

Preliminary Recommendations

“Coming Home”

Rural Success Project Summit

Southern Pines, NC

June 2007

Court Reform

1. Improve fit between court-ordered services and services available to clients by
(a) Educating the courts about what services are available at all and which services can reasonably be paid for (e.g. impoverished client cannot pay for \$800 parenting class ordered and neither can DSS) or (b) assure sustained funding for programs that courts refer clients to or (c) courts need to mandate for programs to continue if they are mandating clients to participate in programs.
2. Use computer technology to aid in reducing court backlog. This includes making information quickly and easily available to substantiate that court mandates (restitution etc.) have been met.
3. Get legislative attention for funding of family courts in rural counties.
4. Family courts in rural communities need:
 - a. More judges and staff
 - b. County managers to share costs with other community leaders
 - c. Adjust judicial assignments to have one judge per family. (Only useful if timely response and right approach.)
5. To have family court you need buy-in from the chief district court judge both to push for family court and commit to making it work.
6. Expand the content of the School of Government’s Judicial College to include
 - a. Co-occurrence of domestic violence, substance abuse and child welfare (identification, interventions, etc.)
 - b. Clarify the difference between neglect and poverty
 - c. Family-centered practice including MRS 7 strategies and 6 principles
 - d. Child development
 - e. Sexual abuse
7. Provide resources to support judicial college for DSS attorneys.
8. Streamlining requirements and orders from courts

9. Funding for court-ordered assessments.
10. Have judges consider the appropriateness of who is in the court room.
11. Court improvement project and DSS need to collaborate on program improvement plan for federal audit.
12. Court improvement project for dual jurisdiction cases.
13. Easley's permanency mediation project: The earlier we begin to meet, the sooner permanence can occur

Domestic Violence and Substance Abuse

1. Develop local service delivery system in all 100 counties to include quality treatment for DV victims, children, and batterers so that families can be kept intact or reunified whenever possible.
2. Nurture System of Care approach to build on community collaboration among agencies, sharing resources, and existing funds.
3. Education efforts to promote community awareness of the DV and child welfare connection and to build community-wide ownership of roles and responsibilities when it comes to preventing and addressing these challenges. Include:
 - Targeted education of law enforcement.
 - Faith initiative. In rural counties individuals turn to the faith base. Get ministers to educate ministers.
 - Educate kids.
4. Nurture self-reliance through System of Care approach, which promotes collaboration among all agencies.
5. More collaboration between law enforcement and DSS.
 - Pay 2 positions per county by Sherrif's department, housed and dedicated to DSS for DV/SA investigations, be trained with social workers Parenting classes.
6. More inpatient substance abuse treatment.
7. More inpatient treatment for batterers

Multiple Response System Recommendations

- A. Education of MRS and the underlined philosophy of MRS should be streamlined among
 - a. Community Leaders
 - b. Families
 - c. Workers
- B. Utilize the System of Care model to expend MRS and educate informal support
- C. Funding
 - a. For rural communities for facilitators
 - b. Legislative funding for Family Courts in Rural Counties
 - c. Incentives that encourage interagency collaboration
- D. Training
 - a. Continue for training for workers / foster parents with transitional philosophy

- b. Add more supervisory training for DSS
- E. Encourage media to broadcast news regarding MRS

Transportation and Access to Services

- A. Making rules and services more flexible
 - 1. Use of informal contacts
 - 2. Privatization
 - 3. Sharing best practices
 - 4. Movement across county lines
- B. Identify services needs, adjusting and record standardization
- C. Develop community resource guide
- D. Take Child and Family Teams to homes
- F. Transportation systems won't cross county lines or service area lines, need better coordination of cross county transportation issues.

Mental Health Services Recommendations

Session A2

- 1. Mass communication to educate the public; who do they call when they need services?
- 2. We need public Mental Health restored
- 3. Every little town should have a Mental Health agency representative or outpost
- 4. That the county have Mental Health again

Session B2

- 1. Community Based: Educate psychologists/psychiatrists, doctors whether or not they're involved in CFT
- 2. More services beyond 8:30-5:30 available

Session C2 Mental Health

- 1. Therapist going into the home for treatment/follow-up with clients
- 2. Mental Health needs to consist of more community agencies (i.e. DSS member, school counselor, school social worker, etc.)
- 3. Review of accountability of Mental Health and the services they provide to clients—MH needs to be held accountable just like DSS is.

Health Care Services

Session A2

1. Universal health care
2. Health care advocates funding
3. Educate the public so they know what services are available and how to access them

Session B2

1. Statewide push to have more doctors become CME or CMHE certified
2. Community education on process and appropriate referrals
3. Programs and incentives to encourage physicians to come to rural communities to serve Medicare, Medicaid, and indigent population. Also to encourage them to stay in the community to become familiar with the medical needs of the community on a long-term basis.

Session C2

1. More education
2. More access to services

Recruitment and Retention

1. Invest in your workers by growing local DSS workers by encouraging and supporting staff to go to graduate school.
2. Initiative to get college grads back to county "a coming home program." Honor those who choose to stay in the county. Recruit from local colleges
3. Understanding in county government and in agency that to do job well you have to take care of yourself (cell phones, flex time, etc.) merit motivation activities, rewards, awards advocacy to county commissioners and DSS Board.
4. Extend retention curricula for supervisors and directors to state trainers system.