

# **MOA Exploration for DSS & COG Office Space**

**Session Law 2021-180, Section 9I.13.(b)**



**Report to the**

**Senate Appropriations Committee on  
Health and Human Services**

**House Appropriations Committee on  
Health and Human Services**

**By**

**North Carolina Department of Health and Human  
Services**

**January 25, 2023**

## **Reporting Requirement**

North Carolina Session Law 2021-180, Section 9I.3.(b) directs the NC Department of Health and Human Services (DHHS) to submit a report on the estimated costs, by region, for office space and sample agreements as described in this subsection.

### **Session Law 2021-180, Section 9I.3**

#### **Report on Estimated Cost for DSS & COG Office Space**

**Section 9I.13.(b)** The Division of Social Services (Division) and the North Carolina Association of Regional Councils of Governments (Councils of Governments) shall explore entering into a memorandum of agreement to (i) utilize Councils of Governments' physical office space and office-related needs for Division staff and (ii) facilitate cooperation between regions and evaluate the estimated costs by region for the office space and sample agreements between the Division and the Councils of Governments. The Division shall submit a report to the chairs of the Senate Appropriations Committee on Health and Human Services and the House Appropriations Committee on Health and Human Services by February 1, 2022, on the estimated costs, by region, for office space and sample agreements as described in this subsection.

## **Introduction and Background**

Both the Senate and House Appropriations Committees on Health and Human Services are interested in securing office space to support implementation of a regional support model for County Departments of Social Services. This model aims to improve the supervision that NC DHHS offers to counties through a structured process of evidence-based training, oversight, technical assistance, and continuous quality improvement.

This regional support model is critical to ensuring consistent and appropriate services to children and families across the state. Data shows that increased support for counties can improve outcomes. Since 2018, for example, DHHS has focused its limited resources in child welfare on intense work and oversight in child safety. This focus has resulted in improved timeliness of CPS assessment initiations (85% of assessments initiated timely Apr-Sept 2020 vs. only 78% timely Apr-Sept 2019). DHHS hopes to expand these positive impacts through a structured realignment that connects counties with regional offices dedicated to foster these types of supports.

The passage of Rylan's Law in 2017 created the Social Services Regional Supervision and Collaboration Working Group (SSWG) to lead this effort. Since then, DHHS and the SSWG have made significant implementation progress. Milestones of note include establishing 7 regions that collectively cover all 100 counties (**Figure 1**), finalizing a 100+ page Social Services Reform Plan, redeploying staff into regional support positions, and designing a Safety Organized Practice model specific to skill-building in child welfare staff. DHHS summarized much of this progress in its February 2019 report to the Joint Legislative Oversight Committee on Health and Human Services.

One recommendation from this report proposes that DHHS “Appropriate physical offices within each of the seven regions beginning in March 2021, and appropriate funds necessary to support the full costs of the offices”. The Council of Governments, a multi-county regional planning and development organization, may possess the necessary facilities to meet this ‘brick-and-mortar need’. Created by executive order in 1971, this agency oversees a system of 16 Regional Councils (**Figure 2**) that serve their members through a broad range of services, including contracting and office support for members of government. It is possible that regional provision of office space through the Council of Governments could allow for local economies of scale that would result in efficient use of public tax dollars.

## Exploring a Memorandum of Agreement

DHHS conducted outreach to the Council of Governments in March 2022 to gauge the feasibility of procuring the Council’s office space. The Executive Director agreed to bring the prospect to the Council’s monthly Board of Directors meeting for discussion and evaluation. In preparation for this meeting, DHHS provided the Council both its 7-region map (**Figure 1**) and the operational requirements for the office space per recommendations of the SSWG:

- Training/meeting space large enough to accommodate fifty (50) persons;
- Conference room with space to accommodate up to thirty (30) participants;
- Four to six (4-6) private offices and an area of cubicles or communal space to house other regional staff who may need remote space in the office
- An appropriate workspace and other appropriate technologies, particularly video and teleconferencing platforms, necessary to fill the role.

A Sample Space and Cost Estimate was provided to DHHS’s Division of Property and Construction and submitted for the 2019 report to the Joint Legislative Oversight Committee on Health and Human Services. Assuming use of existing state properties, the estimate was intended to illustrate the type of geographic, cost, and infrastructure information that the Council would need to provide to meet the legislative requirement.

Upon consultation with the Council Board of Directors, the Executive Director informed DHHS that the use of Council office space would likely not be a viable solution for the regional support model. As one can see in comparing **Figure 1** and **Figure 2**, the state’s regional support breakdown does not match Council’s 16 regions. This misalignment could cause logistical and operational complications among Council stakeholders. Additionally, the Executive Director noted that there is limited to no availability of workable space within certain DHHS regions. Despite certain limited possibilities, the Council advised that DHHS seek an alternative source of office space.

## Cost by Region and Sample Agreements

Given their aforementioned recommendation, the Council of Government elected not to generate cost estimates for the use of its office space. DHHS therefore did not produce sample agreements based on this recommendation.

### Conclusion

DHHS and the Council of Governments agree that a prospective partnership to utilize office would not be in the best interests of either organization. DHHS will continue to assess ‘brick-and-mortar’ options that would justify state investment.

## Referenced Figures of Regional Maps

Figure 1. Proposed Seven Region Map

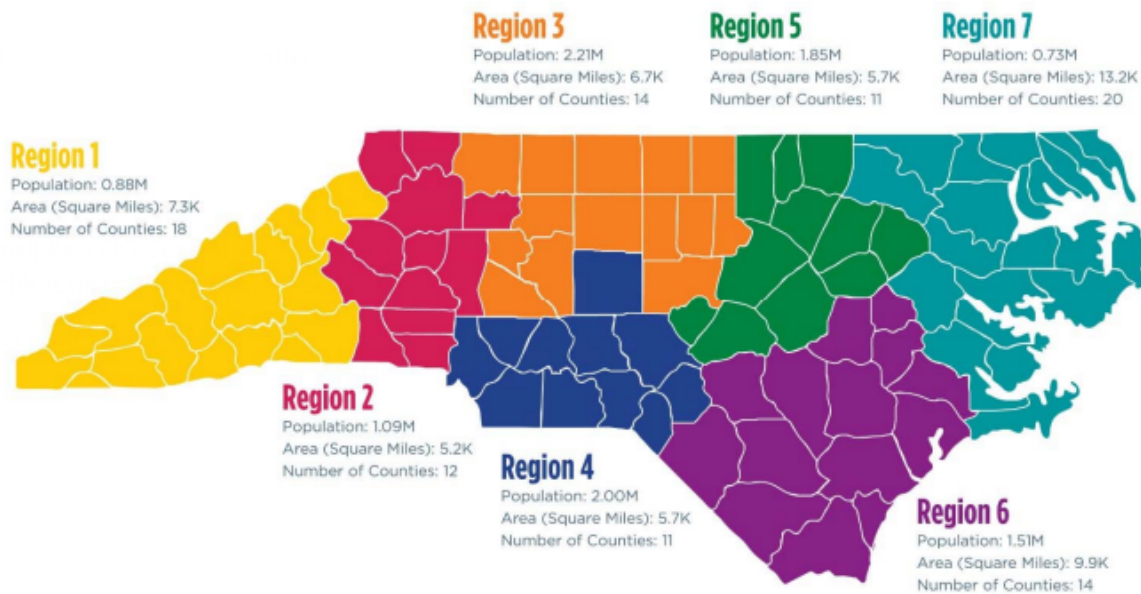


Figure 2: Map of 16 Council of Government Regions

