Executive Summary

In 2017, the North Carolina General Assembly established the Social Services Regional Supervision and Collaboration Working Group (SSWG) and directed it to develop recommendations for improving state supervision of the county-administered social services system through the use of a new system of regional state offices. The SSWG was also charged with making recommendations in several other areas. This work is one piece of a larger reform initiative that is focused on (1) high quality and consistent service provision across all counties, (2) accountability to ensure that all local agencies are providing high quality services, and (3) transparency of local agency performance and outcomes.

The SSWG's work is divided into two stages, and this report includes conclusions and recommendations developed during Stage One.

What Are the Supervisory Functions of the Proposed Regional Offices?

The SSWG identified and defined the following core functions involved with supervising North Carolina's county-administered social services system:

- Compliance monitoring
- Fiscal monitoring
- Policy guidance and technical assistance
- Integrated data systems and recordkeeping

- Best practice dissemination
- Workforce development
- Training
- Inter-county coordination
- Quality improvement

The group also made recommendations regarding how responsibility for each function should be allocated across the three levels of government involved: central, regional, and local.

How Should Regional Offices Be Staffed?

The SSWG agreed on several principles that should guide staffing for regional offices.

- Regions must have high-quality, experienced, and reliable staff.
- Regions must serve all social services programs.
- Resource allocation will vary from region to region.
- Each region will have
 - a regional administrator;
 - administrative support staff;
 - o program consultants who specialize in certain social services programs; and
 - staff who provide technical assistance that is not program-specific, such as human resources, budgeting, and information technology.

• Some staff positions currently in the central office may shift to regional offices.

What Are Key Factors to Consider When Dividing the State into Regions?

The SSWG is not recommending a specific map of supervisory regions because there are many elements of the system that are currently in transition. Rather, the group identified the following key factors that should be taken into consideration when the final map is developed by DHHS or the legislature.

- No county should be split into different regions.
- Regions should include contiguous counties.
- Judicial districts should not be disrupted.
- Total population and population served by each region should be comparable.
- Total geographic size should be comparable.
- Regions should strive to preserve natural networks that have developed over time.

How Might Local Elected Officials Be Involved in Oversight and Governance?

The SSWG identified options for increasing the involvement of local elected officials in the oversight and governance of local departments of social services. The options fall along a timeline that starts when the agency is created and ends when the state is required by law to temporarily assume responsibility for administration because the agency has been out of compliance and failed to correct a significant problem. Many of the options would require legislation, but several could be implemented now.

What Other Recommendations Were Developed by the SSWG?

- **Consistency across regions.** DHHS should be deliberate in designing a regional system that promotes consistency between regions.
- **Physical space for regional offices.** DHHS should consider creative options for physical space, including sharing space with other agencies or organizations and allowing home-based staff in some circumstances.
- **Oversight body**. DHHS and the legislature should consider establishing a new body with responsibility for ongoing oversight of the regional system to ensure that reforms are on track to achieving stated objectives.
- **Organization and governance**. There should be further study of the models of local agency organization and governance to compare performance and identify best practices moving forward.

I. Project Background

In 2017, the North Carolina General Assembly enacted expansive legislation related to social services system reform and improvement.¹ One part of the legislation requires that the North Carolina Department of Health and Human Services (DHHS) develop a plan for improving service delivery and outcomes at the local level through enhanced oversight, support, and inter-county collaboration. In developing its plan, DHHS is required to take into consideration recommendations made by the Social Services Regional Supervision and Collaboration Working Group (SSWG). The work of the SSWG is divided into two stages, and this report is the product of the group's discussions during the first stage.

What Is the SSWG's Charge?

During Stage One, the group must offer recommendations regarding

- the size, number, and location of regional state offices;
- the allocation of responsibility between central, regional, and local officials in supervising and administering social services programs;
- methods for holding the regional offices accountable for performance and responsiveness;
- information-sharing between the regional offices and the boards of county commissioners regarding local department performance; and
- options for authorizing the board of county commissioners to intervene in program administration prior to the state assuming direct control of service delivery.

During Stage Two, the SSWG will build on some of the concepts discussed in the first stage to develop recommendations regarding

- legislative and regulatory changes necessary to improve collaboration between counties, specifically addressing information-sharing, conflicts of interest, and intercounty movement of clients, and
- a vision for transitioning the state from a county-administered system to a regionallyadministered system.

The work in both stages will address the full range of social services programs—including child welfare, adult services, economic services, and child support enforcement. These are all multi-faceted programs that offer many services to millions of people across the state. For

¹ S.L. 2017-41 (H.B. 630), as amended by S.L. 2017-102 (H.B. 229).

example, the broad umbrella of "economic services" encompasses food and nutrition services, Medicaid, Work First, State-County Special Assistance, energy assistance, and other programs. Within each program, there are additional layers and processes, such as intake, service provision, and program integrity. The SSWG is not able to consider each program or program layer in any detail. Rather, the goal is to take an expansive systems-wide view to address the questions presented in the legislation.

The Stage One report is due by April 15, 2018. The work on Stage Two will begin shortly thereafter, with the report being due February 1, 2019.

Who Is on the SSWG?

The legislation sets forth the composition requirements for the SSWG. The members listed below were appointed and served throughout Stage One.

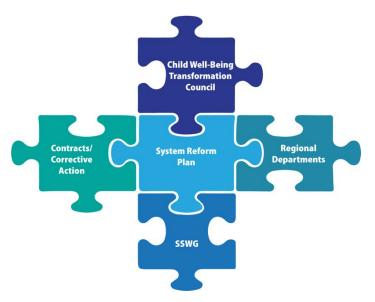
- Three members of the Senate appointed by the President Pro Tempore of the Senate
 - Senator Tamara Barringer, co-chair
 - Senator Kathy Harrington
 - Senator Joyce Krawiec
- Three members of the House of Representatives appointed by the Speaker of the House of Representatives
 - o Representative Sarah Stevens, co-chair
 - Representative Jonathan C. Jordan
 - Representative David R. Lewis
- Three representatives from DHHS appointed by the DHHS Secretary or the Secretary's designee
 - Susan Perry-Manning, Deputy Secretary for Human Services
 - Michael Becketts, Assistant Secretary for Human Services
 - Lisa Cauley, Chief, Child Welfare Section of the Division of Social Services
- One designee of the Chief Justice of the North Carolina Supreme Court
 - o Honorable Robert Stiehl, Chief District Court Judge, Cumberland County
- Four county commissioners representing the North Carolina Association of County Commissioners (NCACC), each of whom shall represent different regions of the State, appointed by the President of the NCACC
 - Commissioner Kevin Austin, Yadkin County
 - Commissioner Brenda A. Howerton, Durham County
 - Commissioner Page Lemel, Transylvania County
 - Commissioner Robert (Bob) Woodard, Dare County
- Two county social services directors, one of whom shall be appointed by the President Pro Tempore of the Senate and one of whom shall be appointed by the Speaker of the House of Representatives
 - Christopher (Chris) C. Dobbins, Gaston County (Senate appointee)
 - Glenn Osborne, Wilson County (House appointee)

- One representative from the North Carolina Association of Social Services Attorneys (NCASSA), appointed by the President of the NCASSA
 - Angie Stephenson, Orange and Chatham Counties
- One representative from the Association of North Carolina County Social Services Directors, appointed by the President of the Association
 - o Susan Osborne, Alamance County

The legislation directs the UNC School of Government (SOG) to convene the SSWG, facilitate its meetings, and provide administrative and technical support to the effort.² The SSWG held X meetings between October 2017 and March 2018. Most meetings were held at the SOG building in Chapel Hill and were made available via webcast (both live and recorded). Several information-sharing meetings were convened as webinars. All meeting materials, minutes, and recordings are available online.³

How Does the SSWG's Work Relate to the Other Components of Social Services System Reform?

As mentioned above, the legislation creating the SSWG was a multi-faceted law that impacts the social services system in several different ways. There are five main components to the reform of the system, as depicted in the figure below.



² The SOG team included faculty members Aimee Wall, Margaret Henderson, and Sara DePasquale, as well as research associate Ryan Kelly. The team also contracts with Andrew Sachs from the Dispute Settlement Center to assist with meeting planning and facilitation. In addition to convening and facilitating SSWG meetings, the SOG conducted legal and policy research and key informant interviews and convened focus groups to clarify issues essential to the SSWG's work.

³ See the linked headings under the main "Social Services Working Group" heading on the UNC School of Government's Social Services microsite at <u>https://www.sog.unc.edu/resources/microsites/social-services</u>.

In short, these puzzle pieces illustrate a series of connected ideas that, when implemented, will result in changes at the state level as well as changes in the relationship between the state and the counties. It is important to note that the SSWG is not involved in any of the other components of the "puzzle" described below. These descriptions are included to provide context for the work the SSWG is undertaking.

The central piece, referred to as "system reform plan," correlates with a section of S.L. 2017-41 that directs the state to contract with an outside organization to undertake a comprehensive review of the state agencies responsible for supervising social services programs.⁴ The contractor is also required to develop a "dashboard" that will allow both the state and the general public to monitor programs and services county by county to ensure "maximum accountability and transparency and the effective and efficient use of social services and funds."⁵ This system reform effort will focus on changing the way the state approaches and evaluates its work. The work of the SSWG builds on that effort by providing a framework for improving the connection between the state and the local agencies responsible for administering social services programs.

The "contracts/corrective action" piece of the puzzle refers to a section of the legislation that requires the state to enter into written agreements each fiscal year with the local agencies responsible for administering social services programs. These written agreements apply to all social services programs other than Medicaid and N.C. Health Choice (a state health insurance program covering low-income children). The written agreements, which will begin in fiscal year 2018–19, will focus on "mandated performance requirements and administrative responsibilities."⁶ Once the dashboard is operational, its measures are to be integrated into the performance requirements specified in the written agreement.

A related concept referenced in that same puzzle piece is a new framework for corrective action. Beginning in March 2020, the legislation provides that the state and a local agency will be required to develop a joint corrective action plan if (1) the local agency is out of compliance with the written agreement or applicable law for a specified period of time or (2) DHHS determines that an urgent circumstance requires immediate attention. If DHHS determines that the local agency has not been successful in implementing the corrective action

⁴ On March 2, 2018, DHHS announced that the contract was awarded to the Center for Family Strategies. *See* Press Release, DHHS, Vendor Selected to Assist with North Carolina's Social Services Reform (Mar. 2, 2018), <u>https://www.ncdhhs.gov/news/press-releases/vendor-selected-assist-north-carolina%E2%80%99s-social-services-</u> reform.

⁵ S.L. 2017-41, § 2.1.(d).

⁶ *Id.* § 3.1.(a1).

plan, the legislation directs the state to temporarily assume local administration of the social services program that is involved.

The top puzzle piece, the Child Well-Being Transformation Council, refers to a new committee that was created to provide a forum for high-level oversight of all public services for children, with the primary goal of improving coordination, collaboration, and communication among agencies and organizations involved. The initial members are expected to be appointed by July 1, 2018.

The last puzzle piece refers to new authority for counties to voluntarily join together to create regional, rather than single-county, departments. Beginning in March 2019, counties will be able to establish a regional department to provide some or all of their social services programs. For example, several counties could join together to create a new regional child support enforcement agency The North Carolina Social Services Commission, an appointed rulemaking body, is charged with developing regulations that will specify the required level of county funding for these regional departments.

The legislation creating the SSWG included many inter-related components that, taken together, have the potential to make significant changes to North Carolina's social services system. The combined effort is designed to ensure (1) high quality and consistent service provision across all counties, (2) accountability to ensure that all local agencies are providing high quality services, and (3) transparency of local agency performance and outcomes.

A more detailed summary of the entire bill is included in Appendix A. The rest of this report will focus exclusively on the topics assigned to the SSWG for Stage One.

II. Overview of North Carolina's Social Services System

The term "social services" refers to a variety of programs and services that are intended to assist vulnerable or at-risk populations in achieving safety, stability, wellness, and independence. Many business and non-profit organizations are actively involved with providing social services in their communities. For the purposes of this report, however, the term "social services" will refer only to those programs that are currently administered by county social services agencies.⁷ Some of these programs provide assistance that addresses personal needs,

⁷ In most counties, this agency is the social services department. As of January 2018, twenty-four counties provided social services through a consolidated human services agency. *See* UNC School of Government, *PH and SS Organization and Governance: Resolution as of January 2018,* https://www.sog.unc.edu/sites/www.sog.unc.edu/files/CHSA%20map%201.2018.pdf (map of North Carolina

showing various types of county agencies).

some provide assistance that addresses financial needs, and some provide assistance that addresses both personal and financial needs.⁸

Federal law establishes the framework for many of these social service programs. States accept federal funding for programs and are required to comply with the federal laws that govern those funding streams. States have some flexibility in deciding how they want to administer the programs. North Carolina utilizes a state-supervised, county-administered system to deliver social service programs. In this model, local social services agencies take on the primary role of day-to-day program administration. The state provides supervision, direction, and support to the local agencies.

North Carolina's state-supervised, county-administered system is rooted in a long history. Before the Social Security Act of 1935 formalized the role of the states in the provision of public assistance programs, counties provided most of the governmental services and assistance to those in need. As the responsibility of the state government began to expand after 1935, many states chose to transition to state-administered social services systems.⁹ Some state-administered systems engage local governments in some or all aspects of program administration, while others may not involve local governments at all, instead relying on state infrastructure to address local needs (e.g., district or regional offices).

By choosing to remain a state-supervised, county-administered system, North Carolina is now in the minority. Most states identify as being state-administered,¹⁰ and of these states, all have some regional and/or county presence. Of those that identify as county-administered, like North Carolina, there are different approaches to managing supervision. The SSWG took a closer look at some of these states to learn more about how they manage state supervision and

https://www.sog.unc.edu/sites/www.sog.unc.edu/files/Social%20Services%20-%20CMG 0.pdf.

⁸ For a full discussion of the types of services offered by local social services agencies, see Aimee N. Wall, *Social Services, in* COUNTY AND MUNICIPAL GOVERNMENT IN NORTH CAROLINA (UNC School of Government, 2nd ed. 2014). A PDF version of this chapter is available at

⁹ See, e.g., Peter D. Shearer, Neb. Dep't Soc. Servs., The Transition to State Administration: Nebraska's Experience (Dec. 14, 1984), http://govdocs.nebraska.gov/epubs/W2000/B020-1984.pdf.

¹⁰ One report from a division of the North Carolina General Assembly stated that North Carolina is one of eleven states that have a state-supervised, county-administered system. *See* N.C. GEN. ASSEMB., PROGRAM EVALUATION DIV., STATUTORY CHANGES WILL PROMOTE COUNTY FLEXIBILITY IN SOCIAL SERVICES ADMINISTRATION: FINAL REPORT TO THE JOINT LEGISLATIVE PROGRAM EVALUATION OVERSIGHT COMMITTEE, Rep. No. 2011-03 (May 2011), www.ncleg.net/PED/Reports/documents/DSS/DSS_Report.pdf.

how regional offices are involved.¹¹ This research informed some of the SSWG's recommendations that follow.

The SSWG also gathered information about and discussed North Carolina's own experience with regional supervision. From 1974 to approximately 2002, the state had four regional offices.¹² According to budget documents, the line item for regional administration went from a high of \$2.1 million in FY 1983–84 to a low of \$419,082 in FY 2001–02. Staffing levels ranged from thirteen to seventy-three full-time equivalents (FTEs).

Fiscal Year	Requirements <mark>—</mark> Actual	Number of Employees/Positions
1975–76	\$536,381.00	
1977–78	\$470,961.00	19
1979-80	\$557,641.00	19
1981-82	\$1,888,314.00	71
1983–84	\$2,105,013.00	73
1985–86	\$1,818,464.00	57
1987–88	\$1,823,864.00	50
1989–90	\$1,941,060.00	48
1991–92	\$858,942.00	18
1993–94	\$881,964.00	18
1995–96	\$769,717.00	13
1997–98	\$1,016,861.00	17
2001-02	\$419,082.00	Not Listed
2003-04	Not Listed	Not Listed

Table 1. Regional Administration Funding History

Source: Compiled by the UNC School of Government based on a review of the Governor's Budgets for the years listed above (The Budget 1977–1979 through 1985–1987; The North Carolina State Budget 1987–1989 through 1999–2001; The State of North Carolina Recommended Continuation Budget 2003–2005 through 2005–2007). For a complete listing of reference sources, see [URL to be added].

¹¹ For profiles for Virginia, Pennsylvania, and Georgia, see the "Materials" linked heading under the "Meetings" linked heading on the UNC School of Government's Social Services microsite at https://www.sog.unc.edu/resources/microsites/social-services/materials.

¹² These offices were located in Black Mountain, Winston-Salem, Fayetteville, and Greenville.

According to a 1982 legislative study, almost 70 percent of staff time in regional social services offices was dedicated to direct service and technical assistance, and about 27 percent of staff time was focused on quality control.¹³

Based on feedback from focus groups, interviews, and SSWG discussions, the previous regional system was valuable and effective because the regional staff

- developed a deep understanding of the individual counties in each region,
- made regular and valuable contact with the director and staff, and
- were available in urgent situations for consultation and assistance.

One of the biggest challenges encountered with the previous regional system in North Carolina was the lack of consistency in policy interpretation and practice across the state. Each region developed some independence from the central office and, as a result, the counties across the state did not always receive the same information and guidance. Other states with regional supervision teams echoed that same concern and developed some strategies for addressing it. The SSWG's recommendations take this challenge into account and include measures designed to prevent this type of fragmentation.

Even though the formal, comprehensive regional office model no longer exists in North Carolina, DHHS still has a strong regional presence in many of its programs. Some programs, such as adult services¹⁴ and child support¹⁵ enforcement, have field staff working from their own homes who are assigned to monitor compliance and provide technical assistance to specific groups of counties. Some programs, such as economic services, rely primarily on staff from the central office to travel out to the counties to monitor compliance and provide technical assistance. In addition, there are several regional DHHS offices that serve specific purposes, such as an office in Martin County that serves as a call center for the food and nutrition program and an office in Black Mountain that houses DHHS staff involved with licensing foster homes.

III. Summary of the SSWG's Work and Recommendations on Key Issues

The work of the SSWG in Stage One focused on answering several key questions:

• What are the goals for an effective system of supervision?

¹³ See N.C. Legis. Res. Comm'n, Regional State Offices: Report to the 1983 General Assembly of North Carolina 10 (Jan. 6, 1983), https://ncleg.net/Library/studies/1983/st10198.pdf.

¹⁴ The Division of Aging and Adult Services at DHHS has prepared an Adult Program Representatives (APR) regional map and a table of APR county coverage (last updated Oct. 18, 2017):

https://www.sog.unc.edu/sites/www.sog.unc.edu/files/APR%20County%20Coverage%20with%20Map%2010-17.pdf.

¹⁵ Add citation

- What core functions are involved with supervising the social services system?
- How should those core functions be allocated across the three levels of government (central, regional, and local)?
- What types of staff and support should be available through the regional offices?
- What factors should guide policymakers when dividing the state into supervisory regions?
- What are some examples of regions that are consistent with these factors?

In addition to answering these questions about the new regional system, the working group discussed and identified opportunities for local elected officials to become more involved with social services, especially when the agency is facing challenges.

Below is a brief review of the working group's conclusions and recommendations related to each of the questions and issues identified above.

A. What Are the Goals for an Effective System of Supervision?

This question provided the foundation for all of the work that followed. The group first explored the qualities of a good supervisor generally and then extrapolated those qualities to think about supervision needs at a system level. One of the major themes for all of these conversations was that the concept of supervision was about both support and oversight. The group agreed that in order for a supervisee to be successful, the supervisor must provide the tools and ongoing assistance to ensure success. That framework is essential to system-wide supervision as well. It is not only about the enforcement or penalties but also the infrastructure, communication, information, problem-solving, and support the state can provide.

The group identified the following goals for the system:

- consistency in interpretation and application of laws, regulations, and rules;
- provision of clear policy guidance and technical assistance;
- clear definition of roles and responsibilities both across the three levels (central, regional, local) and within the regional offices;
- responsiveness to local needs in a way that is timely, efficient, and consistent with law and policy;
- relationships across the three levels that are both productive and trusting;
- fairness in oversight and enforcement;
- accountability at all three levels;
- transparency and accessibility for counties and the public regarding law, policy, and practice; and

- support and leadership related to
 - o fiscal stewardship (control, efficiency, and accountability);
 - o innovation, problem-solving, and conflict resolution;
 - o quality assurance and improvement;
 - o effective technology tools; and
 - o strategic prioritization across programs and services.

These over-arching goals served as a reference for the SSWG as its work progressed. The process of the work sessions was designed around these goals, and the products were evaluated against them.

B. What Core Functions Are Involved with Supervising the Social Services System? How Should Those Core Functions Be Allocated Across the Central, Regional, and Local Levels?

To answer this question, the working group reviewed research related to North Carolina's current social services supervisory functions and those in selected other states. The research was based on document reviews as well as on interviews with current and former social services directors and state agency staff. After several rounds of discussion, the group agreed on the following core supervisory functions:

- Compliance monitoring
- Fiscal monitoring
- Policy guidance and technical assistance
- Integrated data systems and recordkeeping
- Best practice dissemination
- Workforce development
- Training
- Inter-county coordination
- Quality improvement

These functions are intentionally broad in scope. The specifics of how each function will be carried out (i.e., what type of training is provided, to whom, by whom, how often, etc.) can be tailored to fit each program and should be determined by personnel with expertise in that program. These functions, therefore, are intended to provide a framework through which responsibilities can be allocated between central, regional and local entities to ensure that the full range of activities associated with the administration of social services programs can be properly supervised and supported.

Below are tables that both define each function set out in the bulleted list above and describe how the responsibilities within the function should be allocated across the three levels of government.

Table 2A. Compliance Monitoring

Evaluate compliance with applicable federal and state laws and policies and direct changes when necessary. Compliance monitoring includes the concept of *risk assessment*.

	General Description of Role
	Establish statewide plan for routine compliance monitoring
	 Provide tools that facilitate/support compliance monitoring and risk assessment
Central	 Oversee regional offices to ensure timely, coordinated, and consistent monitoring across regions
	 Make final determination regarding corrective action and state intervention in local administration
	 Perform compliance monitoring as provided in statewide plan and in accordance with the written agreement required by G.S. 108A-74; coordinate scheduling of compliance monitoring activities across programs for local social services agencies("local agencies") within the region
Regional	 Work with local agencies to develop corrective action plans and oversee implementation of those plans
	Support local agencies in their efforts to monitor compliance internally
	 Share, interpret, and discuss monitoring results and dashboard data with agency directors
	 Maintain open communication with local agencies and others in the county regarding compliance duties, challenges, and successes
	Cooperate with monitoring activities performed by regional office
Local	 Work with regional office to develop and implement corrective action plans when appropriate

Table 2B. Fiscal Monitoring

Ensure that all financial resources are used effectively, efficiently, and in compliance with applicable federal and state laws (includes risk assessment).

	General Description of Role
	Steward federal and state funds and manage reporting obligations
Central	Establish statewide plan for routine fiscal monitoring
	 Oversee regional offices to ensure timely, coordinated, and consistent fiscal monitoring across regions
	 Make final determination regarding corrective action and state intervention in local administration
	Perform fiscal monitoring
Regional	 Coordinate scheduling of fiscal monitoring activities across programs for local agencies across region
	 Support local offices in their efforts to effectively develop and manage their budgets internally
	 Maintain open communication with local agencies and others in the county regarding fiscal condition
	 Work with the local agencies to identify resource gaps or a need for re- basing at the local level; communicate those needs to the central office
	 Develop and implement internal control with the support of the regional offices
Local	Develop and manage budgets with support from the regional offices
	Identify resource gaps and provide feedback to the regional offices

Table 2C. Policy Guidance and Technical Assistance

Promote consistent interpretation of state and federal law through development of clear and consistent statewide program policies. Provide clarification, additional explanation, or implementation support when necessary.

	General Description of Role
Central	 Establish and maintain statewide program policies that are consistent with state and federal law
Central	 Crosswalk policy with other departments (DAAS, DMA, DHSR, AOC, etc.) to ensure consistency

	 Provide support and guidance to regional offices in the implementation of statewide policy and the supervision of local agencies
	 Provide policy updates to regional offices in a timely manner to ensure consistency in implementation
	 Review and react to feedback from regional offices and local agencies; update policy accordingly
	 Provide policy guidance and technical assistance that is both directed by regional/central office and requested by the local agency
	 Support local agencies in the consistent implementation of policy with training and technical assistance
	 Promote the consistent implementation and interpretation of policy between and within regions through policy expertise
Regional	 Use data analytics and other sources of information to identify situations or challenges that may stem from inappropriate interpretation and application of law or policy and work with the local agency to evaluate and align practices when necessary
	 Maintain a proactive relationship with central office that increases timeliness and consistency of implementation
	 Receive and respond to feedback from local agencies about policy guidance
	 Provide feedback to central office regarding any disconnect between law, policy, and/or practice
	 If policy questions or concerns arise and are addressed at the local level, share relevant information across county or regional lines when appropriate
	Implement statewide policy
Local	 Develop and maintain internal policies that are consistent with state and federal policy
	 Request guidance and technical assistance from regional office when clarification is needed or issues arise
	 Provide feedback to regional office throughout the implementation process

Table 2D. Integrated Data Systems and Recordkeeping

Develop reliable, secure, and user-friendly data systems to support service delivery and recordkeeping. Maintain accurate, thorough, statewide records that are accessible for the purpose of service provision, review, monitoring, or consultation. Examples include NC FAST and centralized registries.

	General Description of Role
	 Establish and maintain statewide, dependable, electronic, program-specific data systems to support service provision and recordkeeping
	Ensure that systems comply with applicable federal and state laws
	 Provide regional offices and local agencies with reports that are timely and accurate upon request
Central	 Support regional staff with effective data analytics
	 Provide training and technical support to regions and local agencies related to data systems and recordkeeping
	 Ensure that systems comply with federal and state laws and policies regarding record retention
	 Respond to feedback received from local agencies and regional offices regarding data systems
Regional	 Provide technical assistance to local agencies to support accurate data collection, proper recordkeeping, and timeliness
Regional	 Gather feedback from local agencies as issues arise to recommend improvements and updates to data systems
Local	 Develop and implement internal policies that support accurate data collection and proper recordkeeping that are consistent with state and federal law and policy
	 Request reports and/or assistance from central and regional offices to facilitate the effective use of systems and data analytics
	Provide feedback to regional and/or central office regarding data systems

Table 2E. Best Practice Dissemination

Facilitate open lines of communication to share best practices across programs and local agencies.

	General Description of Role
	 Identify and select best practices that can be implemented statewide
	• Facilitate the implementation of best practices statewide through resource provision and guidance
Central	 Respond to feedback regarding best practices and make final determination regarding statewide applicability
	 Promote a culture of innovation that allows for improvement on practice models and strategies
Regional	 Support local agencies in the implementation of best practices through training and resource provision
	 Assess innovative practice strategies developed by local agencies for region-wide or statewide applicability
	 Facilitate sharing of best practices at the regional and local levels when appropriate
	 Share information with central office regarding best practice implementation at the regional and local levels
Local	Implement best practices while assessing for areas that need improvement
	 Request support from and provide feedback to regional offices throughout implementation process
	 Share innovations and lessons learned with regional offices
	Share best practices with other local agencies when appropriate

Table 2F. Workforce Development

Setting standards for social services workforce and supporting those standards.

	General Description of Role
	 Establish and maintain statewide minimum qualifications requirements for all central, regional, and local positions
Central	 Provide support, guidance, and oversight in unresolved human resource (HR) conflicts

	 Identify workforce gaps and possible solutions
	Recruit and retain high-quality staff at the central and regional levels
	 Participate in development and revision of minimum qualifications requirements to ensure that they adequately account for local needs and challenges
	 Monitor local agencies for compliance with minimum qualifications requirements
Regional	Provide HR expertise to local agencies upon request
	 Provide feedback to directors and supervisory staff at the local level regarding staff performance based on data analytics, monitoring, and other interactions
	 Recruit and retain high-quality staff at the regional level
	 Implement internal HR policies that are consistent with federal, state, and local law and policy
	 Cooperate with any monitoring activities performed by regional staff regarding HR and minimum qualifications requirements
Local	 Request support and guidance from regional offices when policy clarification is needed or HR conflicts arise
	 Regularly evaluate staff performance and make adjustments as necessary
	 Recruit and retain high-quality staff at the local level

Table 2G. Training

Ensure that personnel involved in the provision of services are competent and well-prepared to discharge duties associated with their positions.

	General Description of Role
Central	 Establish and maintain statewide curriculum and training standards Establish and maintain "train the trainer" curriculum and support for regional staff
	Ensure consistent training across regions
	 Ensure that training is timely, accessible, and able to accommodate all regional and local staff

	 Provide "train the trainer" curriculum and support to directors and supervisory level staff at the local level
	 Provide training related to root-cause analysis and budgeting
	 Provide training to local staff directly when appropriate
Regional	 Maintain a "bank" of training resources accessible to local agencies
	 Monitor compliance with training mandates at the local level to ensure competency and consistency
	 Identify training needs within the region using data analytics and respond accordingly
Local	 Develop and maintain internal training policy that is consistent with state and federal policy
	 Document training and cooperate with any monitoring activities performed by regional offices
	 Use internal assessments to identify training needs and respond accordingly
	 Request guidance and support in the training of local staff and community partners when necessary

Table 2H. Interagency Coordination

Coordination of resources, including staff, when service delivery or support requires the involvement of more than one local social services agency.

	General Description of Role
	• Establish policies to outline when and how interagency and inter-region coordination is required; examples include the management of conflict of interest (COI) cases and coordination of resource deployment in emergencies
Central	 Develop protocols for coordinating with state agencies other than DHHS, such as emergency management, and help manage efforts that involve other agencies
	 Assist with coordination efforts that involve multiple regions or are being implemented statewide

	 Establish system to track assets and staff available to be deployed or shared with other local agencies in emergencies
Regional	 Provide support to a local agency that is in need of assistance from other agencies
	 If local agencies are not able to reach a resolution related to the provision of assistance or resource sharing, make decisions as necessary to ensure that service needs are met; for example, this may involve (1) assigning COI cases to agencies consistent with state policy or (2) assigning responsibility for processing County A's economic services applications to County B if County A's information technology system is temporarily compromised and unavailable.
	 Coordinate with other regions when additional resources or support are needed
	 Monitor local policies or plans related to coordination, such as emergency management plans and COI policies
	 Track assets and staff available to be deployed to other local agencies in emergencies
Local	 Develop local policies or plans related to interagency coordination consistent with state policies and local needs
	 Identify situations when the local agency could benefit from assistance or resources from another agency
	 Reach out to other local agencies directly when possible and appropriate to request support
	Cooperate with other agencies that are seeking assistance
	 Develop relationships with other partners within the county (such as emergency management) and help marshal resources from those partners when necessary and appropriate to support other agencies

Table 2I. Quality Improvement

Develop and implement systems for continuous quality improvement for programs and services.

	General Description of Role
Central	 Develop policies regarding continuous quality improvement (CQI) expectations

	 Provide tools that facilitate CQI activities
	Utilize the statewide performance dashboard to develop CQI activities
	 Evaluate data from the statewide performance dashboard for trends and best practices relevant to statewide performance
Regional	 Monitor quality of service delivery in local agencies using dashboard data and other available information sources
	 Provide training, technical assistance, and support to local agencies for CQI activities, such as assisting with the interpretation and use of available statewide data and CQI tools
	 Utilize regional and local performance dashboards (subsets of the statewide dashboard) to assist local agencies in developing CQI activities
	 Evaluate data relevant to regional and local performance dashboards for trends and best practices relevant to regional and agency-specific performance
	 Develop and implement CQI systems and practices
Local	 Utilize statewide, regional, and county-specific data to evaluate dashboard performance and develop CQI strategies to improve performance
	Identify CQI best practices and share with regional staff

C. What Types of Staff and Support Should Be Available through the Regional Offices?

Once the SSWG decided on what type of work the regional offices should be doing (functions), the group discussed general ideas for how the offices should be staffed to do that work. The group agreed on several key principles about staffing:

- Regions must have high-quality, experienced, and reliable staff. The SSWG heard from many stakeholders about this issue and concluded that this is the highest priority issue with regard to regional offices and staffing.
- Regions should serve all social services programs. For example, there should not be a
 different regional office or regional designation for Medicaid or adult services than for
 other social services programs. The goal is to consolidate and coordinate regional
 activity that supports programs and services administered by local social services
 agencies.

- Resource allocation will vary from region to region. Some regions will need more support for adult services and others may need more support for food and nutrition services. Some resource-allocation decisions may be long-term (assigning permanent staff to a region), while others may be short-term (shifting staff from central office or one region temporarily). This flexibility in allocating resources will allow DHHS to respond to unique, emerging, or emergency needs.
- Some staff positions currently in the central office may shift to regional offices. In addition, DHHS staff members who are located outside of Raleigh now could be reassigned to new regions once the new system is established.¹⁶ The SSWG expects that DHHS will confer with the outside organization assisting with system reform to provide specific guidance to the legislature regarding the number of new positions required to meet the staffing needs for proposed regional offices.

The SSWG discussed several different visions for staffing the regional offices. They ranged from lean to robust. As discussed above, the number of staff will vary from region to region, but the general staffing model proposed is reflected in Table 3, below.

Position	Description
Regional Administrator	 Serve as liaison between assigned counties and central office staff Monitor counties in region to identify areas of concern Facilitate central office supervision of counties within region, which may include activities such as coordinating monitoring visits, scheduling needed training for county directors or staff, or providing local support for state oversight of a corrective action plan
Administrative Staff	 Office support Human resources (HR) support Other duties as assigned
General Technical Assistance	 Staff with expertise to provide support and training in generalized fields, such as HR, budget, and information technology Depending on needs and resources, staff may be assigned to a region or may rotate between regions
Program Consultants	 Staff with program-specific knowledge (e.g., child welfare, adult services, Medicaid, food and nutrition, child support)

Table 3. Proposed Staffing Model

¹⁶ See UNC School of Government, Summary Table of DHHS Staff Involved with Supervising County DSS Programs, <u>https://www.sog.unc.edu/sites/www.sog.unc.edu/files/DHHS%20Workforce%20HANDOUT.pdf.</u>

 Each region would have some program consultants assigned to the region, but the mix and number would vary from region to region Regions may permanently share a program consultant in some instances Regions may temporarily share program consultants with another region to assist when there is a vacancy or an intensive need for support in the other region If a region does not have a program consultant for a program, central and regional administrators would have flexibility to provide program consultant support from the central office or to make other arrangements as
central office or to make other arrangements as appropriate to ensure that local social services agencies have access to adequate support and supervision

D. What Factors Should Guide Policymakers When Dividing the State into Supervisory Regions?

The SSWG agreed on several key factors that should guide policymakers when dividing the state into supervisory regions:

- 1. No county should be split into different regions.
- 2. Regions should include **contiguous** counties.
- 3. Judicial districts should not be disrupted. This factor became a priority because of the high volume of child welfare work that counties conduct in district court. Adult protective services cases are also heard in district court, although the volume of cases is not as high. In order for regional offices to provide locally-responsive support to the counties in these cases, they should be familiar with the local rules and practices in each judicial district as well as undertand issues related to venue and jurisdiction as applied to each judicial district within the region.
- 4. Regions should be comparable in the size of the **total population** as well as the **population served** by the social services programs.
- 5. Regions should be comparable in **geographic size**. Because regional staff will spend a significant amount of time traveling between counties, it would be unreasonable to assign staff in one region a significantly larger geographic area than staff in another region.
- 6. Regions should strive to preserve natural networks that have developed over time. Many counties work together to provide services. For example, counties may share staff or trade cases when one county has a conflict of interest. The SSWG believes that the regional offices should support and cultivate effective relationships and networks. The

SSWG surveyed the county directors to identify existing relationships and used that data as the foundation for developing the supervisory region maps. (See Appendix D for a description of the survey.)

The SSWG believes that service providers' relationships with other, external partners and programs, such as the Councils of Government and the Local Management Entities (LMEs), are essential to service provision. Many of these partners operate on a regional basis. The working group considered trying to align with regional partnerships that exist for one or more programs (adult services, mental health, child welfare contracts) but concluded that (1) there is no consistent set of partnership boundaries across all of the programs and (2) the other factors identified above were a higher priority than alignment with any single program's partnerships. It is impossible to satisfy all of the high-priority factors identified above and also align with the various service provision regions.

The SSWG recognizes that some important elements that contribute to supervisory region mapping may be changing in the near future.

- The legislature has been discussing revisions to the state's judicial districts.
- The Medicaid system is the midst of transitioning to a managed care model.
- The LME/MCO regions change occasionally and may also evolve in connection with the Medicaid transition.

Because these elements of the system are in flux, the SSWG decided not to recommend a single map of supervisory regions. The group thought it would be more useful to recommend the factors, outlined above, that should be considered when DHHS or the legislature develops the final regional map. As discussed above, the SSWG recommendations will be evaluated by DHHS, and the agency will send a proposed plan to the legislature in the fall of 2018. The legislature will then have the opportunity to consider legislation to implement the new system. The SSWG recommends that DHHS and the legislature take into consideration the priorities identified by the SSWG when developing the final maps.

E. What Are Some Examples of Regions That Are Consistent with These Factors?

The SSWG developed two maps (see Appendix C) that are intended to reflect careful consideration of the factors described above. Both maps satisfy the first three factors (whole counties, contiguous counties, and judicial district alignment). For the last three factors (population, geographic size, and natural networks), the SSWG tried to strike a balance. For example, a region that has a larger population may encompass a smaller geographic area, while a region with a larger geographic area may have a smaller population. Both maps attempt to

preserve as many natural networks as possible. The SSWG posted these two maps online¹⁷ and solicited public comment. All comments received are available online.¹⁸

Listed below are some of the differences between the two maps:

- Number of regions. One map has five regions and the other has seven. The SSWG also discussed a map version that had six regions. While the majority of public commenters preferred seven regions because they inferred that smaller regions would result in more intensive support for each local agency, the SSWG is not recommending a specific number of regions. The SSWG believes that DHHS must fully assess the workforce options to ensure that it will be able to adequately staff the regions.
- Size of regions. The SSWG has some concerns about staff travel time if the regions are too large. If DHHS concludes that larger regions are necessary, the SSWG encourages a plan that divides the regions into districts or zones to enable county-specific specialization for staff.
- Military communities. The SSWG recommends concentrating expertise in serving military communities in one or possibly two regions. When developing the final regional supervision map, DHHS or the legislature should consider clustering the following counties to the extent possible: Cumberland, Moore, Onslow, Harnett, Hoke, Craven, and Brunswick.. The five-region map clusters these counties into two regions, while the seven-region map breaks them into four regions.
- American Indian communities. The SSWG recommends that DHHS or the legislature create a final regional supervision map that does not separate large American Indian communities across regions. This will allow the regional office staff to develop some expertise in working with the families and coordinating with the tribal organizations when necessary. For example, there is a strong community from the Cherokee Nation in Swain and Jackson counties. The Lumbee tribe has a strong community in Robeson county and also in Hoke, Cumberland, and Scotland counties. Both of the proposed maps keep Swain and Jackson counties together , but unfortunately, both maps disrupt the county network surrounding Robeson county.¹⁹

¹⁷ See the "Notices" page of the UNC School of Government's Social Services microsite: https://www.sog.unc.edu/resources/microsites/social-services/notices.
¹⁸ See the "Public Comments" page of the UNC School of Government's Social Services microsite:

https://www.sog.unc.edu/resources/microsites/social-services/public-comments.

¹⁹ The five-region map keeps Robeson together with Hoke and Scotland counties. The seven-region map keeps Robeson together with Cumberland.

IV. Opportunities for Involvement of Local Elected Officials

As mentioned in Section I, the legislation directed the SSWG to identify "[o]ptions for authorizing the board of county commissioners to intervene in urgent situations to assume direct control of the department of social services at the local level prior to the State assuming direct control of service delivery "²⁰

In evaluating how best to approach this particular issue, the SSWG elected to consider a wide range of options for involving local elected officials in the social services system rather than focusing exclusively on options for assuming direct control in urgent situations. This broader scope was necessary because the SSWG does not consider it practical to insert local elected officials into the situation after a crisis or challenge has escalated. It was believed to be more practical to determine whether and how local elected officials could be involved earlier in the process to help the agency prevent a crisis or challenge.

To this end, the SSWG considered options for involvement from the time the social services agency is formed up until the point when the state is preparing to temporarily assume responsibility for local program administration. Below is an overview of that discussion and the options identified.

[ADD LOCAL AGENCY TIMELINE HERE]

A. Agency Formation

The board of county commissioners has the exclusive authority to decide which type of agency will deliver social services within the county. It may be

- a county social services department,
- a consolidated human services agency that includes social services and other human services programs, or
- a regional social services department (after March 2019).

The board also has the exclusive authority to choose the type of governing board for the agency. For single-county agencies, it may be an appointed county social services board, an appointed consolidated human services board, or the board of county commissioners. For regional departments, it will be an appointed board. County commissioners have varying levels of involvement in appointing members to such boards. For a county social services board, the commissioners appoint two of five members (or one of three members). For a consolidated human services board, the commissioners appoint all of the members and a commissioner is

²⁰ S.L. 2017-41, § 1.2.(d)(1)e.

required to serve on the board. For a regional board, they appoint some of the members and a commissioner may be appointed to serve on the board.

Below are options for increased involvement at this stage identified by the SSWG. These options would establish new structural expectations for the local system.

- A county commissioner serves on the governing board.
- Require social services board members to have certain categories of expertise and/or experience.
- Require training for members of a social services governing board on the board's powers and duties.
- Educate boards of county commissioners on the authority and role of social services agencies and governing boards.

B. Ongoing Oversight

Boards of county commissioners are responsible for the budget of the agency providing social services in the county. In some counties, commissioners also receive regular updates about the work of the agency. In the twenty-one counties where the board of county commissioners serves as the agency's governing board, the commissioners are required to meet monthly to receive information, advise the agency director, and carry out other duties of the governing board.

Below are options for increased involvement at this stage identified by the SSWG. These options identify shared but distinct responsibilities at all levels.

- Social services boards take a more proactive role in agency oversight and budget development, holding the director accountable for agency results.
- Educate boards of county commissioners about the county's social services budget.
- DHHS, through the regional office, provides regular updates to the governing board and the board of county commissioners about the agency's performance.

C. Initial Non-Compliance

As discussed above, counties will enter into an annual written agreement with the state that integrates performance requirements. If those requirements are not met or if the local social services agency is not in compliance with applicable laws, the local agency must address the cause of the problem. The supervisory functions tables above reflect the SSWG's vision that the

regional offices will have an ongoing role in helping local agencies monitor and improve quality and identify the root cause of problems or challenges facing an agency. DHHS may, for example, work with an agency to develop a performance improvement plan. The timelines and standards for this type of plan would not be as rigid as those for a corrective action plan.

Below are options for increased involvement at this stage identified by the SSWG.

- The board of county commissioners, the governing board, and the county manager receive prompt notice that there are compliance concerns with the agency. This notice would constitute a "yellow" warning flag.
- The agency shares updates with the county manager and the board of county commissioners about progress in resolving the problem or addressing the challenge.

D. Extended Non-Compliance

If a local agency is out of compliance with the agreement or the law for an extended period,²¹ or if an urgent circumstance arises, the law requires that DHHS and the agency enter into a joint corrective action plan. The initial plan may last for up to twelve months and DHHS may extend the period for an additional six months.²²

Below are options for increased involvement at this stage identified by the SSWG.

- The board of county commissioners, the governing board, and the county manager receive prompt notice that the agency is required to enter into a corrective action plan. This notice would constitute a "red" warning flag.
- Involve the board of county commissioners, the governing board, and the county manager in developing the joint corrective action plan and in oversight of its implementation.
- If the board of county commissioners is *not* the governing board, provide the board with access to confidential information in the same manner as the governing board has pursuant to G.S. 108A-11.
- Provide the board of county commissioners with the authority to exercise emergency powers to make immediate changes in agency leadership and governance.

²¹ Defined as three consecutive months or five months out of twelve consecutive months. S.L. 2017-41, § 3.2.(a). ²² *Id.*

- If the board of county commissioners is not the governing board, provide it with authority to work with the governing board to discipline or discharge the agency director if necessary or to install temporary agency leadership.
- If the board of county commissioners is not the governing board, provide it with the authority to abolish the governing board and assume the board's powers and duties immediately. This action is currently possible and requires a public hearing after thirty days advance notice.²³

E. State Assumes Administration

If the agency fails to complete the corrective action plan, DHHS, through the regional office, is required to temporarily assume administrative responsibility for the social services program that is at issue. Once DHHS concludes that it is necessary to take this step, it must provide thirty days advance notice to the board of county commissioners, the county manager, the governing board, and the agency director. Once DHHS has assumed responsibility for administration, it must inform these same stakeholders about "key activities and ongoing concerns." Once DHHS decides to restore administrative responsibility to the local agency, it must provide notice again to the same group of stakeholders.²⁴

The SSWG did not identify any options for increased involvement at this stage. It did discuss the possibility of **requiring** the board of county commissioners to re-evaluate its earlier decisions related to agency organization and governance *after* the state has restored administrative responsibility to the agency. The purpose would be to force the elected officials to make an affirmative decision to either change the governance structure or keep it the same after a crisis has been resolved.

V. Additional Recommendations

In the course of discussing the questions above, the SSWG arrived at several related conclusions and recommendations.

A. Consistency Across Regions

The primary shortcoming of North Carolina's previous regional system was the lack of consistency across regions. As mentioned above, many people involved with the previous

²³ G.S. 153A-77(a).

²⁴ S.L. 2017-41, § 3.2.(a).

system described the independence developed by the regional administrators over time and the variations in practice and policy interpretations that developed as a result. The SSWG recommends that the new regional system have sufficient safeguards to prevent that type of independence and variation, without discouraging innovative problem-solving or flexibility in administrative design based on local characteristics.

Research on regional systems from other states indicates that this problem is common. Georgia has recently added a layer of supervision at a mega-region level referred to as "districts." In other words, the state is now divided into three districts, and each district includes multiple regions. The three district directors are responsible for keeping the regions within the district and across districts aligned.²⁵ The SSWG was not immediately interested in this approach because it would create another administrative layer to navigate in an already complex system. This district system has developed some interesting strategies for increasing connections across the region and promoting consistency. For example, the district system has created a process for regularly sharing staff between regions to provide temporary "booster shots" of support in areas of particular need. This practice not only increases assistance when needed but also promotes a regional identity based on shared responsibility. **The SSWG recommends that DHHS's plan include several strategic tools, such as booster shots, to develop a regional culture of shared responsibility.**

Virginia also experienced similar challenges with consistency in their five-region system. As a result, the state has recently adopted an approach that it hopes will improve consistency and coordination. Virginia created a position at the central office level that is responsible for supervising and coordinating the work of regional administrators.²⁶ Because the regional offices will be responsible for oversight of so many different programs, the risk of fragmentation in supervision and policy implementation is extremely high. Having a central supervisory contact would be important to developing a systematic and consistent approach across regions. **The SSWG recommends that DHHS include a similar position in the agency's proposal to the legislature.**

Another potential approach for improving consistency across regions is drawn from North Carolina's own experience with regional staff. At one point in the history of the state's regional offices, there was a deliberate decision made to have separate lines of accountability for program consultants. The consultants would report to the central office staff for issues related to policy interpretation and clarification and would report to the head of the regional

²⁵ See *Supervision of Local Child Welfare Administration*, a Georgia fact sheet, on the UNC School of Government's website: <u>https://www.sog.unc.edu/sites/www.sog.unc.edu/files/Georgia_0.pdf</u>.

²⁶ See *Regional Supervision of Local Social Services Administration*, a Virginia fact sheet, on the UNC School of Government's website: <u>https://www.sog.unc.edu/sites/www.sog.unc.edu/files/Virginia.pdf</u>.

office for administrative coordination and oversight. **The SSWG encourages DHHS to consider adopting this type of dual-accountability (policy guidance vs. administrative oversight) in order to promote consistency across regions.** In doing so, it will be extremely important to develop clear lines of responsibility to ensure that regional, county, and central office staff understand who has authority to provide direction. Without such clarity, there is a significant risk of confusion and inconsistency for staff at all three levels.

B. Physical Space for Regional Offices

The SSWG expects that DHHS's plan will recommend physical office space for each region. In developing those recommendations, the SSWG encourages DHHS to identify opportunities to share space with existing agency facilities, such as Vocational Rehabilitation offices, or with partners within the region, such as counties, community colleges, or Councils of Government. Given the supervisory functions described above, the SSWG anticipates that minimal office space will be required. It recommends that, at a minimum, each regional office have permanent space for the regional administrator and administrative staff. Because program consultants are expected to spend most of their time in county offices providing support, it may be most appropriate for those regional staff be home-based with the option of using flex space in regional offices periodically. Regional offices will also need to have capacity to host meetings and training events. When possible, the SSWG recommends that regional offices coordinate with other partners and existing spaces to meet those types of needs.

C. Study Different Models of Organization and Governance

During the SSWG's discussions related to local governance and oversight of social services agencies, it became clear that the landscape for the local social services agency structure has evolved dramatically in the last five to six years. This is the result of legislation enacted in 2012 that authorized counties to make significant changes in the way that social services and other human services agencies are organized and governed.²⁷ Looking ahead, this landscape may evolve even more as counties consider joining together to create regional departments. The SSWG recommends that DHHS or the legislature evaluate the models of local agency organization and governance to compare performance and identify best practices moving forward.

https://www.sog.unc.edu/sites/www.sog.unc.edu/files/Presentations%202.8.2018%20v3.pdf; see also Aimee N. Wall et al., *Comparing North Carolina's Local Public Health Agencies: The Legal Landscape, the Perspectives, and the Numbers, Final Report* (UNC School of Government, May 2013),

²⁷ See the following presentation: Aimee N. Wall, Social Services Regional Supervision and Collaboration Working Group (UNC School of Government, 2/8/18),

https://www.sog.unc.edu/sites/www.sog.unc.edu/files/reports/Comparing%20Public%20Health%20Agencies%20F INAL%20May%202013.pdf.

D. Connection with System Reform Efforts

At several points during the SSWG's process, the group "flagged" issues that required attention from others involved with social services system reform but were of ongoing interest to the SSWG. The specific issues are:

- Staffing. At several points throughout the process, SSWG members expressed concern about the number, quality, and training of staff available to meet the needs of the state's social services system. In order for a regional system of supervision to be successful, it is essential that the appropriate staff are available and prepared to do the work. The SSWG acknowledged that staffing studies and workforce development strategies are outside the scope of its charge. The group anticipates that the outside organization hired to assist with system reform will closely examine this issue and offer recommendations to DHHS and the state related to this concern. The SSWG also expects that the outside organization will work with DHHS to consider staffing needs for regional offices, with particular attention being paid to determining how many positions from the central office should be reallocated to regional offices.
- Child fatality oversight. The SSWG recognizes that one aspect of state supervision of social services involves careful evaluation of child fatalities, particularly those involving the child welfare system. North Carolina's current system is complex, with both state and local components. The SSWG noted that the outside organization hired to assist with system reform is *specifically* charged with reviewing the child fatality review system and making recommendations for change.²⁸ The SSWG believes that regional offices may be able to play an important role in these reviews and should be integrated into the reform recommendations offered by the outside organization.
- Medicaid Transformation. The SSWG recognizes that the Medicaid system is in a time of tremendous transition. The SSWG's charge was to consider how the regional system of supervision could better support county administration in all programs, including Medicaid. The group had some general discussions about the transition that is underway. Because the role of counties in administration of the new system is uncertain, it is not clear what the role of a regional office may be in supervising local administration. Therefore, the SSWG defers making any concrete recommendations related to Medicaid. Rather, the SSWG recommends that the revised Medicaid system (1) have a regional supervisory presence and (2) use the same set of regions as the rest of the social services system.

²⁸ S.L. 2017-41, §2.1.(b)(3).

The SSWG will continue to monitor these issues and, as required by the legislation,²⁹ coordinate with the outside organization, as appropriate, during the course of its work.

E. Ongoing Oversight

North Carolina's social services system is in a state of significant transition. The SSWG is concerned about the possibility that if some of the reforms are not successful, the state could experience avoidable system failures or challenges. The SSWG would like the state to have a mechanism in place to monitor system change and implementation throughout the process in order to identify challenges as early as possible and help the state correct its course. This would include revisiting the regional boundaries. To this end, **the SSWG recommends that DHHS and the legislature consider establishing a new body with the responsibility for ongoing oversight of the system to ensure that the reforms are on path to achieving stated objectives.** The body should include stakeholders from across all three levels of the system (central, regional, local) and have the authority to make recommendations to the state agency, the counties, and the legislature.

VI. Next Steps

As discussed in Section I, above, Stage Two of the SSWG's work will build on some of the concepts discussed in the first stage to develop recommendations regarding (1) improved collaboration between counties and (2) transitioning from a county-administered social services system to a regionally-administered system. As with Stage One, the scope for Stage Two is broad and will encompass all social services programs. The SSWG tentatively plans to begin Stage Two meetings in late April or early May, with the Stage Two report being due February 1, 2019.

²⁹ Id. § 2.1.(c)(2).

Appendixes

Appendix A. Summary of Legislation

S.L. 2017-41 (H 630), as amended by S.L. 2017-102 (H 229)

Rylan's Law/Family and Child Protection and Accountability Act

This session law is expansive in scope and addresses many different social services topics. Each topic is addressed separately below.

Part I. Regional Supervision and Collaboration

This part focuses primarily on the need to (1) enhance state supervision of the administration of social services programs by the counties and (2) improve collaboration between counties. The N.C. Department of Health and Human Services (DHHS) is required to submit a plan for establishing regional offices to the General Assembly by November 15, 2018, with the expectation that the system of regional supervision will be operational by March 1, 2020.

In developing the plan, DHHS must take into consideration recommendations from the Social Services Regional Supervision and Collaboration Working Group (hereinafter Working Group). The Working Group will have eighteen members representing different groups and stakeholders, including legislators, DHHS personnel, members of the judiciary, county commissioners, social services directors, and social services attorneys. There will be two cochairs, one from the Senate and one from the House of Representatives. The UNC School of Government is required to convene the Working Group, facilitate the meetings, and provide administrative and technical support to the effort. The co-chairs are authorized to establish ad hoc subcommittees to gather information from various experts and stakeholder organizations.

The Working Group is required to prepare two reports. The first is due by April 15, 2018, and must include recommendations regarding

- the size, number, and location of the regional state offices;
- the allocation of responsibility between central/Raleigh, regional, and local/county officials in supervising and administering social services programs;
- methods for holding the regional offices accountable for performance and responsiveness;
- information-sharing between the regional offices and the boards of county commissioners regarding local department performance;
- options for authorizing the board of county commissioners to intervene in program administration prior to the state assuming direct control of service delivery.

The second report is due by February 1, 2019, and must include

- recommendations regarding legislative and regulatory changes necessary to improve collaboration between counties that specifically address information-sharing, conflicts of interest, and inter-county movement of clients;
- a vision for transitioning the state from a county-administered system to a regionallyadministered system.

It is important to note that earlier versions of the legislation would have required the state to implement a regionally-administered social services system. The version of the law that was adopted requires regional *supervision* and directs the Working Group to consider the issue of regional *administration*.

Part II. Reforming State Supervision and Accountability

This part directs the Office of State Budget and Management (OSBM), in consultation with DHHS, to contract with an outside organization (contractor) to develop a plan to reform the state supervision and accountability for the social services system. It identifies two components of the plan: system reform and child welfare reform. These components are described in more detail below. The contractor is required to submit a preliminary report to the General Assembly 180 days after the contract is finalized. After that report, the contractor must submit bimonthly progress reports. DHHS is required to submit preliminary recommendations for legislative change by October 1, 2018, and may submit supplemental recommendations as necessary.

System Reform Plan

The contractor will be required to evaluate the role of the state; develop a new vision and strategic direction for the social services system; and develop a plan for reforming the overall system to improve outcomes, supervision, and accountability. It must also develop a plan related to data collection and use and create a dashboard using data from the NC FAST system. The purpose of the dashboard is to serve as a report card for the public to see how the local departments are performing. The contractor is also required to develop a plan for continuous quality improvement (CQI).

In the context of the system reform plan, the contractor will be required to review policies and procedures to identify changes necessary to support reform. It will also need to provide ongoing evaluation and oversight of DHHS's implementation of system reform.

Child Welfare Reform Plan

As part of the system reform plan, the contractor is also required to develop a specific plan focused on child welfare reform. The plan must include recommendations regarding child protective services; preventive and in-home services; child fatality oversight; placement, permanency, health, mental health, and educational services for children and families; services for older youth and those who have aged out; and staff training and compensation. It must also address a long list of specific practice-related issues.

Part III. County Contract/Corrective Action/State Intervention

This part amends G.S. 108A-74, which is a statute that authorizes the state to intervene in county child welfare programs in certain circumstances. The amendments expand the scope of the statute beyond child welfare and also provide additional mechanisms for oversight and intervention.

Initial Contracts (Fiscal Year (FY) 2018–19 and FY 2019–20)

Beginning next fiscal year (2018–19), counties will need to enter into a contract with the state that specifies (1) performance requirements and (2) administrative responsibilities. The contract will govern all social services programs other than medical assistance, which will include child welfare, adult protective services, public assistance, and child support enforcement. DHHS may develop a standardized contract for all 100 counties or it may develop contracts that are more tailored to the needs of individual counties.

The law does not include many details about the substance of the contract, but it does list certain requirements.

- When possible, the performance requirements must be "based upon standardized metrics utilizing reliable data."
- The administrative responsibilities must address, at a minimum, staff training, data submission, and communication with DHHS.

The agreement may also authorize DHHS to withhold state or federal funds in the event of noncompliance.

Contracts Beginning FY 2020–21

Beginning in FY 2020–21, there are some changes to the contract specifications and the consequences for noncompliance.

- The details described above are unchanged except that the performance requirements required in the contract must be based on data in the dashboard developed by the contractor (see Part II, above) and other reliable data.
- If a department fails to comply with the contract or applicable law for three consecutive months or for five months within any consecutive twelve-month period, DHHS and the department must enter into a corrective action plan.
- If the department fails to complete the corrective action plan, DHHS must direct the regional office to temporarily assume responsibility for all or part of the administration of the department's social services. Prior to doing so, DHHS must provide thirty days'

notice to the board of county commissioners, department, county manager, and board of social services.

• Once DHHS determines that the department is able to meet performance requirements, it must restore administrative responsibilities to the department. Prior to doing so, it must provide notice to county officials.

DHHS is required to submit various reports over time to the General Assembly regarding the contracts and corrective action.

Part IV. Regional Social Services Departments

As mentioned above, earlier versions of the legislation would have required a new system of regional social services departments. The version that was enacted directs the Working Group to broadly consider the idea of regionalization and also authorizes counties to create regional departments on their own initiative beginning in March 2019. Some highlights about regional departments are presented below.

- Regional departments may provide the full array of social services or limit the scope to one or more selected programs or services. For example, a group of counties could decide to create a regional department that focuses only on child support enforcement.
- Regional departments will be public authorities, which means they will be separate legal entities from the county. They will have independent authority related to budgeting, contracting, personnel, etc.
- Boards of county commissioners, together with the social services governing board, will have the authority to decide whether to create or join a regional department. The board or boards of county commissioners will have the exclusive authority to decide whether to withdraw from or dissolve a regional department. Withdrawals and dissolutions may be effective only at the end of a fiscal year.
- Regional departments must maintain a physical presence in each county.
- Participating counties are required to contribute financially to the regional department. The Social Services Commission is required to adopt rules governing financial contributions.
- Each regional department will have a governing board appointed by a combination of county commissioners, the Social Services Commission, and the sitting members.
- Each regional department will have a director who has the same powers and duties as a county social services director, as well as the authority to enter into contracts.

The session law included several conforming amendments to other statutes to accommodate the concept of a multi-county social services agency. One of the most significant changes was to G.S. 7B-400(a) (a provision in the state Juvenile Code addressing venue), which was amended to provide that

(1) a proceeding alleging abuse, neglect, or dependency of a juvenile may be commenced in the judicial district where the juvenile resides or is present *at the time the juvenile petition is filed* and

(2) if a regional department includes more than one judicial district, the department must file the petition in the district where the child resides or was present *when the underlying report of suspected abuse, neglect, or dependency was received.*

Like the other provisions in this part, this amendment is effective March 1, 2019.

Part V. Child Well-Being Transformation Council

Effective immediately, the state is required under this part to establish a new seventeenmember Child Well-Being Transformation Council that must focus on improving coordination, collaboration, and communication among agencies and organizations that provide public services to children. Membership of the group is prescribed in the law and includes representatives from different public and private stakeholders. The Legislative Services Commission will be responsible for staffing the Council.

The Council is required to focus initially on

- identifying the relevant child-serving agencies and organizations;
- identifying problems with coordination, collaboration, and communication in child welfare; and
- researching the role of entities like the Council in other states.

After March 1, 2020, the Council is charged with monitoring the reforms that will be underway; identifying gaps in coordination, collaboration, and communication; and recommending changes necessary to remedy the gaps.

Part VI. Driver's License Pilot Project

Part VI is effective July 1, 2017, and requires DHHS to establish a two-year pilot program that reimburses, on a first-come, first-served basis, youth and caregiver costs associated with the youth in care obtaining a driver's license. Expenses include driver's education, driver license fees, and automobile insurance. The Division of Social Services must report on the pilot program to the Joint Legislative Oversight Committee on Health and Human Services by March 1, 2018.

Part VII. Pilot Waiver for IAFT Foster Parents

DHHS is required under Part VII to establish a pilot program that waives the work requirement for foster parents of children who require Intensive Alternative Family Treatment (IAFT) in an effort to reduce placement disruptions for these children with high special needs. Participating LMEs/MCOs must submit a report of required measured outcomes to the Division of Social Services, comparing whether there is improved placement stability and compliance with threshold target measures for treatment goal achievement and the use of higher-level hospital beds. The Division of Social Services must submit a report to the Joint Legislative Oversight Committee on Health and Human Services by December 1, 2018.

Part VIII. Termination of Parental Rights/Appeals

Part VIII amends G.S. 7B-1001 and S.L. 2017-7. These changes are effective for appeals filed on or after January 1, 2019. G.S. 7B-1001(a1) is a new subsection that allows an appeal of the following final orders to be made directly to the North Carolina Supreme Court:

- an order granting or denying a termination of parental rights (TPR) and
- a G.S. 7B-906.2 order that eliminates reunification as a concurrent permanent plan when a TPR has been filed within 65 days of the entry and service of that order.

G.S. 7B-1001(a)(5) is amended to specify the written procedural requirements for an appeal of an order eliminating reunification as a concurrent permanent plan when a TPR has not been filed within 65 days (reducing the time from 180 days) from the entry and service of that order.

Part IX. Reducing the Time Period for Foster Care Licensure

Effective June 21, 2017, DHHS is required under this part to grant or deny an application for a foster care license within three months from the date of application. The agency must also examine other timeframes for processing foster care applications to reduce the time to approve or deny an application.

Part X. DSS Observation before Reunification (Rylan's Law)

Effective June 21, 2017, Part X amends G.S. 7B-903.1(c) requiring DSS to observe and provide documentation of at least two visits between the child and the removal parent, guardian, custodian, or caretaker before recommending to the court the child's return of physical custody to such person.

Appendix B. Definitions and Acronyms

Definitions

These general definitions of terms used in the report are not academic or officially sanctioned. They are intended to reflect how the terms were used in the course of SSWG discussions.

Term	Definition /Description		
Best Practices	Professional procedures that are accepted or prescribed as being correct or most effective		
Compliance	Adhering to the terms/standards/policies outlined in relevant contractual agreements and/or applicable laws.		
Corrective Action	Step-by-step plan that is developed jointly by DHHS and the local social services		
Plan	agency to resolve a situation that has resulted in either (1) extended non-		
	compliance or (2) an urgent circumstance. <i>See</i> G.S. 108A-74.		
Dashboard	The "Social Services Transparency and Wellness Dashboard" that is required to be developed by an outside organization. This tool will integrate existing data into a publicly available interface that will serve as a "report card" for the performance of local social services agencies. <i>See</i> S.L. 2017-41, § 2.1.(d).		
Evidence-Based	The integration of the best available research with clinical expertise in the		
Practices	context of client characteristics, culture, and preferences		
Extended Non-	A state of non-compliance that lasts three consecutive months or five months		
Compliance	within any twelve-month period		
Non-Compliance	Failure to adhere to terms/standards/policies outlined in relevant contractual agreements or applicable laws		
Program	The day-to-day duties associated with program and service delivery at the local		
Administration	level, often involves direct client contact		
Program	Individuals with program-specific knowledge who are capable of carrying out		
Consultants	monitoring duties and providing technical assistance and can support local		
	departments of social services in the administration of programs		
Program	The provision of oversight and support to entities charged with program		
Supervision	administration		
Regional	A local agency that serves more than one county and provides one or more social		
Department of	services. Counties may voluntarily create regional departments beginning in		
Social Services	March 2019.		
Technical	The provision of guidance and support by an individual or entity with specific		
Assistance	expertise in that field, program, or problem area		

Commonly Used Acronyms

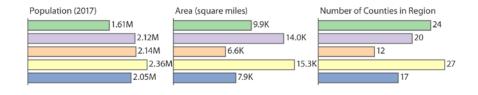
Acronym	Long-Form Reference
AAA	Area Agencies on Aging
APR	Adult Program Representative
APS	Adult Protective Services
BOCC	Board of County Commissioners
CFPS	Child Fatality Prevention System

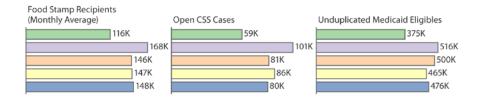
CFPT	Child Fatality Prevention Team	
CFSR	Child and Family Services Review	
CHSA	Consolidated Human Services Agency	
CHSB	Consolidated Human Services Board	
COG	Council of Government	
CPR	Children's Program Representatives	
CPS	Child Protective Services	
CQI	Continuous Quality Improvement	
DAAS	Division of Aging and Adult Services	
DHHS	Department of Health and Human Services	
DHSR	Division of Health Services Regulation	
DMA	Division of Medical Assistance	
DSS	Division of Social Services	
LME/MCO	Local Management Entity/Managed Care Organization	
NCACC	North Carolina Association of County Commissioners	
NC FAST	North Carolina Families Assessing Services Through Technology	
NCGA	North Carolina General Assembly	
NCSL	National Conference of State Legislators	
PH	Public Health	
SHRA	State Human Resources Act	
SNAP/FNS	Supplemental Nutrition Assistance Program/Food and Nutrition	
	Services	
SOG	School of Government, University of North Carolina at Chapel Hill	
SS	Social Services	
SSWG	Social Services Regional Supervision and Collaboration Working Group	
ТА	Technical Assistance	

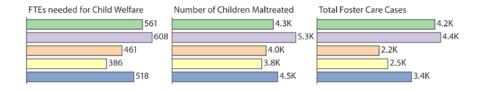
Appendix C. SSWG Regional Maps

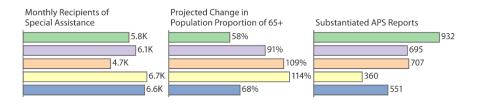


Proposed 1: Population, Judicial Districts, and Network (Five) Regions

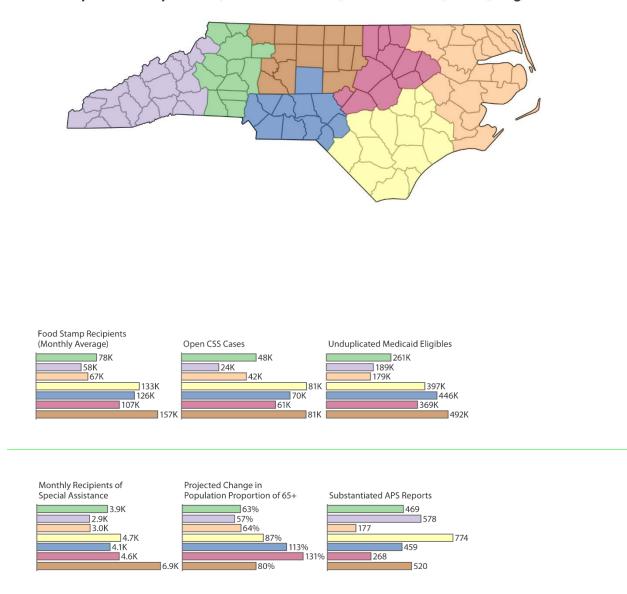


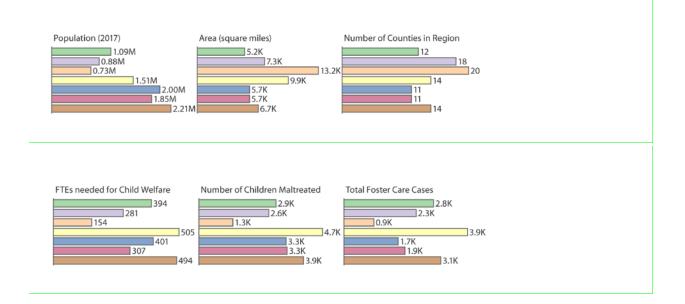






Proposed 2: Population, Judicial Districts, and Network (Seven) Regions





Appendix D. Methodology for Survey of Natural Networks; Data Sources

Methodology

The Social Services Working Group (SSWG) decided that it might be valuable to investigate some of the natural relationships that occur between county social services departments. In order to effectively measure these relationships, the first step was to define what we would consider a "relationship." We wanted to specify connections that extend beyond informal communication to something structural that could be affected by drawing regional lines (e.g., counties sharing staff, one county providing services on behalf of another, or frequent referrals of cases involving conflicts of interest). The SSWG distributed a Qualtrics survey to county social services directors to collect data on both the counties that have relationships as well as on the strength of those relationships, measured by the frequency that counties interact within the confines of the previously defined parameters. First, the survey asked for the respondent's county, and then it posed the following questions.

- 1. Please identify up to six counties that your county engages with on a regular basis. Please include only inter-county relationships that involve sharing resources or staff. Examples include exchanging conflict of interest cases and sharing staff, programs, or resources.
- 2. Please indicate how often your county interacted with each of the following counties during 2017:
 - a. Daily
 - b. Weekly
 - c. Monthly
 - d. Quarterly
 - e. Annually
- 3. Please take this opportunity to elaborate on your county's relationship with each of the previously indicated counties. What does each relationship involve? What staff, programs, or resources are shared?

The SSWG collected full responses from roughly eighty-eight counties. Although an additional few responses were not completed, we elected to use any response that had identified counties and their respective frequencies, because we assumed the counties had responded accurately to the portion of the survey from which we used the data. After collecting the data, the SSWG scored the responses from 0 to 5, with 0 being no interaction between a county and the indicated counties and 5 indicating daily interaction. One should note that there was an effective maximum "strength" of 10 between any two counties, which occurred under the scenario where both counties indicated interacting with one another daily.

We next supplemented the data collected from the survey with data on county adjacencies, e.g., which counties share borders. This added a "strength" of 2 between each pair of contiguous counties and means that our maximum strength between any two counties would be 12, those that indicated interacting with each other daily and that share a border.

The SSWG then used the software Gephi to apply the Louvain Method to the data. The Louvain Method is a way to detect "communities" within networks, which are identified by stronger connections within a community than between communities. Basically, the software running the Louvain Method looked at each county (in our case) and iteratively checked to see if grouping certain counties together would increase the overall strength of the networks. The total strength of the output is measured by adding the strengths of connections that were put into the same communities. Consider the following example.

- County A and County B both indicate working together daily and have a shared border; the two counties thus will have a strength of 12.
- County B shares a border with County C, but the two counties don't work together at all; they will have a strength of 2.
- County C and County D both indicate working together daily and have a shared border; they will have a strength of 12.
- The Louvain Method determines that County A and County B should be grouped together and that County C and County D should be grouped together, given that their connections are stronger than other combinations.

This is an oversimplification for illustration purposes. There is an additional part to the process, but an explanation of it is not necessary to understand what the outcomes represent.³⁰

Although the software proposes an optimal number of groupings, changing parameters during the process can result in more or fewer communities. The SSWG used the software to generate groups of five, seven, and ten regions that were optimized for the strengths of within-region connections. These "network" maps provided the foundation for the SSWG's efforts to create regional supervision maps. As discussed in the report, the SSWG modified the network maps to align with judicial district borders and minimize differences in total population and clients served across regions.

³⁰ For more information about the Louvain Method, see Vincent D. Blondel et al., *Fast Unfolding of Communities in Large Networks*, J. STAT. MECH. (2008), available for download at <u>https://arxiv.org/abs/0803.0476</u>.

Data Sources

The maps that resulted from SSWG discussions incorporated data from many different sources. Below is a brief description of those sources.

Data Topic	Year	Source
Population	2017	N.C. Office of State Budget and Management (OSBM), Log Into North Carolina (LINC), <u>https://www.osbm.nc.gov/facts-figures/linc</u>
Area (Square Miles)	2016	National Association of Counties (NACo); Mapping County Data, <u>http://www.naco.org/</u>
Number of Children Maltreated	FY 2016– 2017	Dean F. Duncan et al., <i>Management Assistance for Child Welfare,</i> <i>Work First, and Food & Nutrition Services in North Carolina</i> (V3.2, 2018), http://ssw.unc.edu/ma/
Total Number of Foster Care Cases	FY 2016– 2017	Dean F. Duncan et al., <i>Management Assistance for Child Welfare,</i> <i>Work First, and Food & Nutrition Services in North Carolina</i> (V3.2, 2018), http://ssw.unc.edu/ma/
Full-Time Equivalents (FTEs) Needed for Child Welfare	2016	N.C. Department of Health and Human Services, Division of Social Services, Child Welfare Master Workbook
Average Monthly Recipients of Food Stamps	FY 2016– 2017	Dean F. Duncan et al., <i>Management Assistance for Child Welfare,</i> <i>Work First, and Food & Nutrition Services in North Carolina</i> (V3.2, 2018), http://ssw.unc.edu/ma/
Unduplicated Medicaid Eligibles	2017	N.C. Office of State Budget and Management (OSBM), Log Into North Carolina (LINC), <u>https://www.osbm.nc.gov/facts-figures/linc</u>
Open CSS Cases	8/31/17	N.C. Department of Health and Human Services, Division of Social Services
Substantiated APS Reports	FY 2016– 2017	N.C. Department of Health and Human Services, Division of Aging and Adult Services, APS Register Data
Percentage Change in Proportion of Population 65+ 2010-2030	2010	UNC Population Center, <i>Carolina Demography</i> , <u>http://demography.cpc.unc.edu/resources/data-tables/</u>
Average Monthly Recipients of Special Assistance	FY 2016– 2017	N.C. Office of State Budget and Management (OSBM), Log Into North Carolina (LINC), <u>https://www.osbm.nc.gov/facts-figures/linc</u>