



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

**SANDHILLS REGIONAL LEADERSHIP SUMMIT**

**Tuesday, February 28, 2017  
Seven Lakes, North Carolina  
11:00 am - 2:00 pm**

**Attendees**

Mary Kendell, *Anson DSS*; Sharon Barlow, Jenise Horton-Davis, Cheryl Millmore, Heather Skeens, *Guilford DSS*; Tammy Chaney, Della Sweat, *Hoke DSS*; Lesa Price, *Lee DSS*; Adrian Black, Sarah Smith, *Montgomery DSS*; Lisa Stern, *Randolph DSS*; Robby Hall, *Richmond DSS*; LaVerne V. Blue, *NC DAAS*; Dennis Williams, *NC DMH*; Lucy Dorsey, Dorinda Robinson, Anthony Ward, Victoria Whitt, *Sandhills Center MCO*; I. Azell Reeves, *Sandhills Center CFAC*; Mellicent Blythe, *NC Child Treatment Program*; Anne Foglia, *NCIOM*; Michael Owen, *Summit Facilitator*

**OVERVIEW & UPDATES**

Michael Owen (meeting facilitator) welcomed the summit participants and briefly reviewed the background, structure, and goal of the Bridging Local Systems project. The primary aim of the summits is 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 Sandhills MCO, as well as representatives from seven of the DSS agencies in the region: Anson, Guilford, Hoke, Lee, Montgomery, Randolph, and Richmond counties. There were also representatives from the Consumer and Family Advisory Committee and the NC Department of Health and Human Services.

Michael gave a brief summary of the discussion at the November 29th meeting. A summary of that meeting is available [here](#).

Michael also gave an update on the summits taking place in other regions, highlighting the focus at the Alliance summit on building capacity for placing children locally and preventing placement disruptions. The Eastpointe summit participants, on the other hand, have developed three working groups to develop proposals for a shared liaison position, discharge planning for inpatient care, and a webinar training curriculum.

Victoria Whitt (Sandhills CEO) gave a brief update from the DSS Directors Association meeting, and emphasized the need to educate policymakers on the impact of cuts to funding for non-Medicaid services. The general assembly has made significant cuts to state funding for non-Medicaid services over the last two years, and there is concern that additional cuts will be made, which hurts the vulnerable population who rely on these services.

## UPDATES FROM WORKGROUPS

### *Blended Funding Opportunities*

Robby Hall updated participants on his investigation into potential blended funding opportunities. The potential role(s) of a liaison position were discussed further: the primary functions described included helping to gather information, case management, and serving as a primary point of contact between the DSS and LME/MCO. Several of these activities could be billed to MAC funds. Participants discussed whether the liaison would serve both child and adult populations and some counties expressed an interest in a more clinical role for the shared position. It was concluded that there was unlikely to be a one-size-fits-all solution, but that the proposals could be tweaked to meet counties' unique needs.

### *Foster Parent Training*

DSS and Sandhills representatives discussed plans for holding regional trainings for foster parents to enhance their ability handle the behavioral health needs of children placed in their care and prevent the need to move children to higher levels of care. Proposed training topics included protective factors, safety planning, behavior management, and needs in crisis. Several potential training models and partners were suggested for further exploration including the Together Facing the Challenge foster care training model; the Coastal Horizon Center and Intensive Family Preservation Services protective factor trainings; Project Broadcast's trauma-informed practices training resources developed by the National Child Traumatic Stress Network; and the possibility of working with an Area Health Education Center to develop a customized training.

In addition to strategies to prevent children from need to be stepped up to higher levels of therapeutic foster care, summit participants also discussed the disincentive for quality care and continuity of care presented by the reduction in payment when a child is stepped down. Some counties saw the value in maintaining payment rates for high-performing foster parents in order to maintain placement stability, but the feasibility depended on funding and the long-term plan for permanency.

## ADULTS

Michael asked DSS representatives to identify the big issues faced by adults, older adults, and adults with dementia, including those regarding guardianship. Responses included:

- Adults with co-occurring mental illness and substance use disorder, need additional supports to prevent placement disruptions due to unmanageable behaviors. Adult group homes also need further training and support to effectively serve this population and improve employee retention.
- There are no adult residential Medicaid services.
- DSS social workers are not experts in the many issues that arise in guardianship of adults of all ages, including competent decision-making, risk of financial exploitation, DNRs, etc. Social workers also struggle to identify what resources are available, both in the community and the mental health and substance abuse service system.

- It is difficult to find placements for adults with co-occurring mental illness and substance use disorder within the provider network.
- Difficulty dealing with noncompliant clients and clients who refuse evaluations and/or services.

Following this discussion, participants considered possibilities for the creation of a service definition for adult mental health residential treatment.

#### **WRAP-UP & NEXT STEPS**

- When asked about any other priority issues that participants wished to introduce for subsequent discussions, continued regular meetings were proposed to facilitate communication as issues arise.
- Identify a few example options of how the blended funding position might be structured in counties with varying resources/needs and refine proposal.
- The final Regional Leadership Summit meeting will be held Tuesday, March 28<sup>th</sup>.