



DEPARTMENT OF HEALTH & HUMAN SERVICES

ADMINISTRATION FOR CHILDREN AND FAMILIES
Administration on Children, Youth and Families
1250 Maryland Avenue, S.W.
Washington, D.C. 20024

MAR 17 2008

Secretary Dempsey Benton
North Carolina Department of Health and Human Services
Division of Social Services
2001 Mail Service Center
Raleigh, North Carolina 27699-2001

Dear Mr. Benton:

This letter relates to the Child Welfare Program Improvement Plan (PIP) that was mandated as a result of the findings from the Child and Family Services Review (CFSR) conducted in North Carolina in March 2007. The initial version of the PIP was submitted on September 27, 2007. After negotiations with my staff, the plan was resubmitted on November 26, 2007, and December 21, 2007. Further technical changes were made and the final version was submitted electronically to this office on February 14, 2008.

We appreciate the diligence of your staff in working through the intricacies of this process. We have reviewed the plan, as amended, and hereby approve it effective April 1, 2008. In accordance with 45 CFR 1355.36 (b) (1), any penalty resulting from non-conformity to the law and regulations will be held in abeyance until you have had the opportunity to implement the plan.

Section 45 CFR 1355.35 (d) (4) requires that quarterly status reports be submitted on the progress in implementing the program improvement measures. The third quarter of Federal Fiscal Year 2008, ending June 30, 2008, will constitute the first quarter requiring a progress report, and the reports are to be submitted within 30 days from the end of each quarter.

You have developed a comprehensive and challenging list of corrective actions, which should have a positive effect on the outcomes for children and families who are impacted by the child welfare system. While the Administration for Children and Families approves the PIP, please be reminded of the agreement between the Children's Bureau's Central and Regional Offices and the State that the PIP measures need to be re-negotiated once North Carolina has completed all of its revisions to the Quality Assurance (QA) case review system. At that time, we will discuss whether those revisions/changes will impact the baselines.

Implementing the respective strategies and tracking progress and timeframes for completion will require concerted efforts by the North Carolina Division of Social Services. We look forward to our collaboration over the next two years in the implementation of program improvement. In addition, technical assistance remains available to you through the National Resource Centers.

Enclosed is a copy of the approved plan and the PIP Agreement Form. If you have any questions regarding this or other related matters, please contact Donna Dummett at (404) 562-2826.

Sincerely,



Christine M. Calpin
Associate Commissioner
Children's Bureau

Enclosure(s)

cc:

Joan E. Ohl, Commissioner; ACF,ACYF; Washington, DC
Ruth Walker; Child Welfare Regional Program Manager; CB, RO IV; Atlanta, GA
Kenneth J. Wolfe, Acting Director; ACF, OPA; Washington, DC
Sherry Bradsher, Director, NC Department of Health and Human Services (DHHS),
Division of Social Services; Raleigh, NC
JoAnn Lamm, Deputy Director, NC DHHS, Division of Social Services; Raleigh, NC
Charisse Johnson, Section Chief, NC DHHS, Division of Social Services; Raleigh, NC
Melissa Beard; CB, CFSR; Washington, DC

I. PIP General Information

CB Region: I II III IV X V VI VII VIII IX X

State: North Carolina

Lead Children's Bureau Regional Office Contact
Person: Donna Dummett

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State Agency Name: North Carolina Division of
Social Services

Address: 325 N Salisbury St
Raleigh, NC 27699

Telephone Number: 919-733-3055

Lead State Agency Contact Person for the Child and
Family Services Review (CFSR): Candice Britt

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Lead State Agency Data Contact Person: Hank
Bowers

Telephone Number: 919-733-4530

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State PIP Team Members* (name, title, organization)

1. Jo Ann Lamm, Deputy Director, NCDSS
2. Esther High, Section Chief, Family Support and Child Welfare, NCDSS
3. Kevin Kelley, Assistant Section Chief, Family Support and Child Welfare, NCDSS
4. Beverly Daniel, Local Operations & Review Manager, NCDSS
5. Sara Anderson Mims, WorkFirst and CPS Policy Manager, NCDSS
6. Patrick Betancourt, Multiple Response System Coordinator, NCDSS
7. Tammy Johnson, Adoption Indexing Manager, NCDSS
8. Paul Waddle, Foster Care and Adoption Manager, NCDSS
9. Marina Chatoo, Community Based Programs Manager, NCDSS
10. Teresa Turner, Staff Development Manager, NCDSS
11. Bob Hensley, Foster Care Licensing Manager, NCDSS
12. Keith Davis, Local Support Operations Manager, NCDSS
13. Judy Massengill, NCDSS
14. Dannette Smith, Mecklenburg County DSS
15. Eric Zechman, CPS Policy Consultant, NCDSS
16. Rebecca Huffman, SOC Coordinator, NCDSS
17. Tamika Williams, NCDSS
18. Holly McNeill, Multiple Response System Consultant, NCDSS
19. Angie Stephenson, Child Welfare Attorney, Attorney General's Office
20. Hank Bowers, Performance Management Chief, NCDSS
21. Terri Reichert, CPS Policy Consultant, NCDSS
22. Susan King, NCDSS
23. Susan Robinson, NCDMH/DD/SAS
24. Gail Cormier, Executive Director, North Carolina Families United
25. Kelly Nguyen, Powerful Youth

26. Barbara Jones, Cherokee Family Services
27. Lana Dial, Court Improvement Project Director, AOC
28. Sandy Pearce, AOC
29. Warren Ludwig, Wake County Human Services
30. Karen Butler, Mecklenburg County Department of Social Services
31. Brendan Hargett, Guilford County Department of Social Services
32. Ruth Amerson, Another Choice for Black Children
33. Jane Malpass, Another Choice for Black Children
34. Anita Evans, NCDSS
35. Trishana McKendall, Youth Advocacy and Involvement Office
36. Natasha Cox, Youth Advocacy and Involvement Office
37. Sue Stelmach, Onslow County Community Child Protection Team
38. Joy Stewart, University of North Carolina
39. Laura O'Neal, Nash County Department of Social Services
40. Angie Pittman, Buncombe County Department of Social Services
41. Jamie Blevins, Wilson County Department of Social Services
42. Christina Christopoulos, Duke Center for Child and Family Policy
43. Liz Snyder, Duke Center for Child and Family Policy
44. Nicole Lawrence, Duke Center for Child and Family Policy
45. Elizabeth Weigensberg, University of North Carolina
46. Sally Shaw, Mecklenburg County Department of Social Services
47. Carl Williamson, Alexander County Department of Social Services
48. Regina Dickens, RSD Consulting
49. Cheryl McGee, Mecklenburg County Department of Social Services
50. Kaye Radford, Nash County Department of Social Services
51. Melvia Batts, Nash County Department of Social Services
52. Joyce White, NCDSS
53. Phyllis Fulton, NCDSS
54. Sydney Batch, Attorney
55. Judge Lisa C. Bell, 26 th Judicial District
56. Judge John M. Britt, 7 th Judicial District
57. Judge Paul McCoy, Judicial District
68. Judge Regan Miller, 26 th Judicial District
69. Judge J.B. Trosch, 26 th Judicial District
70. A.J. Coutu, 25 th Judicial District
71. Alisa Huffman, AOC
72. Paul LaChance, Governor's Crime Commission
73. Jo McCants, AOC
74. Jan Norwood, Nash County Department of Social Services
75. Bill Stanton, Caliber, ICF
76. Alexia Stith, AOC
77. Brandi Tolbert, 25 th Judicial District
78. Jane Volland, Guardian Ad Litem Administrator, AOC

79. Tyrone Wade, Attorney, Mecklenburg County Department of Social Services
80. Iris Williams, Northampton County Court
81. Lori Cole, AOC
82. Danielle Carmen, Indigent Defense Services
83. Wendy Sotolongo, Indigent Defense Services
84. Louis Pitts, Legal Aid
85. Janet Mason, School of Government
86. Colleen Turner, Director, Gates County Department of Social Services
87. Gary Ander, Alamance County Department of Social Services
88. Michelle Hughes, Prevent Child Abuse North Carolina
89. Debra McHenry, Department of Public Instruction
90. Catherine Joyner, Division of Public Health
91. Tony Troop, School Based Child and Family Support Team Initiative
92. Leanne Fowler, Boys and Girls Homes of North Carolina
93. George Bryan, The Children's Home
94. Tracy Turner, North Carolina Association of County Directors of Social Services
95. Rhonda Bennett, NCDHHS, DIRM
96. Phillip Redmond, The Duke Endowment
97. Kelly Crowley, DMH/DD/SAS
98. Kirstin Frescoln, AOC
99. Steve Preister, NRCOI
100. Judge Robert Brady, 25 th Judicial District
101. Alma Brown, Guardian Ad Litem
102. Kathy Stone, Wilson County Department of Social Services
103. Kristy Perry, Person County Department of Social Services
104. Anna Hamburg, Adoption Consultant, NCDSS
105. Gail Cormier, North Carolina Families United
106. Cyndy Benson, Catawba County DSS
107. Ronald Moore, NCDSS
108. Alex Goldstein, MHA
109. Adele Spitz Roth, Duke Center for Child and Family Policy
110. Angela Mendell, Bladen County DSS
111. Denise Shaffer, Orange County DSS
112. Dean Duncan, UNC
113. Beverly Smith, NC Kids
114. Cathie Beatty, Buncombe County DSS
115. Narell Joyner, MeckCares
116. Jeffery Watson, Youth Advocacy and Involvement
117. Nicole Lawrence, Duke Center for Child and Family Policy

*List key individuals who are actually working on the PIP and not necessarily everyone who was consulted during the PIP development process.

II. PIP Agreement Form

The PIP should be signed and dated by the Chief Executive Officer of the State child welfare agency and by the Regional Administrator for the Children's Bureau Regional Office responsible for the State. The approved PIP with original signature must be retained in the Children's Bureau Regional Office. A hard copy of the approved PIP must be submitted to the following parties immediately upon approval:

- State child welfare agency
- Children's Bureau (Child and Family Services Review staff)
- Child Welfare Review Project, c/o JBS International, Inc.

Agreements

The following Federal and State officials agree to the content and terms of the attached Program Improvement Plan:

Sherry S. Bradsher

9/27/07

Sherry S. Bradsher, Director, Division of Social Services

Date

Christine M. Calpin

3/10/08

Children's Bureau

Date

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

State: North Carolina
 Date Submitted: _____

PIP Strategy Summary and TA Plan

Primary Strategies	Key Concerns	TA Resources Needed
<p>I. Child, Youth and Family Involvement. Increasing child, youth and family involvement at all points of contact has been identified as crucial to effecting system change. At the front end, increased family involvement should result in more effective in-home service delivery through an on-target assessment of service strengths and needs and meaningful service agreements that are owned by families and youth. The identification of the real issues which are contributing to the maltreatment affords an opportunity to connect the family with crucial service needs. Addressing the root causes of the maltreatment will reduce repeat maltreatment. True child, youth and family involvement lends itself to effective in-home service delivery and should result in fewer children entering care. For those children who have been in care for some time, specific efforts to locate relatives and connections through family finding techniques will be beneficial; we recognize that in some cases, thorough case work to engage family members up-front has not occurred. Targeted recruitment of foster and adoptive homes for older children will be guided by input from youth and current foster and adoptive parents.</p>	<p>Initial and sustained contact with absent parents, particularly fathers. (Item 25) Need for increased usage of child and family teams to involve the child and family in case planning. The use of child and family teams can help prevent removal, establish appropriate permanency goal, identify most appropriate placement, contribute to expedited reunification, guardianship or placement with relatives, and timely adoption when that is identified as appropriate. (Items 4, 5, 6, 7, 8, 9) Disparities in findings between in-home services and foster care services. (Item 3, 13, 15)</p>	

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>Through the use of the monthly foster care contact record, foster parents and foster youth will be involved in a comprehensive discussion focused on safety and well-being. Involving children, youth and families will occur through direct and indirect strategies; the use of surveys on a consistent basis provides an ongoing opportunity for feedback. County directors, supervisors and line workers will examine families, foster and adoptive parents and youth's needs through analyzing survey data, holding focus groups and increasing usage of child and family teams held in accordance with policy which requires family participation. Mandating child and family team training for all staff emphasizes its importance; and the training provides the model for family engagement. Connecting with fathers and paternal relatives will be addressed through policy and training and will be monitored through quality assurance, and results from child and family team meeting surveys. To ensure that policy revisions impact practice, Division policy consultants and Children's Program Representatives will engage with county departments through regional MRS/SOC meetings, regional supervisor meetings, and one-on-one county consultation.</p>	<p>Need to improve service array and accessibility. There is a particular need for mental health, substance abuse, and domestic violence services. Service array impacts Well-Being 1, Item 17, Well-Being 3, Item 23.</p>	

IV. PIP Matrix

State: North Carolina

Type of Report: _____

PIP: _____

Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>The regional and individual meetings with our county partners provide an opportunity to review new policy, policy revisions, and to examine the intended impact on practice and expected outcomes from the policy changes. Supervisory and line-level staff are the target audience for these policy discussions. All major policy revisions are created through a collaborative process which involves input from county partners, youth and family members, and other community partners. All levels of decision makers in county departments of social services are involved in system changes. County directors approve all major policy revisions through their Children's Services Committee. Another method of monitoring the impact of system changes on direct practice is North Carolina's Quality Assurance System. Our QA system will be revised as a direct result of findings from the CFSR. Child, Youth and Family Involvement will be measured through the county department's use of child and family teams and documented evidence of family engagement; not through the existence of a signature on a family services agreement. It is our belief that the comprehensive strategies identified mesh nicely with our current Multiple Response System Reform and give us the opportunity to drill changes down to the practice level in a planned, comprehensive manner.</p>		

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>II. Interagency Collaboration</p> <p>This theme was selected in the recognition that achieving good outcomes in child welfare can not be done in isolation. Stakeholder consensus regarding NC's need to improve in-home services and address service array deficiencies formed the basis for the recommended action steps.</p> <p>Strengthening our System of Care implementation and drilling it down to the practice level was agreed upon as an overarching component of the focus on continuous improvement. Using IFPS, FPS and Family Resource Centers more effectively is seen as a way to improve the effectiveness of in-home services, therefore leading to reduction in out of home care and repeat maltreatment. Also crucial to meeting our service array deficiencies is the focused examination at the state and county level regarding gaps in services, which will lead to a more proactive approach in building capacity and collaborating with service providers; especially domestic violence and mental health providers. Counties will be asked to complete critical self assessments which require engagement with their community stakeholders; this assessment gives the opportunity to identify service gaps and work towards solutions on a local level. Technical assistance (TA) will be provided to counties around strengthening local collaboratives, such as Community Child Protection Teams.</p>		

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: ____ (Quarter: __)

Primary Strategies	Key Concerns	TA Resources Needed
<p>This TA will include strategies around forming and maintaining a comprehensive membership that includes representatives from all child serving agencies, family, child and youth organizations – whoever is needed at the table to engage in a dialogue around effective assessment and service provision to children and families. Strong local collaboratives with decision makers as participants are able to make policy/procedural changes, commit to blended funding, and identify solutions regarding service array deficiencies. NC’s mental health system has been reformed dramatically and there is a need to ensure that county departments of social services understand the systemic changes in order to access services for children and families. NCDSS will advocate that children and families involved in the child welfare system become a priority population for mental health services, as they are not defined as such currently. Child and family teams provide an opportunity for family members, DSS, service providers to work together. We will develop policy outlining diligent efforts to fully involve community partners; articulating what engagement with community partners involves and providing specific procedures related to service array issues. The CFSR revealed concerns regarding cases that may have been closed too quickly as well as cases where the service needs were identified, but were not addressed.</p>		

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>Clarifying policy regarding appropriate case closure and findings will address this concern. Domestic violence was identified as a concern. Internal dialogues will continue with a focus on shared communication between management, policy staff, field staff, and training staff. This sharing of information internally will enable the Division to be proactive in our response to domestic violence. The internal dialogue will feed into an external dialogue with domestic violence service providers. Information will flow from both groups and we will focus on identifying areas of need regarding batterer intervention programs and domestic violence shelters/services and the strengthening of what is working well and the creation of services in needy communities. The Division will fund community programs that are providing domestic violence services that are evidence based and will look towards building capacity in needy communities. The Division will co-sponsor a conference with the NC Coalition Against Domestic Violence targeted towards addressing the co-occurrence of child maltreatment and domestic violence which will provide a training opportunity for county departments of social services staff and county staff working in domestic violence service provision and will model collaboration around the issue of domestic violence.</p>		

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>Also related to strengthening Interagency Collaboration is the work begun with NRCCI and the NC Collaborative for Children, Youth and Families. The Collaborative serves as NC's stakeholder group and represents the majority of child serving agencies. The Collaborative developed a Charter to clearly articulate who they are, what their mission, vision, and values consist of and what their priorities are for the next two years. The Collaborative made the decision to create a membership committee to ensure that everyone who is working towards safe and successful children at home, at school and in the community are represented. Domestic violence service providers, private mental health providers, tribal representatives, as well as Hispanic/Latino agency representative were identified as part of the target population. The membership committee will use System of Care philosophy to guide their work; recognizing that family members, legislators, agency and community decision-makers are needed to provide an environment where children are safe and healthy at home, school and in the community. North Carolina will pay attention to impacting practice regarding more effective interagency collaboration. Regional MRS/SOC meetings will provide an opportunity for DSS county staff to dialogue with service providers.</p>		

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>Specific emphasis will be given to including regional System of Care Coordinators working with every local management entity throughout the state. These coordinators work for the State Division of Mental Health /Developmental Disabilities/Substance Abuse and are experts on MH/DD/SAS providers in their region. These regional meetings will allow DSS and MH/DD/SAS to discuss reform efforts within their systems, communicate clearly regarding policy and procedures, and serve as an opportunity for relationship building around the issue of improving service provision to children and families. As service needs rise to the forefront in a region, DSS policy consultants and Children's Program Representatives will connect with providers in that region and invite them to participate in information sharing, problem-solving meetings. Any policy changes include input from county departments, and approval from county directors. Impact on practice will be monitored through our Quality Assurance System and should be evidenced through child and family teams involving service providers, more effective service agreements, and cases closed when all service needs have been addressed</p>		

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>III. Cultural Competency This theme was selected in the recognition that cultural incompetence can do harm. The goals identified focus on broad strategies related to policy and training to work towards culturally competent practice as well as targeted strategies to impact children currently receiving in-home and foster care services. The CFSR identified NC's inconsistent practice regarding the identification of tribal heritage. Policy will be clarified to articulate the importance of up-front identification of tribal heritage. Foster care policy will be revised to emphasize requirements of Indian Child Welfare Act. Legal Aspects training will be revised to incorporate ICWA requirements. Cultural competence training is not currently provided to social workers as a stand alone training. NC's stakeholders reached a consensus that a cultural competence training which explores personal values and assumptions coupled with an examination of our data should be mandated in the first year of employment. Achieving culturally competent practice requires more than training; attention must be paid to this issue in a focused, consistent, collaborative manner. Counties will develop cultural competence plans with input from their communities and an examination of their data.</p>	<p>Item 44, diligent recruitment of foster and adoptive homes. Need to ensure identification of and continued attention to tribal heritage.</p>	<p>AdoptUSKids, and University of North Carolina-Chapel Hill to assist with targeted recruitment of foster and adoptive parents.</p>

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: __ (Quarter: __)

Primary Strategies	Key Concerns	TA Resources Needed
<p>Cultural competence is a component of a System of Care philosophy and the development of county level plans is an opportunity to both raise awareness of the issue and develop targeted plans to directly impact practice. In order to increase critical thinking regarding poverty and child welfare service delivery, policy will require a child and family team meeting prior to removal. Requiring a CFT prior to removal with family, community and service providers at the table in a culturally competent consistent manner; meaning that the family is respected, valued and an equal partner will change service provision on a family by family basis. When CFTs are being held in a culturally competent manner on a consistent basis, the community's perception of DSS as an agency who does things to families will change to that of a partner working with families. NC will also advocate for statewide subsidized guardianship as an alternative permanency option.</p>		

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>In order to achieve culturally competent practice, NC will strengthen collaborative efforts with the NC Commission of Indian Affairs, maintain a MOA with the Cherokee tribe and reach out to state tribes to recruit foster and adoptive parents and involve tribes in the development of policy which shapes our practice. In order to meet the varying needs of county departments, foster and adoptive parent recruitment will occur in a targeted, regional manner. Regional recruitment will allow small, rural counties to approach this issue in an inventive manner. The recruitment and retention plans will be shaped by input from the community and county departments will be provided with standard tool kits to aid in their outreach. Model Approach to Partnerships in Parenting material will be provided in Spanish to county departments. This theme contains overarching strategies intended to provide a philosophical basis which challenges cultural assumptions as well as concrete strategies to address the existing racial disparities in child welfare. Regional MRS/SOC meetings will provide an ongoing opportunity to focus attention on cultural competence with experienced staff; while the mandated training in the first year of employment will reach new staff members. Policy consultants and Children's Program Representatives are available to provide technical assistance, policy clarification through regional supervisory meetings and one-on-one consultation.</p>		

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>IV. Court Involvement</p> <p>North Carolina recognizes that in order to achieve safety, permanency and well-being the court system and DSS must work collaboratively. Cross-training court and child welfare staff on issues identified during the CFSR, as well as an exchange of information regarding current policy and procedures will lead to a better understanding of each agency's motivation and responsibilities. This training will focus on cross cutting changes related to service delivery such as the increased use of child and family teams and the appropriate usage of Another Planned Permanent Living Arrangement as a permanency goal, and will also serve to emphasize the importance of federal mandates regarding timeliness. To improve in-home service delivery, policy, training and technical assistance will be strengthened to include court involvement when cases with safety issues are not making progress. Court and DSS stakeholders recognize the importance of family driven decision making and emphasis will be given to growing child and family teams, day one conferences and child planning conferences. Best practice strategies will be implemented in a collaborative manner in selected judicial districts and county departments.</p>	<p>Case review system, Item 28, termination of parental rights. Need to address delays and continuance issues, as well as resistance to TPR.</p>	

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>In an effort to achieve consistency and establish a baseline regarding the sharing of information related to case progress, a model court report will be developed. To improve collaboration on the local level and focus on achieving ASFA standards, the use of local court rules will increase. Technical assistance will be provided to districts in the development and implementation of these rules. A closer examination of child welfare data will occur through the sharing of information from JWISE and county experiences reports. District meetings will provide an opportunity to focus on what is working well and to develop strategies to target problem areas. At the state level, AOC and DSS will model ongoing collaboration through the development of a formal agreement which outlines roles and expectations of each agency. The agreement will serve as a model for county departments and judicial districts. To target the CFSR finding regarding incomplete court orders, use of the National Council of Juvenile and Family Court Judges <u>Resource Guidelines</u> will be emphasized. Stakeholders reached an agreement that permanency mediation is an effective means of moving cases forward, and usage will be encouraged.</p>		

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
Conferences, trainings, and communication from AOC and DSS to judicial districts and county departments will provide information regarding ASFA requirements and local performance related to concurrent planning, and termination of parental rights.		

IV. PIP Matrix

State: North Carolina
 Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>V. Accountability was chosen as a theme in recognition of the different levels of implementation of MRS and SOC from county to county and the need to pay constant attention to the connection between system reform and delivery at the direct practice level. The technical assistance NC is receiving from NRCOI around strengthening supervision impacts all of child welfare. NC recognizes that engaging and partnering with supervisors in program improvements is key to effecting long lasting, realistic, achievable system changes. Another overarching strategy is the examination of our Structured Decision Making Tools to ensure that the tools are measuring what they need to measure and that they are being completed properly; with true family involvement. Specific policy changes directly related to improving in-home service delivery include clarifying policy when cases are not making progress, addressing appropriate case closure, and emphasizing the importance of timely initiation of maltreatment reports. The supervisory TA and revalidation of SDM tools will more clearly define and enforce family centered practice.</p>	<p>Need to strengthen supervision to ensure that policy regarding Multiple Response System and System of Care is followed. Ensuring family centered practice impacts Safety, Permanency and Well-Being; especially as it relates to timeliness and repeat maltreatment in in-home services and foster care. (Items 1, 2) and Well-Being (Items 18, 19, and 20) regarding continued engagement with families, youth and children. Improve our quality assurance process to ensure consistent, accurate measurement that is collaborative. Critically examine Structured Decision Making Tools and complete a risk assessment validation study.</p>	<p>NRCOI and NRCDT to lead strategic planning with supervisors. This strategic planning will serve to further implement system reform efforts by re-visioning what supervision/coaching/mentoring is, with an emphasis on data/outcomes and how effective supervision impacts casework practice. NC has contacted Children's Research Center for assistance in improving Structured Decision Making Tools.</p>

IV. PIP Matrix

State: North Carolina

Type of Report: PIP: _____ Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	TA Resources Needed
<p>NCDSS is philosophically committed to deepening family centered practice and knows that maintaining a continuous focus on examining our practice in all interactions with county departments is crucial. One method of assessing engagement with families and level of implementation is how consistently county's use and document child and family teams. A standard documentation format will be developed. NCDSS will use field based Children's Program Representatives who are assigned a small number of counties in order to provide direct policy and practice guidance as a resource, along with policy consultants, trainers, and our Performance Management staff to provide technical assistance regarding the use of data. The strategic planning process with supervisors will also address the critical examination of data as a resource to improve direct practice. Another comprehensive action step is the redesign of our Quality Assurance system. We recognize that the partnership with counties, what we are measuring, as well as the underlying values of the review of our child welfare system need to improve. It is important for county departments and stakeholders to view the QA process as an opportunity for continuous improvement and not a pass/fail exercise. In order to improve long-term safety in foster care placements, a tool will be developed to review substantiations of abuse/neglect in placement settings. We believe this will inform our placement matching, as well as our licensing process. Another issue NC wanted to address was the recruitment and retention of social work staff.</p>		

IV. PIP Matrix

State: North Carolina

Type of Report: PIP: _____

Quarterly Report: _____ (Quarter: _____)

Primary Strategies	Key Concerns	IA Resources Needed
<p>To operate consistently from a family centered perspective, it is important to have trained, skilled staff who understand and embrace the values of the Multiple Response System and System of Care. NC will dialogue with supervisors regarding this issue and will develop specific strategies to strengthen practice. It is our belief that empowering supervisors will help address the social worker retention issue. The action steps identified include targeted, short term changes as well as long-term changes designed to strengthen MRS and SOC reform. NCDSS will use field staff and consultants as change agents around accountability, as the field staff will focus interactions with counties around direct practice successes and challenges.</p>		

