



Protocol for NCDHHS Intervention in County Practice

Purpose: To ensure that local county departments of Social Services are ensuring the safety, permanence, and well-being of children and families.

Authority: Ensuring the safety, health and well-being of children is a priority for the North Carolina Department of Health and Human Services-Division of Social Services (NCDHHS-DSS). North Carolina's Child Welfare program is state supervised and county administered. NCDHHS-DSS is the supervising and oversight agency for the administration of social services in North Carolina, and specifically, per G.S. §108A-74, NCDHHS has the responsibility and authority to evaluate a county department of social services' provision of child welfare services; the delivery of services must be in accordance with applicable state laws, rules, and policies

Rylan's Law G.S. §108A-74 further states: If the Secretary of Health and Human Services determines that a county department of social services is not providing child protective services, foster care services, or adoption services in accordance with State law and with applicable rules adopted by the Social Services Commission, or fails to demonstrate reasonable efforts to do so, then the Secretary, after providing written notification of intent to the county director of social services, to the chair of the county board of commissioners, and to the chair of the county board of social services, and after providing them with an opportunity to be heard, may intervene in the particular service or services in question.

For purposes of this protocol, intervention includes, but is not limited to, the following activities: (1) Sending staff of the NC DHHS-DSS to the county department of social services (DSS) to provide technical assistance and to monitor the services being provided; (2) Establishing a corrective plan of action to address insufficient policies and procedures; and (3) Divesting the Director of oversight of Child Welfare Services and assuming direct oversight of provision of child welfare services for the county.

NCDHHS' Protocol to fulfill this mandate:

What will initiate a discussion on the need for intervention by NCDHHS?

An event occurs that brings a county's child welfare practice to the attention of NCDHHS. An event is defined as practice in violation of law, administrative rule, or violation of parents' constitutional rights, and/or egregious practice outside of law or rule. Examples of egregious practice outside of law or rule are NC having no case plans in the record, supervisors signing off repeatedly on decisions that are not safe, or a child fatality where county practice fails to

adequately ensure child protection etc. NCDHHS will conduct record reviews within the county to assess practice to determine patterns of concern, egregious practice or decision-making that impacts child safety. During the assessment process, an emergent issue might be identified. An emergent issue is one that requires immediate action by the director or the agency to stop a practice that is unsafe or outside law or rule AND/OR initiate a practice that complies with NC law, rule and policy.

Upon completion of the assessment of case records to determine the scope of the issue, NCDHHS schedules and conducts a formal debriefing of the preliminary assessment findings with the county director and discusses what must change. NCDHHS will present information by identifying strengths and needs as well as next steps to mitigate the needs. This information will be presented from both the state's perspective and the county's perspective. The county director may present feedback and additional information for consideration. This is the time when the county director may provide rebuttal to any of the findings verbally or in writing.

Criteria for consideration:

1. **Performance Metrics and Quality Indicators:** Significant deviations from metrics related to child safety and well-being such as initiation times, on-going contacts, appropriate safety planning, thorough assessments, unsafe placements, and/or delayed permanence within the control of DSS.
2. **Patterns of Non-Compliance:** Repeated non-compliance with laws, rules, or policies despite previous Technical Assistance. Lack of demonstrated improvement in assessing safety, ongoing contacts, delayed permanence, or other practice issues that have been identified by an RCWS during county consults, the review of records or other available reviews (Fatalities, Quality Assurance Reviews), and prior plans developed with the county.
3. **Critical Incident Reports:** Major incidents indicating potential systemic issues. A recent fatality where policy violations that negatively impact child safety decision-making are noted in the record.
4. **High Profile Cases:** Cases with significant media or public attention indicating service failures which impact safety of children and families. A high-profile case where law/rule/policy violations played a role in a child being left in an unsafe situation.
5. **External complaints and Concerns from stakeholders or community members:** that typically arise from news stories, customer complaints/constituent concerns, or complaints from legislators.
6. **Consultation Reviews and Feedback:** Serious concerns from the Regional Child Welfare Specialist (RCWS) and failure to meet benchmarks from previous case reviews and Continuous Quality Improvement (CQI) consultations.
7. **Significant Deficiencies in Staffing:** Major changes in leadership, supervision, and/or staffing that impact the ability of the county's child welfare unit to provide services and ensure the safety of children.

8. **Audits and Evaluations:** Findings from audits revealing significant deficiencies in practice.

Process for Corrective Action Plan:

Step 1: A meeting is scheduled with the County Director to inform them of the recommendation for a Corrective Action Plan (CAP).

Step 2: A meeting is scheduled with County Director, County Leadership, NCDHHS Section Chief, RCWS Manager, and the RCWS to lay out the identified areas of concern. County staff can clarify information, ask questions and provide additional points for consideration such as internal factors that may be affecting performance; external factors that may be affecting performance; etc. At that meeting, NCDHHS will inform the group of the recommendation for development of a Corrective Action Plan, the process that will be followed, and potential outcomes.

Step 3: The recommendation is shared at NCDHHS' County Meeting which consists of the Division Director, Deputy Directors, Section Chiefs, DHHS Office of General Counsel, and other NCDHHS staff. The RCWS, RCWS Manager, Section Chief, and Deputy Director will facilitate the discussion detailing the issues of concern, the county's response/plan and the recommendation for CAP. Once a CAP has been approved by NCDHHS' leadership, a letter outlining the rationale for Corrective Action and what needs to be addressed will be written, approved, and signed by the Section Chief.

Step 4: A virtual/physical meeting will be scheduled with the County Director, County Manager, and Chair of the local governing body no later than 5 days following the county meeting. The purpose of the meeting with county leadership is to review the contents of the letter, either physically or virtually, and to discuss the roles and responsibilities of all parties. The County Director will decide who to invite locally, in addition to those specified by statute. NCDHHS-DSS will be represented by the Section Chief, the RCWS Manager, and the RCWS. The Deputy Director for County Operations and the NCDHHS-DSS Chief of Staff may attend. After the meeting, the Section Chief will send the letter via email and certified mail to the County Director, the County Manager, and Chair of the local governing body.

Step 5: NCDHHS will assign one of the RCWS to schedule an entry meeting with the County Director and local DSS Leadership to discuss the parameters of a plan to mitigate corrective action. The RCWS will work **collaboratively with county staff to develop a plan** to mitigate the corrective action. The plan will include:

- The county's goals and activities;
- The frequency that the RCWS will be on site;
- How progress will be measured by the county and NCDHHS;
- Roles and responsibilities of the county and NCDHHS staff for overall CAP and individual activities; (Examples of NCDHHS activities include training, case reviews, case consultation, observance of supervision, business process review, etc.)
- Identifying who from NCDHHS conducts reviews and timeframe for reviews.

Step 6: The County will have 30 days to submit a plan to mitigate the issues identified in the corrective action letter. The RCWS Manager, Section Chief, and Deputy Director will review the plan and, if needed, offer revisions to the plan during these 30 days. The plan will be submitted to NCDHHS. Within 10 business days, the submitted plan will be finalized and the Section Chief will notify the County Director that the plan has been approved.

Step 7: During a CAP, NCDHHS will recommend the county appoint a member of the Child Welfare leadership team to serve as the local lead. The local lead will ensure the implementation of the plan, track and update progress, review the plan frequently with staff, and review progress with the director and RCWS to ensure that needed improvements are taking place. Other functions of the local lead and the director will be to identify barriers, and to suggest any needed changes to achieve the established goals.

Step 8: NCDHHS will work in partnership with the County Director and county lead to decide on the best methods for needed technical assistance. NCDHHS will be on site at least monthly to review the plan, document progress, and provide any identified technical assistance. During the onsite visits, the RCWS will review processes put into place to address identified deficiencies and provide Technical Assistance (TA) which can include training, case reviews, case consultation, observance of supervision, and business process review.

Step 9: Formal Reviews – The goal for resolution of a CAP is 12 months. Progress will be gauged every 90 days, by targeted case and practice reviews based on the needs identified in the CAP. These reviews will be stored in one master book which will be provided to the county DSS Director within 3 business days. Along with the master book, the actual CAP is updated to provide an overview of the county’s progress. Within 10 business days, the RCWS and RCWS Manager will review the master book and county’s progress measures as outlined in the CAP with the DSS Director and county lead. As part of the review, the County Director must be prepared to answer the following questions:

- Is there improvement in practice outside the data?
- What behavioral indicators are present that demonstrate a change in practice?
- What processes have been implemented and incorporated into daily operations?
- What are plans for sustainability?
- How will the county measure progress moving forward?
- What steps will the county take when data takes a downward turn?

Each formal review will result in one of three recommendations:

- There is agreement that progress is being made and more time is needed to increase consistency.
- There is agreement that progress is substantial; that certain progress measures have been achieved, and that a CAP should be lifted.
- There is limited or insufficient progress on areas of need identified in the CAP requiring additional assistance, adjustments to the CAP, and/or divestiture of authority.

Information and recommendation from this review will be shared at the County Meeting. NCDHHS will decide when the benchmarks have been achieved and the CAP ends. The decision will be shared verbally with the Director the next business day with follow-up in a letter created, signed, and delivered via email and certified mail from the Section Chief within 5 business days.

When the CAP is not producing desired results

When the CAP is not producing the desired results, NCDHHS will schedule a meeting with the County Director, County Manager, and Chair of the local governing body, the NCDHHS-DSS Section Chief, RCWS Manager, RCWS and other staff as needed. NCDHHS staff will outline concerns noted regarding limited or insufficient progress on areas of need identified in the CAP. This will be followed by a discussion of strategies or additional assistance that may be required to address these areas of concern. As a result, adjustments will be made to the CAP. Possible outcomes from that meeting:

- Updated Plan is presented to NCDHHS leadership at County Meeting for approval.
- NCDHHS leadership determines that the County Department of Social Services is not providing child protective services, foster care services, or adoption services in accordance with State law and with applicable rules adopted by the Social Services Commission and has failed to demonstrate reasonable progress.
- NCDHHS Leadership notifies the NCDHHS Secretary of the current level of concern.
- NCDHHS Secretary determines if divesting the County Director of Social Services of oversight of Child Welfare Services and assuming direct oversight of provision of child welfare services for the county is warranted.

Divestiture of authority would occur if leadership at the county level is not able to effectively manage Child Welfare programs and effectively plan for child safety. Decisions to implement a CAP with a county or to divest a county of oversight of Child Welfare Services are based in NC General Statute and do not provide an appeal process.

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