



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

**PARTNERS BEHAVIORAL HEALTH MANAGEMENT REGIONAL LEADERSHIP SUMMIT**

**Monday, October 3, 2016  
Gastonia, North Carolina  
12:00 - 3:00 pm**

**Attendees**

Karen Harrington, John Eller, Robert Powers, Donna Sallstrom, Gayle Mitchell, Rhett Melton, Kim Harrell, Jeffery Eads, Andrew Schrag, Allison Gosda, Beth Lackey, Lynne Grey, Tara Conrad, Susan McCracken, Sandy Kennedy, Yvonne French, Lisa Jackson, Mike Forrester, Kristy Preston, Roslyn Thompson, Angela Karchmer, Melanie Lowrance, Lana White, Lisa York, Angela Williams, Karen Ellis, Jamie Pearson, Kathy Craig

**OVERVIEW**

Warren Ludwig (meeting facilitator) introduced the Bridging Local Systems project and the general goal shared by the state leadership and funders to strengthen communication and collaboration between the county DSS agencies and the LME/MCO system to improve the care delivery and outcomes for the shared population of families in need. Summit participants included representatives from the Partners MCO, as well as Burke, Catawba, Cleveland, Gaston, Iredell, Lincoln, Surry and Yadkin. There were also representatives from the Consumer and Family Advisory Committee and the NC Department of Health and Human Services present.

Following introductions, Warren placed the summits in the context of the Project Broadcast efforts and current backdrop of the Child and Family Services Review Program Improvement Plan and discussion of further consolidation of MCOs. He asked the attendees to discuss the specific outcomes they want to achieve by participating in this project.

Rhett Melton, CEO of Partners, talked of efforts the MCO has been making to forge relationships with DSSs. He commented that the name Partners has meaning and that he hopes that his organization will hear how they can partner better with the DSSs they work with. He opened the possibility of looking together at opportunities to reinvest savings.

Several DSS Directors and representatives spoke next and all echoed Partners efforts to reach out to them. While the loss of the relationships that existed between DSSs and smaller mental health area programs was acknowledged, all credited the expanded Partners MCO with having reached out to form relationships, which they felt had made a real difference in the last one to two years. John Eller from Catawba expressed hope that the partnership could lead to actual services integration. He also commented that more progress had been made working together around children than adults. Karen Ellis of Cleveland said her agency had monthly staffings with Partners, knows who to call there, and that a Partners staff person now has office space in their building. Susan McCracken of Lincoln stated that communication with Lincoln has improved.

tremendously in the last year, especially around children's issues. She said more is needed on the adult side. Iredell County representatives noted Partners also has a staff person at their offices and said that daily communication and follow ups are great, although staff turnover in both agencies remains a challenge. Iredell also reported having roundtables to talk through difficult cases and who can do what. Gaston County essentially said they also agree that communication is good and there are considerable partnerships. Several DSS representatives identified the Partners regional directors as especially helpful and available to the DSS agencies for difficult cases, even on holidays and weekends. Later, there was discussion that line staff might feel cross agency frustrations, especially when services or placements were not promptly available. At the same time, it was affirmed that leadership felt there was good communication even when there was disagreement.

Rhett Melton talked of wanting having better data to show the impact of services. Several DSS representatives echoed interest in better data both for outcomes and to support real rather than anecdotal service needs, with several speaking of data on placement stability and disruptions being important. He also described the MCO's funding as falling into three buckets: the largest being Medicaid funding; a much smaller bucket of funding from the state for persons not Medicaid eligible; and a third, smaller bucket of funding from counties with an understanding that funds will stay in the county of origin. He expressed a desire to talk with DSS about the difficult choices to be made with limited discretionary funds.

It was agreed that the MCO and DSSs had made tremendous progress working out communication issues and a basic sense of partnership, positioning them to move forward on joint projects to improve outcomes for their shared clients.

## **OPPORTUNITIES FOR COLLABORATION**

The following areas were discussed by the MCO or by one or more DSS agencies:

### Adult Populations

It was noted that a lawsuit involving adult mental health services was settled without DSS involvement, and participants expressed that both communication and services could be improved for shared adult clients. There was advocacy for targeted case management and service plans that included housing. MCO representatives offered to present information on adult services and possible training topics for DSS staff at the next Regional Leadership Summit meeting.

### Prevention of Placement Disruptions and Prevention of Children Entering Foster Care

DSS representatives spoke of wanting to collaborate with the MCO on two kinds of prevention: prevention of foster placements being disrupted, and prevention of children entering foster care. Although the two systems have different approaches to evaluating placements, both agree that placement disruptions have a human cost for the child and a financial cost for both systems. Integrated efforts to prevent children from entering foster care could take place while children were receiving CPS In-Home Services.

### Difficult to Place Children

Several difficult to place types of children were discussed including children with autism, pregnant women, and young children with medical needs.

### Social Indicators of Health

Mike Forrester discussed that the MCO has started working with some counties on projects looking at social indicators of health.

### Addiction Treatment

Iredell County and others advocated for treatment for opiate addiction for parents who have lost or do not have Medicaid. It was suggested such treatment might allow children to go home or possibly not enter care.

### Data

The importance of using data to inform decisions about priorities and measure outcomes came up multiple times. It was discussed that the MCO and the county DSSs keep different data and that it would be valuable to share. Additionally, it was speculated that each county probably keeps different data, and agreeing to common data elements would be helpful.

## **ACTION ITEMS**

- 1) Collaborative Projects: Rhett Melton committed the MCO to reaching out to individual county social service departments to discuss possible shared projects.
- 2) Communication and Training: Partners representatives committed to preparing information about adult services and possible trainings for DSS staff on adult services to the next summit meeting.
- 3) Both county DSSs and Partners agreed to gather information on their data specifically as it relates to placements, placement stability, and placement disruptions. Mike Forrester agreed to create a report for one county from the MCO data bases. Warren Ludwig requested that the MCO and each county send a list of the data elements they collect related to placements and disruptions together with definitions of the elements and, if available, a sample report to Anne Foglia prior to the next meeting. He said that he would attempt to organize the information for discussion.

## **AGENDA ITEMS FOR OCTOBER 24, 2016, MEETING**

- 1) Partners presentation on Adult Services

- 2) Report from Partners and individual DSSs on discussions about possible shared projects
- 3) Review of data on placements and placement disruptions

## **RESOURCES**

Resources for the Regional Leadership Summits can be found at [www.nciom.org](http://www.nciom.org)

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**Next Regional Leadership Summit: October 24<sup>th</sup> from 12-3 PM at the Partners' Auditorium, 901 South New Hope Road, Gastonia, NC.**