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NC Child and Family Improvement Initiative Focuses on Standardization of Collaboration with County Departments of Social Services

What is happening?

North Carolina's six Local Management Entities/Managed Care Organizations (LME/MCOs) launched the **NC Child and Family Improvement Initiative** on May 1, 2022, to create a statewide solution to the current challenges of the service delivery system for children and youth in foster care. The Initiative's goal is to implement a statewide model to ensure seamless access to quality care for youth and families served by the child welfare system regardless of where they live in North Carolina.

The **NC Child and Family Improvement Initiative** identified ten critical objectives to support this statewide model. Three objectives focus on supporting and collaborating with County DSSs.

1. Establish a standardized Transitions of Care Policy for Youth Involved with The Child Welfare System. The Transitions of Care Policy will address changes in custody, and therefore, a true change in the LME/MCO responsible for care, creating a purposeful and intentional transition for children and youth in foster care.
2. Support coordination between LME/MCOs and county child welfare workers, with co-located LME/MCO care management across North Carolina's County and regional DSS offices, tailoring the approach to each county DSS's unique needs.
3. Collaborate with local DSSs to establish Coordinated Response Protocols. Protocols will address when and how a case should be escalated, key contacts, and key timeframes.

The LME/MCOs recognize the need for standardized processes and protocols for transitions of care, care manager co-location, and coordinated response protocols as part of the statewide model; however, for each objective, the LME/MCOs respect the culture and community associated with the unique geographic locations of, and populations served by, DSS offices. The LME/MCOs recognize local flexibility is necessary to best serve youth and families and value their well-established connections and working relationships with local DSS officials, providers, families, and youth.

Standardized Transition of Care Policy

The standardized Transition of Care Policy was implemented on October 1, 2022, as an internal LME/MCO protocol. This policy supports a child or youth transitioning from enrollment with one LME/MCO to enrollment with another. The policy will ensure continuity of care and prevent service interruptions. The policy will expedite placements and reduce the likelihood of overnight stays in local DSS offices, emergency departments, or other temporary placements.

Co-Location of Care Managers at County DSS Offices

The LME/MCOs are committed to providing physical co-location for every county DSS. However, there is also an understanding that physical co-location may not be preferred by all County DSSs at this time. The LME/MCOs have been working with all 100 County DSSs to evaluate local and regional needs and to identify each county's preferred option for service coordination.

As of November 2022:

- 40 counties have physical co-location of a care manager in place;
- 14 counties have virtual collaboration in place with a plan to transition to physical co-location;
- 10 counties have established a virtual collaboration model;
- 24 counties continue to explore the placement of a co-located care manager;
- 12 counties declined co-location of a care manager for reasons including lack of physical space, low case volume, and current sufficient coordination with their LME/MCO.

For the County DSSs that have indicated the need for a physically co-located care manager, their respective LME/MCOs are facilitating those agreements and solidifying the co-location details. Moving forward, the DSSs may re-evaluate the need for co-location whether they have virtual collaboration in place or have declined co-location. The LME/MCOs understand that changes in leadership, staff turnover or staff shortages, and evolving caseloads may affect the need for on-site support.

Coordinated Response Protocols

The LME/MCOs developed a standardized framework to support County DSSs when they must escalate a service need or concern. The intent of this escalation framework is to be proactive, within both systems, when responding to the needs of children before crises arise. LME/MCOs are working one-on-one with each County DSS to develop a Protocol that meets individual County DSS's needs while supporting this statewide, structured framework. The LME/MCOs will have a Coordinated Response Protocol in place with each County DSS by April 1, 2023, to serve as a guide for collaboration to preserve children in family settings, promote community-based placements, support access to services, and reduce instances of hospitalization and higher levels of care.

Who should County DSSs contact with questions?

If you have questions, please contact Ashley Parks, Child and Family Treatment Continuum Director, at ashley.parks@vayahealth.com or by phone at 704-680-7336.

To learn more about the NC Child and Family Improvement Initiative, [click here.](#)