

**BRIDGING LOCAL SYSTEMS:
STRATEGIES FOR BEHAVIORAL HEALTH AND SOCIAL SERVICES COLLABORATION**

ALLIANCE REGIONAL LEADERSHIP SUMMIT

**Friday, January 20, 2017
Durham, North Carolina
12:00 - 3:00 pm**

ATTENDEES

Brenda Jackson, *Cumberland County DSS*; Michael Becketts, *Durham County DSS*; Pamela Bowen, Denise Boyette, Wendy Whitfield, *Johnston County DSS*; Lisa Cauley, Antonia Pedroza, *Wake County Human Services*; Moya Foster, Beth Melcher, Ann Oshel, Kate Peterson, Rob Robinson, Dough Wright, *Alliance*; Walt Caison, Yvonne French, Catharine Goldsmith, Eric Harbour, Teresa Strom, *NC DHHS*; Anne Foglia, Michelle Ries, *NCIOM*; Warren Ludwig, *consultant/facilitator*.

AGENDA

1. Review list of county specific collaborative projects.
2. Review of County, Alliance, and Jordan Institute data reports.
3. Discussions of strategies to build capacity, place children locally, and prevent disruptions.
4. Opportunities to collaborate on adult and guardianship clients.
5. Other opportunities and next steps

The meeting agenda is available [here](#).

COUNTY SPECIFIC COLLABORATIVE PROJECTS

Cumberland County, observed a much higher incidence of placement disruptions than expected when looking at outcomes for justice-involved youth during a continuous quality improvement initiative in Spring 2016. As a result, a community collaborative has held a series of extremely well-attended foster family summits to address training needs. In addition, Alliance will be collocating a licensed clinician in Cumberland County DSS to help prevent placement disruptions and moves to higher levels of care.

Durham County, has developed a proposal for Tier 3 case management with high-fidelity wraparound services.

Wake County, has developed a Medicaid service definition to cover crisis diversion beds for use during inpatient assessment. Working with providers to create these beds is a slow process.

REVIEW OF COUNTY, ALLIANCE, AND JORDAN INSTITUTE DATA REPORTS

Kate Peterson, with Alliance, presented a report on provider agencies, placements, and moves from the Rapid Resource Database implemented in October 2016, as well as a cumulative data worksheet on therapeutic foster home moves from June 2015 to August 2016. These reports are available [here](#) and [here](#). Ms. Peterson cautioned the group that these reports use self-report data. Summit participants noted in their review of the data that for all level therapeutic homes, most requests for moves were due to the behavioral needs of the child being too high for foster parents or the agency.

Denise Boyette, with Johnston County DSS, presented a summary data report of the placements and moves of children in custody. Of the children in custody (77 on average), 54% are placed in a regular/Level I foster care, group home care, or a medical setting; 29% are placed in a Level II therapeutic foster home; 13% in Level III homes, and 3% are in jail. Johnston County sees the greatest number of moves among children placed in Level II care; moves are most often due to the behavioral needs of the child being beyond the capacity of the home. The Johnston County data report is available [here](#).

Brenda Jackson, Director of Cumberland County, DSS, presented a report of placement stability among children in Cumberland County DSS custody. Ms. Jackson noted that the number of children in DSS custody is increasing drastically, and gave an overview of the context in Cumberland County including the military presence, large transient population, and judicial practices. The Cumberland County courts tend to place 30-50 delinquent youth in DSS care per year, who often experience a number of placement disruptions and age out of custody after 3-5 years. The Cumberland County data report is available [here](#).

Warren Ludwig, facilitator, briefly walked the meeting participants through the data handouts compiled for each county using data from the Jordan Institute for Families. The Jordan Institute data reports are available [here](#).

Meeting materials are available on the NCIOM website [here](#).

DISCUSSION OF STRATEGIES TO BUILD CAPACITY, PLACE CHILDREN LOCALLY, AND PREVENT DISRUPTIONS

In conjunction with the discussion of the data reports focused on capacity, placement locations, and placement disruptions, summit participants discussed several related issues including the shortage of local foster care homes, the strain placed on the child, family, and agencies by placements outside of the county, and the training and assessment of providers to ensure quality care. Though many of the issues raised are consistent with a national foster care crisis and not unique to the Alliance catchment area, summit participants pushed to identify strategies to address the placement needs of children locally.

Foster Care Home Shortage

Michael Beckett, Director of Durham County DSS, raised the issue faced by the DSS agencies that there is an inadequate supply of foster homes, and concerns regarding the competition for foster families between therapeutic providers and DSS agencies. The shortage in each county is compounded by both an increase in the number of children entering foster care and pressure to move children from higher intensity services into family settings. Due to the shortage, DSS are forced to place children who do not meet the service criteria in therapeutic foster homes and pay the rate difference.

Non-Local Foster Care Placements

In addition, the overall shortage of foster homes creates the need to place children outside their home county. DSS staff noted that the difficulty placing children within their home county is intensified by the placement of children from other counties. Increased displacement not only creates further disruption in children's lives but also increases the time and expense to follow up with children and support family visitation, contributing to burnout among social workers.

Network Quality

DSS staff around the table also raised concerns about the quality and skill level of the network providers. In particular, the high rate of requests to move a child from a therapeutic foster home originating with the foster parents or agency raised concern that therapeutic foster care providers in the Alliance network are not adequately training or supporting families for successful placements.

Strategies Discussed

- Consider opportunities for recruiting foster parents.
- Incentivize agencies to treat more children in their home counties.

- Utilize geomapping to improve counties' knowledge of the closest placements available across providers.
- Improve alignment regarding comprehensive trauma-informed assessments of children and parents to inform placement, treatment, visitation, and reunification.
- Enhance consistent expectations, assessment, training, licensure, and financial incentives among therapeutic foster parents.
- Look to the data to identify which therapeutic home providers are placing kids in their home county, and which are requesting the most moves as a first step towards pay-for-performance.

NEXT STEPS

- The planned conversation regarding adult needs and guardianship will be the first agenda item at the March meeting.
- The summit participants will continue with the development of a core list of outcomes/metrics that the region will focus on reporting and improving.

The next meeting will take place on March 24, 2017 from 12-3 PM at Alliance's Office (4600 Emperor Boulevard, Suite 200, Durham, NC—Training Rooms 104 & 105).