

SECTION X.

COLLABORATION

**CUMBERLAND COUNTY
MH/DD/SAS**

JANUARY 1, 2003

Local Business Plan: Strategic Plan Matrix

Area Program(s)/County Program	Cumberland County Mental Health, Developmental Disabilities and Substance Abuse Center
Contact	Hank Debnam, Phone 910-323-0601, Fax 910-323-0096, adirector@mail.ccmentalhealth.org
Submission Date	January 2, 2003

Item: X. Collaboration

Goal: 1. The Local Business Plan delineates a process that supports and encourages collaboration among agencies and organizations.

Effective Date: March 2003 and ongoing

Steps Taken	Steps Planned	Barriers
<p>a) The Area Authority has established collaborative relationships with multiple agencies/groups within the community, region and state, including DSS, Public Health, School system, Juvenile Assessment Center, DEC, Partnership for Children, Child Advocacy Center, Homeless Coalition, APNC, N.C. Family Based Services Association, CARES Coalition, COLORS, Rape Crisis, Council on Older Adults, etc.</p> <p>b) Public meetings and trainings have been conducted with consumers, family</p>	<p>Various groups are working together to determine how initiatives can be combined so that meetings are not duplicative. Goals and objectives of meetings as well as documentation requirements that may exist are being analyzed to see how consolidation can occur.</p> <p>Identify persons who are not at the table and develop strategies to include them.</p> <p>There will be quarterly public meetings to continue education on mental health reform,</p>	

<p>members, providers and other stakeholders.</p> <p>c) Community college representatives have been invited to participate in meetings but thus far involvement has been limited.</p> <p>d) Staff are co-located in different agencies, including DSS, Health Department, Juvenile Court, Adult Community Corrections Center.</p> <p>e) Staff participate in discharge planning meetings on all adults admitted to Behavior Health Care of Cape Fear Valley Hospital to ensure proper transition of consumers back to the community.</p> <p>f) Area Authority shares staff and resources with Head Start on behalf of young children. Staff also conduct screenings to assist in eligibility process for More At Four services.</p> <p>g) Area authority staff are members of Chamber of Commerce and were key players in establishment of the Neighborhood Guardian Program, a child abuse prevention initiative.</p> <p>h) Agency staff chair the Community Protection/ Child Fatality Prevention Team and work with the group in identifying system issues and barriers to working effectively with families.</p> <p>i) Staff are members of and assist in facilitating NAMI meetings.</p>	<p>the business plan, needs and gaps, etc. Identify needs from community colleges and determine knowledge on behavioral healthcare services in the County and how they see their role. Build on successes seen in completing depression screenings, etc. on site at the community college and providing EAP services to community colleges to encourage more involvement in business planning process.</p> <p>Other ways to share staff and resources will be studied</p> <p>Continue efforts to maximize successful transitions from hospital settings.</p> <p>A comprehensive collaboration plan will be developed with strategies implemented by December 2003. Feedback from all current collaborative relationships, consumers, family members, agency staff as well as any new partners will be included in development of the plan.</p> <p>The Collaboration Plan will include information on analysis and methods for improvement of current collaboration. Plans will be to build on evaluation strategies being developed by the Families Helping Families at DSS, Community Collaborative, Juvenile Crime Prevention Council and Partnership for Children that focus on collaboration.</p>	
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<ul style="list-style-type: none"> j) Community Collaborative for child mental health has representation from key agencies, non-profit groups, faith community as well as consumers and family members. They partnered this past year to identify and purchase educational materials for families and others and to develop the Family Resource Guide published by the Partnership for Children. This guide includes some special educational materials on child mental health issues, families and system of care. k) The Area Authority has been conducting child and family team meetings for many years and has utilized a system of care approach for service delivery. l) Staff participate in Needs Assessments conducted in the community by the Juvenile Crime Prevention Council, United Way, Chamber of Commerce, etc. m) Agency staff have identified consumers in services who meet and do not meet target population. Education has been provided to providers and agencies on target populations to ensure they are aware of the new guidelines for eligibility for services using public monies. The majority of consumers (historically in services) do qualify under the target population definitions and are receiving services that match the level of care criteria and array of services. n) Family Preservation Advisory Board includes families and consumers of services as well as DSS, school and other non-profit representatives. o) Area Authority staff are core members of Child Advocacy Center Case Reviews on 	<p>The Collaboration Committee will facilitate identification of issues and concerns and work to differentiate systems issues from case/person specific issues.</p> <p>The collaboration process will include an assessment to collaborative efforts from all stakeholders.</p> <p>Geographic mapping will be completed and will delineate communities within Cumberland County, including Fayetteville, Spring Lake and Hope Mills. Key leaders in these areas will be invited to participate in LBP committees and collaboration initiatives on behalf of consumers and families.</p> <p>A letter of endorsement of the community collaboration process and/or a report of issues and concerns will be submitted by the CFAC.</p>	
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<p>serious physical abuse and all sexual abuse cases and Team Decision Making meetings at DSS. The latter group reviews all cases in which a child is at risk of removal from the home due to abuse, neglect or dependency and when placement changes are occurring.</p> <p>p) The Chief District Court Judge issued an administrative order allowing agencies to share information when petitions have been filed in juvenile court. This allows agencies to pool resources in making decisions with families and to develop more comprehensive inclusive service plans.</p> <p>q) A protocol was established in the 1990s between the hospital, DSS, mental health, juvenile court and county management outlining procedures to follow to ensure comprehensive evaluations are completed on youth presenting to juvenile court with County funds being made available to pay for services if there are no other resources. This allows no child to fall through the cracks due to a lack of financial resources.</p> <p>r) Area authority staff actively participate in community health fairs, neighborhood block parties and community events, partnering with others to address risk factors in our community.</p> <p>s) Relationships are established through the Mental Health Auxiliary with several churches in the community that have led to increased involvement in meeting needs of consumers and their families.</p> <p>t) DSS and County Planning staff are working on geographic mapping (GIS) in the community.</p> <p>u) A policy has been drafted outlining the</p>		
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<p>leadership role for the Area Authority in Community Collaboration</p> <p><i>See Attachment X: Collaboration Narrative</i></p> <p><i>See Attachment X: 1 (a) Policy Draft: Leadership Role for Community Collaboration (Section No. 71)</i></p>	<p>Obtain Board approval for Policy.</p>	
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Reviewers Comments:

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Submission Date	January 2, 2003

Item: X. Collaboration

Goal 2: The Local Business Plan meets the requirements of all applicable state rules and regulations regarding collaborative relationships, including System of Care for children’s funding and adult, child and adolescent substance abuse services.

Effective Date: January 2003 and ongoing

Steps Taken	Steps Planned	Barriers
<p>a) System of Care Benchmark Assessment Grid was completed focusing on Community Collaborative development, person centered planning through Child & Family Teams and genuine family involvement.</p> <p>a) Ratings in State report indicated that Cumberland County Community Collaborative had completed 97% of benchmarks listed. 3% of benchmarks were in the process <i>of completion</i>.</p> <p><i>System of Care Counties Meeting Benchmarks for Year One report from the</i></p>	<p>Child mental health services will continue to meet system of care benchmarks related to community collaboration and delivery of services.</p>	

<p><i>Division of MH/DD/SAS and By-laws adopted by the Community Collaborative are available upon request</i></p> <p>(c) Adult, child and adolescent substance abuse services are meeting applicable state rules and regulations regarding collaborative relationships as evidenced by information submitted in the Performance Agreement. This includes information on the Substance Abuse Juvenile Justice Initiative (for Cumberland County this is the MAJORS program), TANF Work First Initiative, Substance Abuse Prevention and Treatment Block Grant (SAPTBG), and N.C. Treatment Outcomes and Program Performance System (TOPPS) Assessments.</p> <p>(d) Quarterly Reports have been submitted to the State, per Performance Agreement guidelines, in a timely manner.</p> <p><i>Performance Agreement compliance reports are available upon request</i></p>	<p>The Area Authority will continue to ensure compliance with all applicable state rules and regulations regarding collaborative relationships for adult, child and adolescent substance abuse services.</p> <p>Quarterly reports will continue to be submitted per time frames established by state rules and regulations.</p>	
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Reviewers Comments:

Local Business Plan: Strategic Plan Matrix

Area Program(s)/County Program	Cumberland County MH/DD/SAS
Contact	Hank Debnam, Phone 910-323-0601, Fax 910-323-0096, adirector@mail.ccmmentalhealth.org
Submission Date	January 2, 2003

Item: X. Collaboration

Goal: 3. The Local Business Plan describes how the LME will identify, build on and develop and manage a network of informal services and resources necessary to provide the foundation for individualized support and community integration at the consumer, family and community level. The LME identifies community resources such as: medical services, nutrition services, transportation resources, local employee assistance programs, self advocacy groups, employment training, counseling, shelters, specific faith based groups, special purpose groups, such as bereavement groups, education groups such as parenting classes, leisure activities, other resources needed in the community.

Effective Date: January 2003 and ongoing

Steps Taken	Steps Planned	Barriers
<p>(a) Subcommittee of the Planning and Collaboration committees has been meeting on regular basis. Representation is broad based and representative of different groups in the community.</p> <p>(b) Survey was developed, approved by the Committee and sent to over 300 groups, churches, individuals in the community asking for information on counseling and support services that are currently provided to individuals in the</p>	<p>Surveys will continue to be distributed in the community.</p> <p>Survey will be included on the Mental Health Center web site.</p>	

<p>community. Information was also requested on other education or support groups provided in the community.</p> <p>(c) Surveys were provided to Committee members, human services agencies groups, consumers, advocates, etc. to distribute to other possible resources in the community for feedback.</p> <p>(d) Subcommittee members are meeting with different community groups to gather more information. One member, who is the director of a community pastoral counseling group, is meeting with all of the ministers in each denomination, seeking feedback.</p> <p>(e) The media is being utilized to obtain more information. Subcommittee members and chair of the CFAC met with a newspaper reporter who is doing an article about mental health reform and the role of the faith based community. Article was published in the newspaper 12/22/02 and included comments from CFAC chair.</p> <p>(f) Radio interviews have been conducted to provide information about mental health reform and solicit feedback.</p> <p>(g) To obtain information about other supports outside of mental health, consultation is occurring with other community representatives, to include the Homeless Coordinators, Homeless Coalition, DSS, Contact Crisis Services, providers, etc. Committee members have also been asked to provide any information on possible resources, as noted in the list that might be available.</p>	<p>Surveys will be available in all public meetings to continue to solicit as much information as possible on resources.</p> <p>Meetings will continue with all community groups, faith based groups, organizations etc. as group fathers more information on resources.</p> <p>Subcommittee members will cross-reference all materials with other resource guides.</p>	
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<p>The <u>Answer Book</u>, a resource guide published by the Public Library and <u>The Family Focus Resource Guide</u> published by the Partnership for Children are being reviewed for other possible resources. Committee has noted that format of these two guides is not user friendly and makes it difficult and time consuming to locate similar resources, even for agency staff who may be familiar with the references.</p> <p>(h) Subcommittee has compiled a roster of approximately 150 resources. Collaboration Committee is reviewing those related to counseling and support services to determine how to best group them.</p> <p>(i) Discussion has been held on how to group other resources and how to package the information in a manner that will be the most user-friendly for the community.</p> <p>(j) Consultation has occurred with Area Authority MIS staff on steps needed to have the resource guide available on line. Recommendation is to have hard copy as well as on line version so that as information changes, it can be updated on a regular basis.</p> <p><i>See Attachment X: Survey of Counseling and Support Services and letter; Grid listing results from Survey of Counseling and Support Services included in the QPN section</i></p>	<p>Subcommittee members will follow up with all individuals/groups who have submitted surveys or information to verify information that is being put together. Consultation will occur with legal advisors re: any liability involved in distributing resource materials.</p> <p>Group is working on how to format Resource Guide. Initial recommendation is to keep all counseling and support services information in one section and have other sections, noted in the table of contents, on housing, shelters, rental assistance and emergency placements, utility assistance, food assistance, transportation, medical services, transportation, etc.</p> <p>CFAC has received preliminary information on resources compiled thus far. CFAC will be involved in process of formatting and determining distribution of materials.</p> <p>Collaboration Committee in conjunction with the CFAC, other consumers, family members and advocates, will develop guidelines/protocols for management of the network of informal services, supports and resources that are developed.</p>	<p>Some surveys have contained information the Committee members have not been able to verify or that individuals know may not be accurate or in line with best practices. Committee members are hesitant about sanctioning resources that may be less than credible or could place consumers and families at risk. Legal advice on liabilities as well as how to verify questionable information is being sought. If the Division has any guidance this would be helpful.</p>
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Goal: 4. The Local Business Plan has a plan to meet the federal Synar amendment.

Effective Date: December 2002 and ongoing

Steps Taken	Steps Planned	Barriers
<p>(a) Policy on Synar Amendment Compliance has been drafted and meets requirements.</p> <p>(b) The Area Authority has designated staff to be responsible for Synar Amendment Compliance and implementation of a program to address concerns.</p> <p>(c) The Area Authority has developed a Tobacco Free Youth Program (TFY) whose primary focus is to reduce youth access to tobacco products through environmental prevention strategies. The four major components of program activities include community collaboration, law enforcement, media</p>	<p>a) Obtain Area Board Approval</p>	

<p>advocacy and merchants' education.</p> <p>(d) Area Authority staff coordinated meeting in November 2002 with State Alcohol Law Enforcement staff from the N.C. Department of Crime Control and Public Safety. Meeting was held to collaborate on strategies for reducing youth access to tobacco products in Cumberland County. Letter sent to Mr. Bob Stocks, Supervisor of ALE summarizing planning meeting).</p> <p>(e) Action Plan was been developed to address Synar Amendment Compliance starting in year 2002 and continuing to year 2005. Specific strategies to address community collaboration, merchants' education, law enforcement and media development are included.</p> <p>See Attachment X.4 Synar Amendment Compliance (Section 75) Brochure on Tobacco Free Partnership; narrative on Tobacco Free Youth Program; Letter to Bob Stocks- N.C. Department of Crime Control and Public Safety; and Tobacco Free Partnership Action Plan (2002-2005)</p>	<p>Area Authority will follow action plan developed and ensure review occurs and modifications in strategies are made based on progress made.</p>	
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Reviewers Comments:

X. COLLABORATION CUMBERLAND COUNTY MH/DD/SAS

Cumberland County MH/DD/SA Area Authority has a strong track record for collaborating in the community. As the Mental Health Center evolves into a Local Management Entity, efforts will continue to enhance all existing collaborative relationships as well as to develop new ones. Work groups and committees may identify areas in which partnerships are needed. This may require that the LME dedicate staff to participating in community initiatives, which could include technical assistance and training around behavioral healthcare issues, target populations and roles and responsibilities. A focus will always be on how to improve partnerships, pool staff and financial resources, and identify and address barriers and gaps for services (formal and informal) too residents of Cumberland County.

Currently, the Area Authority has staff involved in the following Collaborative relationships in the community and on a regional or state level:

- ✓ Chairperson of Cumberland County Community Child Protection/Fatality Prevention Team
- ✓ Child Advocacy Center- board representation and member of Case Review Team and Professional Advisory Committee
- ✓ Membership on Partnership for Children Evaluation Committee and Health Services Work groups and Board of Directors
- ✓ Member of COLORS
- ✓ Member of Chamber of Commerce
- ✓ Member of Homeless Coalition
- ✓ Multiple staff are members of NAMI
- ✓ Representation on Interagency Management Team
- ✓ Member of Families Helping Families initiative
- ✓ Core member for Team Decision Making conferences at DSS
- ✓ Member of Neighborhood Guardian Board
- ✓ Board member/ Vice-Chair of Juvenile Crime Prevention Council
- ✓ Board Member of APNC

- ✓ Board representation on North Carolina Family Based Services Association
- ✓ Board member for Juvenile Assessment Center (JAC)
- ✓ Member of Mental Health Partners
- ✓ Member of CARES Coalition
- ✓ Board member for CONTACT crisis line
- ✓ Board member for Juvenile Assessment Center
- ✓ Trainer for Justice Academy on juvenile justice issues
- ✓ Transportation Advisory Board member
- ✓ Member of Council on Older Adults
- ✓ Board member Rape Crisis
- ✓ Chairperson of Addiction Professionals of North Carolina (APNC) Treatment Committee
- ✓ Consultants for Regional Detention center
- ✓ Member Criminal Justice Partnership
- ✓ Partners with Family Court Program re: children and divorce/custody
- ✓ Partners with Cumberland Community Action Program- Headstart Program, Food Bank
- ✓ Board members for Cumberland County Medication Assistance Program
- ✓ President/ Board of Directors- N.C. Foundation for Alcohol and Drug Studies

Child & Family Services officially started its Community Collaborative in 2001 to implement and monitor the System of Care as a model for service delivery to children and families. The agency successfully implemented the model completed 97% of the benchmarks designated by the State. The community agencies have partnered for many years to ensure that children and youth are able to remain in their home communities and receive appropriate but clinically sound treatment services whenever possible. *System performance indicators* that were measured for the Collaborative include child and family participation, service teams, resource availability, service plan implementation, mix/match/fit, caregiver support, urgency response, service coordination, transitions, effective results and monitoring/modification. *Child indicators* are learning progress,

safety of the child and others, physical well-being, emotional/behavioral well-being, stability, parent/caregiver support of the child, personal responsibility, and substance – free lifestyle. During the next year the area authority will work toward developing and/or enhancing relationships established for implementation of System of Care Principles as well as expanding those principles into service delivery for all ages and disabilities. (*See System of Care report from the Division of MH/DD/SAS*).

A Subcommittee of the Planning and Collaboration Committees of the Local Business Plan has been working diligently to identify all possible supports for consumers and their families, particularly those who do not meet the criteria outlined for target populations. Members of all committees have also been asked to submit any information on resources that a person thinks might be available for target and non-target populations. Surveys have been distributed via mail, presentations, newspaper notification, web site, etc. to solicit feedback. Subcommittee members are also meeting with various community groups soliciting information on what is currently offered and identifying which groups might be willing to expand the scope of current services and/or develop other faith based/natural supports that are lacking. The group is working on creating a resource guide that will be available for the community in order to ensure that persons are not left without any resource. The group will work to build on the resource guide established by the Family Participation Subcommittee of the Child & Family Services Community Collaborative through a partnership with Cumberland County Partnership for Children (Smart Start). The latter has provided a Family Focus Resource Guide that emphasized community resources particularly as they related to children birth to five and their families. The Family Participation Committee wanted a resource guide specifically related to child mental health issue. Through this collaboration, there will be a section dedicated to child and family mental health issues and the system of care principles in the new Resource Guide being developed by the Partnership for Children. There will be links to relevant topics and information related specifically to access, transportation, accommodations for those with disabilities, interpreter services, geographic location, etc. Hard copies of the resource guide will be made available to the Collaborative for distribution. The web-based version can be updated whenever there is new information and the updated information printed for distribution as relevant. The Collaboration Committee for the Business Plan will network to ensure that the resource materials identified through its process will be packaged in a manner that is consumer and family friendly, available to the community and updated on an ongoing basis.