robust service array that is designed to meet the needs of the population served.
3. Administrative Infrastructure to operationalize a continuous quality improvement (CQI) system/process using data to measure child and family outcomes

The objectives included under each goal will require significant planning, coordination and investment of resources. Building and maintaining a robust child welfare system will require the active engagement of many stakeholders, including but not limited to the General Assembly, the Department of Health and Human Services, Administrative Office of the Courts and other State Agencies, County Departments of Social Services, public and private University Schools of Social Work, LME/MCOs, health, mental health and substance abuse service organizations, community colleges, judges and court personnel.

It is our hope that this document will, over the next five years, guide our efforts in creating an exemplary child welfare system in North Carolina.

I. Strategic Planning Process

DHHS, with the support of the North Carolina Association County Directors of Social Services (NCADSS) engaged Casey Family Programs (CFP) to assist in the development of this strategic plan. CFP facilitated participant feedback from DHHS, NCADSS and the Commission of Indian Affairs. The referenced sources for discussion included the 2014-19 Child and Family Service Plan (CFSP), the Child and Family Services Review (CFSR), the Draft Program Improvement Plan (PIP), the Child Protective Services (CPS) statewide evaluation, the NCACDSS Road Map and the final report of the Governor's Task Force on Mental Health and Substance Use.

Child Protective Services Evaluation

This strategic plan was developed utilizing the CPS Evaluation as a source of information to assess the current system and the opportunities for improvement. The NC CPS evaluation report included 18 observations and recommendations that addressed systemic issues across a range of domains of practice and administration. The strategic planning team identified which of the 18 recommendations would provide the greatest return on investment for improving the overall Child Welfare system.

Child and Family Services Review, Program Improvement Plan

This strategic plan is offered in the context of the 2015 Child Family Services Review (CFSR) and the Program Improvement Plan. As the cognizant state agency for Title IV-B and Title IV-E funding, DHHS must participate in the CFSR as a method of ensuring conformity and compliance with federal regulations. This review closely examined child and family outcomes, and systemic factors through a variety of methods including case reviews, and interviews with stakeholders and families. The results of the review and any areas needing improvement result in a required Program Improvement Plan (PIP). The alignment of the strategic plan and the CFSR requirements will allow DHHS to be more transparent and accountable to meet both the state and federal requirements and will begin a consistent dialogue concerning the well-being of families and children in North Carolina.

The Goals for Child Family Services Review - Program Improvement Plan:

Goal 1: Improve the outcomes of safety, permanency and well-being through the establishment of clear performance expectations for practice in Child Protective Services assessments, In-Home services and Foster Care services.

Goal 2: Improve the outcomes of safety, permanency and well-being through the utilization of a statewide quality assurance system which will identify the strengths and needs of the service delivery system.

Goal 3: Improve the permanency outcomes for children through collaboration with the judicial system.

Goal 4: Strengthen cross-system service provision to improve safety, permanency and well-being outcomes for children and families.

Goal 5: Enhance the statewide data quality, collection and dissemination of information regarding services provided.

II. Mission, Vision, and Values

The DHHS strategic planning team developed both a mission and vision statement as well as a set of core values and strategies to communicate direction for this strategic plan.

Mission Statement:

In collaboration with federal, state, local public and private partners, we aim to ensure children and youth are free from abuse and neglect and have safe, stable, and supportive families.

Vision Statement

Every child in North Carolina will grow up in a safe, permanent family who have the capacity to meet their well-being needs.

Core Values

- Everyone desires respect
- Everyone needs to be heard
- Everyone has strengths
- Judgments can wait
- Partners share power
- Partnership is a process

Additionally, Child Welfare in North Carolina remains committed to the following concepts:

- We believe evidence and research informs practice.
- We believe continuous education is a foundation to child welfare service delivery.
- We value cultural preservation, integrity, accountability, and innovation.

III. Child Welfare Program Goals

DHHS focused on the development of three goals that address the primary concerns of the Child Welfare program. The purpose of this plan is to build the systems and structure that will support outcomes for the future while also addressing immediate challenges that have evolved over

time. With these goals, the plan balances the priorities of being responsive to immediate need while building systems to ensure sustainability and success over the long term.

Accompanying each of the three goals are objectives and strategies with metrics and timelines. As part of the strategic planning process, it was critical to consider the ongoing initiatives; therefore, many of these strategies are in process and are estimated to be completed at various times during the next five years.

Goal One: North Carolina's Child Welfare workforce is culturally aware, supported in practice, and instrumental in the development of an improved, responsive system.

The Child Welfare workforce is the most important asset to the Child Welfare program. Staff turnover is a significant systematic issue and must be considered when developing training and support services. Staff turnover leads directly to increased county and state costs, increased caseloads, increased number of placements for children, and a higher risk of maltreatment occurrence. Training for supervisors and leaders who support social workers who are in direct contact with children and families will be provided. Supervisor training will focus on building and enhancing communication skills, specifically the ability to articulate legal, policy, and practice decision. To achieve this goal, the focus is to enhance the State's capacity to ensure a competent and well-trained county based-child welfare workforce by increasing the availability of localized, mobile training tailored to specific needs.

In a state-supervised, county-administered child welfare system, clearly defined practice standards are critical to success. Continuous quality improvement (CQI) efforts drive policy development and interpretation, and trainings from the State to ensure consistent practice across counties. CQI efforts measure the wellbeing, safety, and permanence of children in the child welfare system.

The provision of technical assistance to counties in the development and implementation of their performance improvement plan, track and measure these improvements, and quantify outcomes to ensure consistency across counties is key to progress.

Goal Two: A robust service array that is designed to meet the needs of the population served.

Children enter foster care because they have been abused and/or neglected. These same children often have behavioral health needs and have experienced significant trauma. Children placed in foster care need temporary caretakers who understand their experiences and who can meet their individual needs. Positive outcomes for children in out-of-home care are more likely to succeed when placed in safe, family environments that meet their developmental needs and preserve their connection to values, beliefs and cultural legacies.

The State and County DSS are committed to engaging relatives sooner, increasing the capacity of the foster home network, and evaluating ways to improve stability and retention of existing foster placements. A statewide recruitment plan for foster care parents is being developed; and work to improve the foster care licensing process is underway.

Better collaboration between the State and Counties is key to ensuring that stakeholders receive and understand key information needed for system improvement.

Goal Three: Administrative infrastructure to operationalize a Continuous Quality Improvement (CQI) system using data to measure child and family outcomes.

Families that encounter County DSS have varying levels of risk that result in the need of intervention. The timeliness of services and supports is critical in successfully engaging families and expediting the time to recovery. Furthermore, it is imperative to provide services and supports initially and after a family engages with County DSS. In addition, services of Intensive Family Preservation and Triple P are being expanded to support children's safety while keeping families together and reducing the likelihood of children entering foster care.

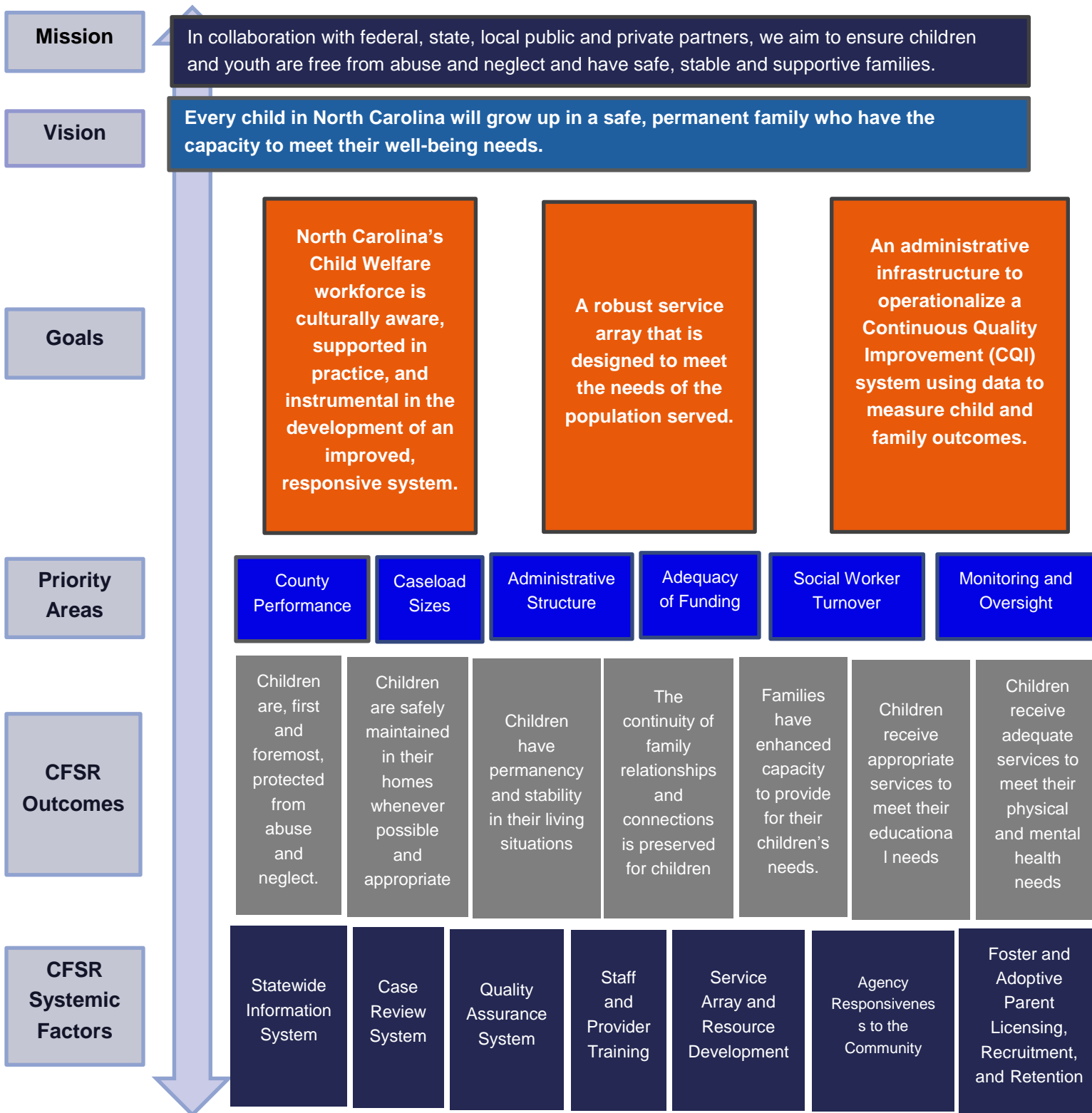
IV. Goals, Objectives, and Measures of Success

A key component of the strategic plan is the development of a reporting structure that provides accountability and transparency. DHHS assessed the types of data and information that is currently collected and selected metrics that will inform the progress of the objectives. This reporting structure is a reflection of the commitment to collecting and using data to monitor and address challenges proactively. Refer to attachment 2 which outlines the goals, objectives, and measures of success.

V. Implementation

Every objective outlined in the strategic plan will be assigned a functional area, a project champion, a timeline for completion, and a metric to measure achievement. Additionally, deliverables will be tracked as green (on track), yellow (behind), or red (off track) and will be routinely reported to the DHHS leadership team to address any unforeseen barriers and ensure continued alignment with the goals.

Attachment 1: Planning Continuum



GOAL 1: North Carolina's Child Welfare workforce is culturally aware, supported in practice, and instrumental in the development of an improved, responsive system.

Objective 1.1: Develop strategies to increase the percentage of the workforce who have an earned BSW, MSW or certification in Child Welfare from an accredited school of Social Work.

Metric 1.1: Percentage of county child welfare staff who hold a BSW, MSW or certificate in Child Welfare from an accredited university.

SFY 17-18:	Re-design the NC Child Welfare Education Collaborative in partnership with NCACDSS, the UNC University System, Private Colleges and NC Community College System to: <ul style="list-style-type: none"> • Provide structure for communication between local DSS, universities and community colleges. • Develop a certificate program for those students in courses outside of the BSW/MSW program to ensure competencies are taught.
SFY 18-19:	Hold a summit and a working task group with counties, Schools of Social Work, Community College System, colleges, and other stakeholders to develop strategies to broaden the pool of applicants for BSW and MSW. <ul style="list-style-type: none"> • Support all schools of social work in providing the pre-service training competencies. • Develop and maintain a regional speakers panel willing to speak to classes regarding employment at DSS and /or DSS practice
SFY 19-20:	Determine the array of fellowships, tuition waivers, loan forgiveness and other financial program incentives to be used to attract BSW and MSW students and graduates to the work with DSS profession.
SFY 20-21:	Create on-line curriculum with local universities for an MSW degree and certificate program to allow for new and existing child welfare staff to obtain MSW and/or competencies to deliver child welfare services.
SFY 21-22:	Increase the number of internships by 100% from 2017 to 2022.

Objective 1.2: Develop a statewide evidence-based, competency-driven social work practice model.

Metric 1.2: Implementation of a robust Practice Model

SFY 17-18:	Assess the impact of the Program Improvement Plan Goal 1, Strategy 1 to clarify the current policy and practices. <ul style="list-style-type: none"> • Conduct a comparative analysis between existing practice framework and national research to determine the needed additional components of practice for North Carolina.
SFY 18-19:	Select practice model
SFY 19-20:	Pilot the practice model in a statewide representative number and size of counties
SFY 20-22:	Implement and support the practice model to all 100 counties.

Objective 1.3: Implement CFSR Program Improvement strategies and objectives related to the Supervisor Academy (See PIP)

Metric 1.3: Participant satisfaction surveys and assessment tools to measure supervisor competencies.

SFY 17-18:	Implement the supervisor academy beginning with the first cohort of supervisors (n=20) from the 10 OSRI counties.
SFY 18-19:	Incorporate lessons learned from the first cohort and execute the revised supervisor academy for the remaining 60 supervisors from the 10 OSRI counties (3 additional cohorts of 20 participants per cohort)
SFY 19-20:	Contract with two additional North Carolina Universities to provide the supervisory academy to 100 participants.

SFY 20-22:	Contract with additional North Carolina Universities as funding supports to provide the supervisory academy to county participants.
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Objective 1.4: Improve statewide training and TA system to meet the needs of counties.

- Metric 1.4:**
- Number of workers attending pre-service report greater confidence in skill development and the ability to engage in work successfully.
 - Scores on pre-test and post-test.

SFY 17-18:	Explore co-training/train the trainer opportunities with state and county partnerships to deliver pre-service training to meet the demand
SFY 18-19:	Redesign Pre-service for workers in accordance with NC FAST requirements and to ensure that competencies are clear, concise, and measurable.
SFY 19-20:	Develop and pilot a state/county preservice training partnership in 5 counties.
SFY 20-21:	Identify regional training centers to be staffed by state/county trainers and widen the TTT model to include all mandated state trainings.
SFY 21-22:	Formalize a centralized training and technical assistance response team based on actual performance information which will provide consistent, real time interpretation and guidance on all policy and practice standards.

GOAL 2: A robust service array that is designed to meet the needs of the population served.

Objective 2.1: Development of a trauma-informed child welfare system.

- Metric 2.1:**
- Scores on pre-test and post-test following Trauma training.
 - Number of resource and kinship parents who have completed trauma training.
 - Number of tribal staff trained to teach Trauma Informed Parenting for Safety and Permanence - Model Approach to Partnership in Parenting (TIPS-MAPP).

SFY 17-18:	State DSS to develop MOA or contract with every LME/MCO to provide Trauma training to child welfare staff and to complete a systems gap analysis from which community training teams are developed.
SFY 18-19:	<ul style="list-style-type: none"> • Trauma training for child welfare staff in 33 counties with implementation of Project Broadcast trauma screens. • Trauma training for resource and kinship parents in 33 counties.
SFY 19-20:	<ul style="list-style-type: none"> • Trauma training for child welfare staff in 33 counties with implementation of Project Broadcast trauma screens. • Trauma training for resource and kinship parents in 33 counties.
SFY 20-21:	<ul style="list-style-type: none"> • Trauma training for child welfare staff in 34 counties with implementation of Project Broadcast trauma screens. • Trauma training for resource and kinship parents in 34 counties.
SFY 21-22:	Evaluation of community partners to receive trauma training. (e.g. school system, clinicians, Child Advocacy Centers, law enforcement, pediatricians, Emergency Dept. staff)

Objective 2.2: Development of a trauma-informed child welfare system.

- Metric 2.2:**
- The availability of services/placements and time to reunification/case closure for In-home Services cases.
 - Number of stakeholders reporting an increased understanding of how their role impacts safety, permanency and well-being outcomes for children and families.
 - Percentage of local collaboratives that identify and report gaps and needs in behavioral health services delivered to children in DSS.

SFY 17-18:	Staffs of every LME/MCO and Public Child Welfare complete cross-training on each system.
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SFY 18-19:	Statewide summits are held with each LME/MCO and the public child welfare staff in their catchment areas to address everyone's responsibility to protect and address well-being of youth in child welfare system and explore imbedding qualified substance abuse counselors and care coordinator in every DSS.
SFY 19-20:	<ul style="list-style-type: none"> Accountability teams are developed to assess the partnership between LME/MCOs and child welfare. Cross reference of services to their mutual customers and outcomes. Develop Memorandum of Agreements between DSS and the LME/MCO addressing service provision to the Foster Care population.
SFY 20-21:	<ul style="list-style-type: none"> Development of performance based system/practice where contracts are awarded based on proven outcomes. Examine methods as part of the CFSR process to identify and report contributing factors involving key stakeholders' performance.
SFY 21-22:	<ul style="list-style-type: none"> Move toward broadened Medicaid rules so parents continue to qualify for Medicaid when children have been removed. DSS and key stakeholders including LME/MCO meet monthly to discuss child data. (e.g. access, timely assessments, timely treatment, and quality.)

Objective 2.3: Targeted recruitment and training to Increase the number of foster families that meets the needs of the child population

Metric 2.3:

- Potential families are licensed within 30 days of completing Trauma Informed Parenting for Safety and Permanence - Model Approach to Partnership in Parenting (TIPS-MAPP).
- Measure of placement stability of children in foster care including those needing crisis placement.

SFY 17-18:	Resource parents are provided MAPP-TIPS as well as advanced training that focuses on trauma triggers and appropriate response.
SFY 18-19:	Policy and funding streams are re-evaluated and aligned to allow for larger sibling groups to be placed together in a single foster home with waivers around some licensure requirements.
SFY 19-20:	<ul style="list-style-type: none"> DHHS licensed foster homes have increased board payments to allow for recruitment and retention. Cross reference of services to their mutual customers and outcomes. Number of licensed foster homes for children who are members of a North Carolina State-recognized tribe are increased.
SFY 20-21:	Develop a Foster and Adoptive Parent Association model supporting state and local endeavors.
SFY 20-22:	Implement a Foster and Adoptive Parent Association model of support.

Objective 2.4: Adequate court resources that support permanency for children.

Metric 2.4: Court data verifying child permanency hearings are held in accordance with federal guidelines.

SFY 17-18:	Ensure NC implements a statewide tracking system to monitor timely filings, scheduling of TPRs (Termination of Parental Rights), documenting reasons to cease reunification efforts and visitation with parents.
SFY 18-19:	Provide AOC the resources to ensure adequate family court resources for DSS cases to be heard in every NC County including judges, clerks, GAL and parent attorneys.
SFY 19-20:	Explore best practice models through the American Bar Association designed to have parent attorney services provided by a dedicated attorney to reduce court delays and continuances.
SFY 20-21:	Judges and court office personnel are trained on childhood trauma and resiliency so that court recommendations meet the needs of children and families.

GOAL 3: **Operationalize a Continuous Quality Improvement (CQI) system using data to measure child and family outcomes.**

Objective 3.1: Adequate funds are provided to ensure that caseload size and supervisory ratios follow state policy and to provide for adequate social worker training and professional development. Develop system for rebasing the funding allocations in accordance with workload requirements.

Metric 3.1: Percentage of caseload sizes and supervisory ratios that follow state policy.

SFY 17-18:	Conduct a study of child welfare finance reform.
SFY 18-19:	Create a state-wide plan to ensure adequate funding that is reoccurring and adjustable for caseload growth.
SFY 19-20:	NC DSS presents a plan that ensures block grant funds are directed toward mandated services.
SFY 20-21:	Funding includes prevention services for families and greater supports to kinship care.
SFY 21-22:	State DSS prepares annual report to NC GA to address how financing of various services can impact lower outcomes for youth.

Objective 3.2: Establishment of a statewide integrated, secure, efficient, and robust data collection and case management system (NCFAST for Child Welfare) that houses data and key reports to increase consistency, safety, and accountability across counties.

Metric 3.2: Full implementation of NCFAST in all 100 counties with all data elements required for the CFSR built into the system which will fully comply with federal standards for data collection and reporting.

SFY 17-18:	Basic system requirements are reviewed and development completed.
SFY 18-19:	<ul style="list-style-type: none">• Pilot Counties begin to test the system and provide feedback for improved functionality.• NC DSS oversees and coordinates the implementation including addressing needed improvements and training for staff on the system.• Implementation in all 100 counties.
SFY 19-20:	<ul style="list-style-type: none">• Continued improvement to NCFAST system and mobility applications.• NCFAST development to incorporate practice model
SFY 20-21:	On-going review of system with periodic updates to key stakeholders including the General Assembly.
SFY 21-22:	On-going review of system with periodic updates to key stakeholders including the General Assembly.