



North Carolina Department of Health and Human Services
Division of Social Services

2401 Mail Service Center • Raleigh, North Carolina 27699-2401
Courier # 56-20-25

Beverly Eaves Perdue, Governor
Lanier M. Cansler, Secretary

Sherry S. Bradsher, Director
(919) 334-1014

July 31, 2009

DEAR COUNTY DIRECTOR OF SOCIAL SERVICES

**ATTENTION: County Directors, Child Welfare Program Managers, Supervisors
and Child Welfare Workers**

SUBJECT: Termination of Placements in Level III and Level IV Facilities

This letter is intended to provide additional guidance and information about the transition of children out of Level III and IV facilities and into other settings. Information was previously shared in [CWS-24-2009](#) issued July 23, 2009. The planning for this transition has already begun at the state level. The Division of Mental Health, Substance Abuse, Developmental Disabilities, and Substance Abuse Services are acting as the lead state agency. At the local level, the Local Management Entity (LME) will serve as the lead agency in implementing this transition. The LME will have primary responsibility for convening Child and Family Team (CFT) meetings to plan for the transition of these children to other medically necessary services.

This restructure of the state's residential services is being driven by the desire for a system that meets the needs of the state's children and accomplishes this in the child's community and in the least restrictive setting possible. The state's current budgetary concerns simply impose a sense of urgency to this process.

Your involvement and input into this process for children in DSS custody is critical. At these CFT meetings, decisions will be made as to the most appropriate placement. Options include Psychiatric Residential Treatment Facility (PRTF) or Therapeutic Foster Care (TFC), foster care, or returning the child to his or her removal home, if possible.

Note that the Division of Mental Health is currently working with the Division of Medical Assistance to revise the service definition of Therapeutic Foster Care, tentatively named Therapeutic Family Services (TFS). This will need to be approved by the Centers for Medicare

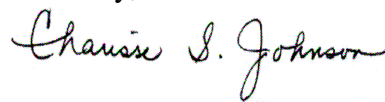
and Medicaid Services (CMS). TFS would look similar to Therapeutic Foster Care (TFC), but there would be additional supports to better treat challenging children through this service.

One of the keys to the success of these transitions will be whether the additional services needed, such as Multisystemic Therapy (MST), In-Home services, Outpatient Therapy, Community Support, Day Treatment, and others can be accessed. It will be important for county departments of social services staffs to advocate for these services to be approved and authorized when needed and to monitor progress in meeting the child's needs. When issues arise about the provision of these services, the SOC coordinator at the LME is the appropriate contact person.

Approximately 75% of the children currently in a level III or level IV facility are not in DSS custody. The Division supports these children continuing their current custodial arrangements. Your agency can play a role in preventing these children from entering DSS custody. It is this type of dialog with community partners that the System of Care meetings are designed to facilitate. The SOC meetings should focus on creating a smooth transition process that meets the best interests of each child.

If you have any questions about any of the information contained in this document, please contact Thomas Smith at (919) 334-1089 or at thomas.smith@ncmail.net.

Sincerely,

A handwritten signature in cursive script that reads "Charisse S. Johnson". The signature is written in black ink and is positioned to the left of a vertical line.

Charisse S. Johnson, Chief
Child Welfare Services

cc: Sherry S. Bradsher
Jack Rogers, Deputy Director
Child Welfare Services Team Leaders
Children's Services Program Representatives

CWS-25-09