

**BRIDGING LOCAL SYSTEMS:  
STRATEGIES FOR BEHAVIORAL HEALTH AND SOCIAL SERVICES COLLABORATION  
September 14, 2016  
North Carolina Institute of Medicine, Morrisville  
1:00 - 3:00 pm**

**Attendees**

Lauren Benbow, Wayne Black, Sherry Bradsher, Walt Caison, Jenny Cooper, Mary Cooper, Anne Foglia, Catharine Goldsmith, Kevin Kelley, Warren Ludwig, Suzanne Merrill, Kristin O'Connor, Mark O'Donnell, Jeff Olson, Susan Osborne, Michael Owen, Jeanne Preisler, Jason Vogler, Tamika Williams, Berkeley Yorkery, Adam Zolotor

**CHARGE TO THE COMMITTEE**

*Adam Zolotor, MD, DrPH*

*President & CEO*

*North Carolina Institute of Medicine*

- Goal of this project: To improve collaboration, communication, and referrals between county DSS agencies and the LME/MCO system to improve care coordination and care delivered to residents of those regions receiving services across systems.
- Partners:
  - The Duke Endowment
  - NC DHHS (including, DSS, DMA, DMHDDSAS, DAAS)
  - Counseling on Community Programs
  - NC Association of County Departments of Social Services
- Overall Plan:
  - Regional Leadership Summits at the core of this project:
    - Up to 5 meetings with up to 7 LME/MCO regions (depending on their merger timelines) and the local DSS agencies.
    - LME/MCO leadership and leadership from 5-8 county DSS agencies in the catchment area.
  - Statewide Steering & Advisory Committee:
    - Meet approximately halfway through and at the end to hear local recommendations and updates and review the statewide report.
- Products
  - Regional Reports – summary of the findings and next steps for reach Regional Leadership Summit.
  - Synthesized statewide report – summary of findings from the local meetings, state level recommendations to facilitate regional collaboration, and metrics to measure successful collaboration at the regional level.

## **UPDATES ON SCHEDULING**

*Lauren Benbow, JD*

*Project Director*

*North Carolina Institute of Medicine*

### **Eastpointe**

*Facilitated by Michael*

Meetings:

- 12-3pm, Wednesday, September 28, 2016  
500 Nash Medical Arts Mall, Rocky Mount, NC 27804
- 12-3pm, Wednesday, October 26, 2016  
514 East Main Street, Beulaville, NC 28518
- TBA: after a 2 month recess the summit will resume in January 2017

Confirmed DSS: Duplin, Edgecombe, Greene, Sampson, Scotland

### **Partners Behavioral Health Management**

*Facilitated by Warren*

Meetings:

- 12-3pm, Monday, October 3, 2016  
901 S. New Hope Road, Gastonia, NC 28054
- 12-3pm, Monday, October 24, 2016  
901 S. New Hope Road, Gastonia, NC 28054
- TBA: after a 2 month recess the summit will resume in January 2017

Confirmed DSS: Gaston, Iredell, Lincoln, Surry, Yadkin

### **Sandhills Center**

*Facilitated by Michael*

Meetings:

- 11am-2pm, Tuesday, November 1, 2016  
1120 7 Lakes Drive, West End, NC
- 11am-2pm, Tuesday, November 29, 2016  
1120 7 Lakes Drive, West End, NC
- TBA: after a 2 month recess the summit will resume in March 2017

Confirmed DSS: Guilford, Richmond

### **Alliance Behavioral Healthcare**

*Facilitated by Warren*

Meetings:

- 11am-2pm, Monday, November 7, 2016  
4600 Emperor Boulevard, Suite 200, Durham, NC 27703
- 12-3pm, Friday, December 2, 2016  
4600 Emperor Boulevard, Suite 200, Durham, NC 27703
- TBA: after a 2 month recess the summit will resume in March 2017

Confirmed DSS: none as of 9/14

## REGIONAL LEADERSHIP SUMMITS

*Warren Ludwig, PhD*  
*Project Facilitator*

*Michael Owen*  
*Project Facilitator*

- Loose agenda for the first meeting of each Regional Leadership Summit:
  - Overview, Introductions, Background
    - Briefly introduce sponsors and supporters of this initiative.
    - Be transparent about the dual population approach and frame the breakdown in the work between the first meetings focused on services for children and their families and the final meeting specific to adult needs. Expect general themes such as access, timeliness and placement to be cross-cutting.
  - Purpose & Goals
    - Frame the meetings in terms of shared goals. Individuals will be asked to share what specific outcomes they want to achieve by participating in this project as a way to start off and facilitate this conversation.
    - As part of the orientation to the conversation, acknowledge the external factors that will influence the conversation explicitly, NOT as drivers of the conversation, but as considerations for how take steps forward. This includes the CFSR PIP which calls for MOUs and performance indicators for improved coordination of services between DSS and LME/MCOs.
    - The steering and advisory committees had some discussion about the open-ended structure of the meetings as it relates to the desire for specific outcomes.
  - What is working well already?
  - What challenges have you overcome already?
  - What are the highest priority issues that you are facing now?
  - Schedule and plan for future meetings
- The meetings will include a working boxed lunch, to be made available at 11:45 am for those meetings scheduled from 12-3pm.
- Additional considerations raised by the committee:
  - LME/MCO catchment areas have been significantly increased by mandate, and as a result there are struggles and issues to be addressed with or without future consolidation.
  - How will we know outcomes have been improved? Discussion will need to include how to identify, evaluate, and sustain shared outcomes.

- The language used to describe the two populations was revised to reflect child welfare-involved children and APS-involved adults and DSS guardianship cases. There will likely need to be some basic level-setting review of terminology in the beginnings of the meetings.
- Materials to consider sharing with participants in advance of the meetings:
  - Participant List
  - Synthesized Project Broadcast ‘artifacts’ with a brief cover letter
  - CFSR PIP?
  - Summary of the high need/high cost populations in question (Eric Harbour’s slides?)
  - Slides from presentation: “This is what we think of you & this is what you think of us”
  - Partners for Excellence presentation on language used by LME/MCOs (Jenny Cooper)

#### **GROUP DISCUSSION: GOALS**

- DSS offices share a list of foster children and parents with the LME/MCOs so that service providers can serve the children and family knowledgably and appropriately.
- Develop a communication protocol and facilitate downstream relationships that enable collaborative problem solving between DSS and LME/MCOs leadership in a constantly changing environment.
- How do legal barriers to child welfare consenting to services play a role? Providers are increasingly having to get consent from parents who maintain parental rights if not custody.
- Identify real or perceived structures in place that impede communication. Ideally, the state representatives present can share best practices from around the state and serve as a resource as to how these barriers can be managed or deconstructed.

#### **NEXT STEPS**

- The Steering and Advisory Committees will have a phone call on **Friday, October 14<sup>th</sup> at 1pm** to debrief following the first two Regional Leadership Summit meetings.
- A list of expected participants will be shared prior to each meeting.