

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)¹
- The Collaborative has worked with 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 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 SB163², 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 child serving agencies. Although they often serve the same families in the same parts of the state, there had not been a systematic effort to bring them together to work collaboratively.
- 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 other community-based collaborative bodies.
- The Collaborative helped DMH/DD/SAS to develop a multi-disciplinary Child Mental Health Plan to move children from institutional to community settings that is currently under review.
- 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.
- Through the Collaborative, the training staff and the evaluation staff of most child-serving agencies now meet regularly to coordinate projects.
- The Collaborative has created, and is in the process of disseminating, 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.
- At the local and state level as a result of the Collaborative work, there is now much greater understanding between agencies of how each are funded and why they do what they do.

¹ SL 2001-424 21.60 COMPREHENSIVE TREATMENT SERVICES PROGRAM

² 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.