North Carolina Child and Family Leadership Council

Interim Report To The

Office of the Governor

Joint Appropriations Committees and Subcommittees on Education

Joint Appropriations Committees and Subcommittees on Justice and Public Safety

Joint Appropriations Committees and Subcommittees on Health and Human Services

Fiscal Research Division of the Legislative Services Office

January 2006
December 30, 2005

Pursuant to Session Law 2005-276, Section 6.24, the North Carolina Child and Family Leadership Council submits its Interim Report to the Office of the Governor; the Joint Appropriations Committees and Subcommittees on Education; the Joint Appropriations Committees and Subcommittees on Justice and Public Safety; the Joint Appropriations Committees and Subcommittees on Health and Human Services and the Fiscal Research Division of the Legislative Services Office.

Respectfully Submitted,

The North Carolina Child and Family Leadership Council
PROGRAM OVERVIEW

BACKGROUND

North Carolina is recognized as a national leader in school improvement. High standards, a strong system of accountability, and targeted investments in prekindergarten programs, class size reduction, high school reform, and teacher recruitment and retention initiatives are integral components of the state’s effort to raise student achievement and close gaps, improve graduation rates, and better prepare all students for the demands of higher education and skilled work in the 21st Century.

Governor Mike Easley has also made improving coordination between the state’s public schools and social service agencies a top priority for supporting student success in the classroom. Health, mental health and other issues can adversely affect children’s well-being and their ability to succeed in school. Governor Easley asked the Departments of Health and Human Services and Public Instruction to develop new ways to support the health and human service needs of children and families in order to improve student academic achievement.

THE CHILD AND FAMILY SUPPORT TEAM PROGRAM

The 2005-2007 biennium budget authorized the creation of the School-based Child and Family Support Team Program. The budget provides $11 million to support teams comprised of a school nurse and a school social worker in 100 schools across the state. The Program includes the following key elements:

- **The school-based school nurse and social worker.** The school nurse and social worker will screen and identify children who are potentially at risk of academic failure or out-of-home placement due to physical, social, legal, emotional, or developmental factors. To the extent that identified physical, social, emotional and developmental needs are within the competence of these team leaders to address, they will address them. The nurse/social worker team will work with representatives from the local management entity (LMEs), local department of social services, local health department and other publicly supported children’s agencies, as appropriate, to connect student and families to needed care and coordinate, monitor and assure the successful implementation of a unified Child and Family Plan.

- **Social Service-School Partnerships.** The program will focus on developing and supporting an effective local infrastructure of educational, health and human services and juvenile justice resources in the community. The enabling legislation directs local departments of social services and local management entities (mental health agencies) to coordinate care in partnership with the school-based teams.

- **Local Advisory Committees.** Local superintendents in participating Local Education Agencies (LEAs) are charged by the enabling legislation to establish
and co-chair a local advisory committee, to include key local agency heads (DSS, LME, LHD, Chief District Court Judge, etc.) and other stakeholders to monitor and support the successful implementation of the Child and Family Support Team Initiative. Appropriately constituted existing committees may be used for this purpose.

- **State-level Child and Family Leadership Council.** The Council will be established to advise the Governor in the development of the Child and Family Support Team Program and to ensure the active participation and collaboration in the Initiative by all State agencies and their local counterparts providing services to children in participating counties in order to increase the academic success of participating students. The Council will be co-chaired by the Superintendent of Public Instruction and the Secretary of the Department of Health and Human Services, with membership drawn from the highest levels of state agencies that address the educational, health and human services needs of children.

**PROGRAM TRAINING AND EVALUATION**

Nurse and social worker personnel from funded sites shall be required to participate in training implemented collaboratively by the Departments of Public Instruction and Health and Human Services.

A rigorous evaluation of the Child and Family Team Initiative will be carried out in order to determine the impact of this pilot initiative and to identify ways in which the needs of children and families may be more effectively met. Participating sites will be involved in the design and implementation of the evaluation.

**PROGRAM MANAGEMENT**

The program will be administered out of the Department of Health and Human Services by a Program Coordinator, who will report directly to the Secretary of DHHS.

The State Superintendent of Public Instruction and the Secretary of DHHS will co-chair a state-level Child and Family Leadership Council to advise the Coordinator and to ensure the active participation and collaboration in the Initiative by all State agencies and their local counterparts providing services to children in participating counties.

Funding for school social workers will be administered by the Department of Public Instruction and funding for school nurses will be administered by the Department of Health and Human Services. School systems will work directly with the Program Coordinator in DHHS.

**CHILD AND FAMILY SUPPORT TEAM WORK GROUP**

In the absence of program staff, representatives from the following state agencies have been meeting since August 2005 as an interim Work Group: Office Of the Governor; the
Department of Public Instruction; the Divisions of Public Health; Mental Health, Substance Abuse, and Developmental Disabilities; and Social Services.

The group has engaged in an ongoing learning process about existing best practice models in North Carolina, and nationally, that target at-risk youth. Numerous meetings have been held with experts in the fields of school social work, school health, and social services. The group has worked in collaboration with representatives from other state agencies, including the Administrative Office of the Courts and the Department of Juvenile Justice and Delinquency Prevention, on training and program evaluation opportunities.

The Work Group has also been reviewing applications and interviewing candidates for the Program Coordinator position. Members of the interview team include the Office Of the Governor, the Division of Public Health, and the Department of Public Instruction. The team hopes to have a final candidate selected by mid-January 2006, and in place soon after.

ELIGIBILITY TO APPLY

Thirty-three school systems across the state have been invited to apply to be selected as a pilot site along with their departments of social service, local management entities and health departments. School system superintendents must have received a letter inviting their school systems—and social service partners—to apply in order to submit and application.

Once the 33 LEAs were identified, the Work Group held two regional meetings for local representatives from schools, health departments, mental health agencies, and social service offices to learn more about the program and plans for statewide implementation. The Child and Family Support Team Work Group presented at each meeting and took questions from representatives from local schools, mental health agencies, health departments, and social service agencies.

Following these meetings, the final application was sent out to school superintendents, with notification also going to their local health and social service partners.

SELECTION OF PILOT SITES FOR 2005-06

There will be approximately 20 pilot school systems selected for 2005-06. Each pilot site will have an average of five schools with school nurse/school social worker teams. Applicants can apply for up to 10 schools to receive nurse/social worker teams in their school systems.

Decisions about pilot sites will be made by the Department of Public Instruction, Department of Health and Human Services, and the Office of the Governor. Sites will be selected in January 2006 based on the following criteria:
• Identified need of children and families in selected schools;
• Demonstrated commitment of the school system and their health, mental health and social service partners to work together to address the needs of children and families;
• Geographic diversity statewide; and
• Readiness to implement at the community and school level.

IMPORTANT DATES

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
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<tbody>
<tr>
<td>December 20, 2005</td>
<td>Final Request for Applications Available</td>
</tr>
<tr>
<td>January 20, 2006</td>
<td>Due Date for Completed Applications</td>
</tr>
<tr>
<td>January 31, 2006</td>
<td>Notification of Program Awards</td>
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</tbody>
</table>
ATTACHMENTS

A – Legislation Enacting the Program from 2005 General Assembly Session

B – List of Invited Local Education Agencies

C – Letter Sent to Superintendents

D – Agenda for Regional Meeting in Caldwell County

E – Agenda for Regional Meeting in Wayne County
COLLABORATION AMONG DEPARTMENTS OF ADMINISTRATION, HEALTH AND HUMAN SERVICES, JUVENILE JUSTICE AND DELINQUENCY PREVENTION, AND PUBLIC INSTRUCTION ON SCHOOL-BASED CHILD AND FAMILY TEAM INITIATIVE

SECTION 6.24.(a) School-Based Child and Family Team Initiative established.

(1) Purpose and duties. – There is established the School-Based Child and Family Team Initiative. The purpose of the Initiative is to identify and coordinate appropriate community services and supports for children at risk of school failure or out-of-home placement in order to address the physical, social, legal, emotional, and developmental factors that affect academic performance. The Department of Health and Human Services, the Department of Public Instruction, the State Board of Education, the Department of Juvenile Justice and Delinquency Prevention, the Administrative Office of the Courts, and other State agencies that provide services for children shall share responsibility and accountability to improve outcomes for these children and their families. The Initiative shall be based on the following principles:

a. The development of a strong infrastructure of interagency collaboration;
b. One child, one team, one plan;
c. Individualized strengths-based care;
d. Accountability;
e. Cultural competence;
f. Children at risk of school failure or out-of-home placement may enter the system through any participating agency;
g. Services shall be specified, delivered, and monitored through a unified Child and Family Plan that is outcome-oriented and evaluation-based;
h. Services shall be the most efficient in terms of cost and effectiveness and shall be delivered in the most natural settings possible;
i. Out-of-home placements for children shall be a last resort and shall include concrete plans to bring the children back to a stable, permanent home, their schools, and their community; and
j. Families and consumers shall be involved in decision making throughout service planning, delivery, and monitoring.

(2) Program goals and services. – In order to ensure that children receiving services are appropriately served, the affected State and local agencies shall:

a. Increase capacity in the school setting to address the academic, health, mental health, social, and legal needs of children.
b. Ensure that children receiving services are screened initially to identify needs and assessed periodically to determine progress and sustained improvement in educational, health, safety, behavioral, and social outcomes.

c. Develop uniform screening mechanisms and a set of outcomes that are shared across affected agencies to measure children's progress in home, school, and community settings.

d. Promote practices that are known to be effective based upon research or national best practice standards.

e. Review services provided across affected State agencies to ensure that children's needs are met.

f. Eliminate cost shifting and facilitate cost-sharing among governmental agencies with respect to service development, service delivery, and monitoring for participating children and their families.

g. Participate in a local memorandum of agreement signed annually by the participating superintendent of the local LEA, directors of the county departments of social services and health, director of the local management entity, the chief district court judge, and the chief district court counselor.

(3) Local level responsibilities. – In coordination with the North Carolina Child and Family Leadership Council (Council), the local board of education shall establish the School-Based Child and Family Team Initiative (Initiative) at designated schools and shall appoint the Child and Family Team Leaders who shall be a school nurse and a school social worker. Each local management entity that has any selected schools in its catchment area shall appoint a Care Coordinator, and any department of social services that has a selected school in its catchment area shall appoint a Child and Family Teams Facilitator. The Care Coordinators and Child and Family Team Facilitators shall have as their sole responsibility working with the selected schools in their catchment areas and shall provide training to school-based personnel, as required. The Child and Family Team Leaders shall identify and screen children who are potentially at risk of academic failure or out-of-home placement due to physical, social, legal, emotional, or developmental factors. Based on the screening results, responsibility for developing, convening, and implementing the Child and Family Team Initiative is as follows:

a. School personnel shall take the lead role for those children and their families whose primary unmet needs are related to academic achievement.

b. The local management entity shall take the lead role for those children and their families whose primary unmet needs are related to mental health, substance abuse, or developmental disabilities and who meet the criteria for the target population established by the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services.

c. The local department of public health shall take the lead role for those children and their families whose primary unmet needs are health-related.
d. Local departments of social services shall take the lead for those children and their families whose primary unmet needs are related to child welfare, abuse, or neglect.

e. The chief district court counselor shall take the lead for those children and their families whose primary unmet needs are related to juvenile justice issues.

A representative from each named or otherwise identified publicly supported children's agency shall participate as a member of the Team as needed. Team members shall coordinate, monitor, and assure the successful implementation of a unified Child and Family Plan.

(4) Reporting requirements. – School-Based Child and Family Team Leaders shall provide data to the Council for inclusion in their report to the North Carolina General Assembly. The report shall include the following:

a. The number of and other demographic information on children screened and assigned to a team and a description of the services needed by and provided to these children;

b. The number of and information about children assigned to a team who are placed in programs or facilities outside the child's home or outside the child's county and the average length of stay in residential treatment;

c. The amount and source of funds expended to implement the Initiative;

d. Information on how families and consumers are involved in decision making throughout service planning, delivery, and monitoring;

e. Other information as required by the Council to evaluate success in local programs and ensure appropriate outcomes; and

f. Recommendations on needed improvements.

(5) Local advisory committee. – In each county with a participating school, the superintendent of the local LEA shall either identify an existing cross agency collaborative or council, or shall form a new group, to serve as a local advisory committee to work with the Initiative. Newly formed committees shall be chaired by the superintendent and one other member of the committee to be elected by the committee. The local advisory committee shall include the directors of the county departments of social services and health, the directors of the local management entity, the chief district court judge, the chief district court counselor, and representatives of other agencies providing services to children, as designated by the Committee. The members of the Committee shall meet as needed to monitor and support the successful implementation of the School-Based Child and Family Team Initiative.

The Local Child and Family Team Advisory Committee may designate existing cross agency collaboratives or councils as working groups or to provide assistance in accomplishing established goals.
SECTION 6.24.(b) North Carolina Child and Family Leadership Council. –

(1) Leadership Council established; location. – There is established the North Carolina Child and Family Leadership Council (Council). The Council shall be located within the Department of Administration for organizational and budgetary purposes.

(2) Purpose. – The purpose of the Council is to review and advise the Governor in the development of the School-Based Child and Family Team Initiative and to ensure the active participation and collaboration in the Initiative by all State agencies and their local counterparts providing services to children in participating counties in order to increase the academic success and reduce out-of-home and out-of-county placements of children at risk of academic failure.

(3) Membership. – The Superintendent of Public Instruction and the Secretary of Health and Human Services shall serve as cochairs of the Council. Council membership shall include the Secretary of the Department of Juvenile Justice and Delinquency Prevention, the Chairman of the State Board of Education, the Director of the Administrative Office of the Courts, and other members as appointed by the Governor.

(4) The Council shall:

a. Sign an annual memorandum of agreement (MOA) among the named State agencies to define the purposes of the program and to ensure that program goals are accomplished.

b. Resolve State policy issues, as identified at the local level, which interfere with effective implementation of the School-Based Child and Family Team Initiative.

c. Direct the integration of resources, as needed, to meet goals and ensure that the Initiative promotes the most effective and efficient use of resources and eliminates duplication of effort.

d. Establish criteria for defining success in local programs and ensure appropriate outcomes.

e. Develop an evaluation process, based on expected outcomes, to ensure the goals and objectives of this Initiative are achieved.

f. Review progress made on integrating policies and resources across State agencies, reaching expected outcomes, and accomplishing other goals.

g. Report semiannually, on January 1 and July 1, on progress made and goals achieved to the Office of the Governor, the Joint Appropriations Committees and Subcommittees on Education, Justice and Public Safety, and Health and Human Services, and the Fiscal Research Division of the Legislative Services Office.

The Council may designate existing cross agency collaboratives or councils as working groups or to provide assistance in accomplishing established goals.
SECTION 6.24.(c) Department of Health and Human Services. – The Secretary of the Department of Health and Human Services shall ensure that all agencies within the Department collaborate in the development and implementation of the School-Based Child and Family Team Initiative and provide all required support to ensure that the Initiative is successful.

SECTION 6.24.(d) Department of Juvenile Justice and Delinquency Prevention. – The Secretary of the Department of Juvenile Justice and Delinquency Prevention shall ensure that all agencies within the Department collaborate in the development and implementation of the School-Based Child and Family Team Initiative and provide all required support to ensure that the Initiative is successful.

SECTION 6.24.(e) Administrative Office of the Courts. – The Director of the Administrative Office of the Courts shall ensure that the Office collaborates in the development and implementation of the School-Based Child and Family Team Initiative and shall provide all required support to ensure that the Initiative is successful.

SECTION 6.24.(f) Department of Public Instruction. – The Superintendent of Public Instruction shall ensure that the Department collaborates in the development and implementation of the School-Based Child and Family Team Initiative and shall provide all required support to ensure that the Initiative is successful.
2005 Child and Family Support Teams
Counties invited to apply

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<td>660 Northampton County</td>
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<tr>
<td>33</td>
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November 29, 2005

Superintendent *Name*
*School System*
*Address*
*Address*

Dear Superintendent *Name*:

This past spring, Governor Mike Easley asked our departments to work together to find ways to connect schoolchildren and their families with needed health, mental health and social services. The Governor felt strongly that we needed to offer new resources to schools to identify the needs of children at-risk of school failure and to improve coordination with social service agencies to ensure their needs are met.

Together with the Governor, we worked with the General Assembly to create the school-based Child and Family Support Team Program. The program provides funding for a school nurse and school social worker team at 100 public schools across the state. In addition, the legislation authorizing the program requires local departments of social services and local management entities (mental health agencies) to assign staff to coordinate care and services with the school-based teams for children and families. An overview of the initiative is enclosed.

We are pleased to extend an invitation to your school system to apply to be a pilot site for the program. Thirty-three school systems have been invited to submit an application. The program will begin in the spring of 2006 with teams in 100 schools in approximately 20 pilot school systems. We anticipate providing teams for an average of five schools in each of the selected school systems.

We are holding two regional meetings in order to provide you with more information about the details of the program and the application process. You (or a designee) and representatives from your local department of social services, local health department, and local management entity are invited to attend one of the following meetings:

Thursday, December 15, 2005
Caldwell County Schools Education Center
1914 Hickory Boulevard SW (Hwy 321), Lenoir, N.C.
1:00 – 3:00 p.m.

Friday, December 16, 2005
Wayne Community College, Room 101 of the Walnut Building
3000 Wayne Memorial Drive, Goldsboro, N.C.
10:00 a.m. – 12:00 noon
It is important that your community can show commitment from the outset from the school and social service leaders to work together to support the needs of children. In order to participate in the meeting and be eligible to apply for the program, you will need to send a copy of the enclosed Statement of Intent with the required signatures.

Please send your Statement of Intent by December 9th and indicate the names of attendees and which meeting you will attend to:

Walker Wilson  
Office of the Governor  
20301 Mail Service Center  
Raleigh, NC 27699-0301  
Fax: (919) 733-2120

Thank you for your commitment to improve the educational opportunities of children in your school system and across the state. We are confident that better coordination of the public schools and health and human services will assist more children to find success in school and in life. We look forward to working with you to launch this important and landmark initiative for children and families across our great state.

Best regards,

Howard N. Lee, Chairman  
State Board of Education

June St. Clair Atkinson  
State Superintendent

Carmen Hooker Odom, Secretary  
Department of Health and Human Services

Enclosures: Program Overview; Statement of Intent
[Note: Meeting held via teleconference due to inclement weather]

Child and Family Support Team Initiative
Application Information Session
Caldwell County Board of Education
Lenoir, NC
1:00 – 3:00 p.m.
December 15, 2005

I. Welcome and Introductions
   J.B. Buxton, Office of the Governor

II. Program Overview
    J.B. Buxton, Office of the Governor
    Paula Collins, DPI
    Kevin Ryan, DHHS
    Leza Wainwright, DHHS
    Jo Ann Lamm, DHHS

III. Review of Legislation
     Kevin Ryan, DHHS

IV. Review of Request for Applications (RFA)
    J.B. Buxton, Office of the Governor

V. Questions and Answers
VI. Adjournment
Child and Family Support Team Initiative
Application Information Session
Wayne Community College
Goldsboro, North Carolina
10:00 a.m. – 12:00 noon
December 16, 2005

VII. Welcome and Introductions
J.B. Buxton, Office of the Governor

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Paula Collins, DPI
Kevin Ryan, DHHS
Leeza Wainwright, DHHS
Sherry Bradsher, DHHS

IX. Review of Legislation
Kevin Ryan, DHHS

X. Review of Request for Applications (RFA)
J.B. Buxton, Office of the Governor

XI. Questions and Answers

XII. Adjournment