

*Bridging Local Systems: Strategies for Behavioral Health and Social Services Collaboration* 

# **REGIONAL LEADERSHIP SUMMIT – TRILLIUM HEALTH RESOURCES**

# MEETING SUMMARY

Monday, August 21, 2017 Ahoskie, NC

### ATTENDEES

Craig Patterson, *Camden County DSS;* Carla Meban, *Currituck County DSS*; Ann Holley, Phyllis Parker, *Gates County DSS;* Kathy Ford, *Pasquotank County DSS*; Bland Baker, Rose Burnette, Jennifer Cox, Hope Eley, Cathy Mathis, Tracy Webster, Ashley Rhea, *Trillium Health Resources*; Dennis Williams, *DHHS;* Anne Foglia, *NCIOM*; Michael Owen, *Facilitator*.

## INTRODUCTIONS & OVERVIEW

After introductions, Michael Owen (meeting facilitator) reviewed the sponsors and goals of the Bridging Local Systems project as well as the meeting agenda:

- Overview & Introductions
- Review Previous Meeting: What do you want to accomplish?
- Discuss Relevant Developments
- Self-organize Follow Up & Follow Through

Michael's slides are available here.

#### REVIEW OF PREVIOUS MEETING: WHAT DO YOU WANT TO ACCOMPLISH?

Michael reviewed the strengths, challenges, and strategies identified by the Northern Trillium Region participants at the June meeting in Greenville (<u>Meeting Summary</u>) and asked meeting participants to reflect and share any additions:

#### Strengths: What's working?

- DSS leaders reported timely responses to calls—particularly those made outside the call center using direct phone numbers.
- The System of Care meetings are working well and the System of Care coordinator is a helpful resource.



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- Care coordination working well DSS know who to call and report good relationships with Trillium care coordinators (for both children and adults).
- Trillium regional directors have presented to county board of commissioners, helping to expand the relationship to the community as a whole and support county and regional funding needs.

### Highest Priority Issues:

- Partners identified a need a better common understanding of
  - o Key vocabulary (e.g., crisis, medical necessity, treatment, placement);
  - Each agency's role and responsibilities;
  - o What drives decision-making in each agency;
  - o What governs service delivery within DSS and within Trillium;
  - o How new services are created;
  - o How existing services are authorized;
  - o And where is there flexibility for collaboration?
- Several counties raised concerns about adult services—
  - DSS leaders reported that finding appropriate placements for adults (particularly young adults) with coexisting disorders is getting increasingly difficult.
  - DSS social workers face lots of difficult questions regarding adult clients' capacity, right to self-determination, and guardianship.
- Participants raised questions about the different goals of DSS and MCO child and family team meetings that are creating confusion in state and federal reviews. One DSS director stated that the expectations for child and family teams in both systems are assumed to meet both DSS and behavioral health requirements but they do not.
- Identifying providers with the right skills to prevent placement disruption can take time and children are sometimes moving through several placements during that interim period.
- There is a shortage of respite and crisis placements.

## STRATEGIES & NEXT STEPS

- Develop and share contact lists and organizational charts for each partner agency.
- Develop and share key vocabulary resources among partner agencies.
- Continue ongoing communication and collaboration either by convening regional meetings or through existing forums such as the System of Care collaboratives. Trillium expressed willingness to consider reconvening regional meetings if DSS leadership agreed to participate.



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- Build up the skills of current therapeutic foster care providers to be able to better handle crisis placements. And further explore potential services to address gaps for children in crisis.
- Explore different licensing in other states that allow facilities to have greater flexibility to re-task beds to serve emergency shelter/respite needs, or establish community rehabilitative residential placements (see Pennsylvania for example).
- Consider opportunities to create in-lieu-of service definitions that can better serve northeastern North Carolina.