

### ***Accomplishments of the North Carolina State Collaborative for Children and Families***

In less than three years the State Collaborative has assisted agencies and families with a number of issues.

- \* Collaborative members drafted a series of legislatively required Memorandums of Agreement to implement at-risk children's legislation – the Comprehensive Treatment Services Program(CTSP)<sup>1</sup>
- \* The Collaborative has worked with the DMH/DD/SAS and parent/family advocates to influence how CTSP and other funds are used to provide services and supports for children and families. An example of this was their steadfast advocacy of “flexible funding.”
- \* The Collaborative sponsored and participated in multi agency and cross-agency training opportunities through the Association of Area Mental Health Programs, the Courts, DSS, the Mental Health Association and other agencies.
- \* The Collaborative was asked to help with the implementation of SB163<sup>2</sup>, a bill requiring that all agencies in the receiving county be notified when a child is placed there from another county. Since this involved multiple sending and receiving agencies, the Collaborative created a communications protocol that defined who is responsible, and how and when notification is to be sent.
- \* The Collaborative arranged the first meetings of regional coordinators from all the child-serving agencies. Although they often serve the same families in the same parts of the state, there had never been any systematic effort to bring them together so they could work collaboratively. **Related issues to prepare for in the discussion:** What has happened to regional coordinators? DMH reorg dissolved regional coordinators. Other agency regional coordinators status? Regional meeting or regional collaborative status?
- \* The Collaborative has developed training materials and guidelines for judges involved in juvenile and family court.
- \* The Collaborative has helped local agencies navigate what they perceive to be state-created barriers to local collaboration and encouraged consolidation of legislatively mandated local decision making entities such as the Local Community Collaborative, the Juvenile Crime Prevention Council and the other community-based collaborative bodies.
- \* The Collaborative helped the DMH/DD/SAS ensure other agency and parent input in the development of “best practice” guidelines that became part of the State Mental Health Plan.
- \* The Collaborative worked with the DMH/DD/SAS to develop a multi-disciplinary Child Mental Health Plan to move children from institutional to community settings. The Child Mental Health Plan was finalized and published in September 2003. The State Collaborative has participated in its implementation.
- \* The Collaborative has contributed to the preparation of numerous federal grants requiring interagency collaboration including those submitted by DMH/DD/SAS, public health, local universities, parents' groups and DSS. Among those funded include the Early Childhood Comprehensive Services (B-5) federal MCH planning grant, CMHS System of Care child welfare infrastructure and training grant (state/3counties), 21<sup>st</sup> Century and School Improvement federal OSEP and DOE grants that promote Positive Behavior Supports, education for homeless youth, healthy schools initiatives and the Families United CMHS family network and support grant (2<sup>nd</sup> 3 yr award).
- \* Through the Collaborative, the training staff and the evaluation staff of most child-serving agencies now meet regularly to coordinate ongoing initiatives and special projects. **Examples**

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<sup>1</sup> SL 2001-424 21.60 COMPREHENSIVE TREATMENT SERVICES PROGRAM

<sup>2</sup> General Assembly of North Carolina, Session 2001, Session Law 2002-164, Senate Bill 163: AN ACT TO IMPLEMENT THE RECOMMENDATIONS OF THE LEGISLATIVE RESEARCH COMMISSION'S STUDY COMMITTEE ON GROUP HOMES TO ADDRESS LICENSURE ISSUES AND THE NEEDS OF LOCAL SCHOOL ADMINISTRATIVE UNITS IN WHICH GROUP HOMES FOR CHILDREN ARE LOCATED.

include working with DPI in expanding Positive Behavior Supports strategies and working with DSS in implementing the System of Care federal grant initiative in three DSS counties in collaboration with DMHDDSAS' SOC federal initiatives and lessons learned.

- \* The Collaborative created and disseminated, the first comprehensive list of all assessment tools used by public agencies to assess children. This includes most, but not all forms used by Health and Human Services agencies (MHDDSAS, Public Health, CPS/DSS, Juvenile Justice, the Court System, Regular Education and Special Education. This inventory has been used to inform interdepartmental initiatives including the most recent common screening and assessment planning between DHHS/DMHDDSAS-DJJDP.
- \* At the local and the state level as a result of the Collaborative's work, there is now much greater understanding between agencies of how each are funded, their priorities and how each function. Opportunities for improved coordination with a vision for improving outcomes for children and families across systems is being strengthened.