

North Carolina Department of Health and Human Services Division of Social Services

325 North Salisbury Street ● Raleigh, North Carolina 27603 Courier # 56-20-25

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Michael F. Easley, Governor Carmen Hooker Buell, Secretary Pheon E. Beal, Director (919) 733-3055

September 18, 2001

DEAR COUNTY DIRECTOR OF SOCIAL SERVICES

SUBJECT: System of Care Partnership

In July, 2000, the General Assembly created the "At Risk Children" program to provide appropriate and medically necessary residential and non-residential treatment alternatives for children at risk of institutionalization or other out-of-home placement. Funding for the program comes from the former "Willie M." program and from an additional appropriation of state funds for comprehensive residential treatment services. The service delivery infrastructure for the At-Risk Children's program is based on the "System of Care" model. Key elements of this model are:

- Interagency Collaboration local MOAs must be signed prior to the receipt of At-Risk funds;
- (2) <u>Shared Responsibility and Accountability</u> program governance is the responsibility of a broad-based Community Collaborative;
- (3) <u>Community-Based Services and Diversion of Children from Unnecessary Out of Home Care</u> a Child and Family Team is developed on behalf of every child who meets At-Risk funds eligibility criteria; and
- (4) <u>Family Involvement</u> the child's family retains a central role in all service planning and evaluation activities.

All county Departments of Social Services must be actively involved in the System of Care in order for families in every county to have access to comprehensive services and supports resulting from shared resources among local agencies and organizations. While At-Risk funds may not always be necessary to implement an integrated service plan, they are an important resource when other funds are exhausted and for children who are not eligible for Medicaid. Of particular interest to county DSS staff is that one of the specific goals of the legislation that authorizes At-Risk funds and the System of Care approach is to "assure that children are not placed in DSS custody for the purpose of obtaining mental health residential treatment services". This has long been an issue of concern within the foster care system.

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A System of Care partnership at the state level reflects strong commitment to this collaborative model. Representatives of the Division of Social Services, Mental Health/Developmental Disabilities/Substance Abuse Services, Division of Medical Assistance, Department of Public Instruction, Department of Juvenile Justice and Delinquency Prevention, and N.C. Families United meet weekly to discuss implementation issues. A broad-based State Collaborative meets on a monthly basis. Although we recognize that the over-all training effort to support the System of Care needs to be strengthened, a lot of written material has been distributed and two separate cycles of System of Care discussions have been conducted around the state. Regional consultants across the Department/Division lines have also been cross-trained and directed to work in partnership.

To date, it is our assessment that the effectiveness of the implementation of the System of Care model has varied from county to county. The State Collaborative is impressed with the performance of the Community Collaborative in a number of counties and disappointed in others. In the hope that additional information will prove helpful, we are distributing several documents that we have developed. Attached to this letter is a clarification of the roles and responsibilities of the Community Collaborative in a question and answer format, based upon the most frequently asked questions over recent months. Also attached is an example of Community Collaborative activities based on a profile of experience in communities within and outside of the state. Finally, a memorandum describing the current legislative status of the At-Risk Children's Program and the allocation process, including <u>specific allocation amounts</u>, is also attached.

I believe that the principles and values of the System of Care service delivery model are the same ones that guide our vision for the child welfare system in the state. They are the principles and values that we speak of in Families for Kids, the TANF/Child Welfare Collaborative, the IV-E Waiver, Family-to-Family, our planning for CPS changes, etc. I strongly encourage each county DSS Director to pay particular attention to establishing and sustaining a strong Community Collaborative in your county. I am also very interested in any suggestion that you have for how the State Collaborative can provide any additional support that you need in this effort. Please e-mail this information to me at chuck.harris@ncmail.net.

Thank you for your attention to this important work.

Sincerely,

Charles & Har

Charles C. Harris, Chief Children's Services Section

CCH/men

Attachments CS-36-2001