The North Carolina Collaborative for Children, Youth and Families Charter

October, 2007



The Charter of the North Carolina Collaborative for Children, Youth and Families

Table of Contents

| Background, History, and the Charter | 2 |
|--|----|
| Name and Purpose | 5 |
| Mission and Vision | 6 |
| Principles and Values Guiding the Collaborative's Work | 6 |
| Strengths of the Collaborative | 7 |
| Membership | 7 |
| Meetings and Leadership | 8 |
| The Collaborative's Current Activities with Agencies | 9 |
| Functions/Areas of Focus and Current Workgroups | 10 |
| New Issues: the Process and the Collaborative's Emerging Interests | 14 |
| Some Recent Accomplishments | 14 |
| Other Partners the Collaborative Would Like to Engage | 16 |
| Changing the Charter | 17 |

Background, History, and the Charter

Since 2000, the North Carolina Collaborative for Children, Youth and Families has provided a neutral forum for family members, staff from child serving agencies, professional associations, provider groups, university researchers, advocates and others interested in children and families to have open honest, conversations about collaboration, service delivery, evaluation and accountability on issues relating to children, youth and families.

The North Carolina Collaborative for Children, Youth and Families (frequently referred to as the State Collaborative, or the Stakeholder Collaborative) is not part of any agency and has no legal authority to make decisions. Instead, the Collaborative provides opportunities for decision makers, representing a range of state and local agencies, to communicate and work together with families and advocates to better meet the needs of children and families. It does not change the authority or responsibility of agencies or families. Instead, the Collaborative provides a neutral place to meet and a mechanism through which decisions can be better informed by the needs of families and other agencies.

The Collaborative was started informally in 2000 by senior staff from what was then the Child and Family Services Section in Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (MH/DD/SAS), Children's Services at the Division of Social Services, the Department of Juvenile Justice and Delinquency Prevention (DJJDP), the Exceptional Children Division at the Department of Public Instruction (DPI), the Administrative Office of the Courts (AOC), and the Governor's Crime Commission. Realizing that their agencies very often served the same children and families, they met informally, usually before normal work hours, to address common problems and find better ways to collaborate.

From its inception, the Collaborative has operated with system of care principles. Adhering to system of care principles, a family member was soon invited to attend, and the Collaborative tries not to meet without input from families. While system of care language comes out of mental health, it is consistent with best practice models in special education, child welfare, public health, substance abuse, juvenile justice and education as well as the processes used in the growing number of problem-solving courts. A system of care is a child- and family-focused framework based on the principles of:

- Interagency collaboration
- Individualized, strengths-based practices
- Cultural competence
- Community-based services
- Full participation of families and youth at all levels of the system
- Shared responsibility for successful results.

These principles guide the Collaborative and are recognized across disciplines as the national standard for service integration by the Surgeon General's *Report on Mental Health*, the President's *New Freedom Commission* and the recently released Robert Wood Johnson/Child Welfare League of America consensus document on children's services.

The Collaborative's meetings have always been open, and through word of mouth and advocacy, staff from Public Health, North Carolina's Area Health Education Centers (AHEC), the Office of Youth Advocacy and Involvement, the Mental Health Association, the National Alliance for the Mentally III, the Council of Community Programs, North Carolina Legal Services and other agencies, professional associations, and advocacy groups learned of the meetings and sent representatives. If the meetings were found to be of value, people continued to attend. New members bring new concerns and new issues. Groups concerned with a wide variety of issues ranging from services for military families, transitions out of foster care, childhood trauma, fatherhood, specialized services for girls, at-risk children and homelessness have come to the State Collaborative to find ways to work with other groups.

The North Carolina Collaborative for Children, Youth and Families began as a forum for the discussion of issues regarding how agencies and families can work together to produce better outcomes for children and families, as agencies and families brought new issues to the Collaborative, it has taken on new roles. Although it continues to function as an informal group, the Collaborative has successfully developed and delivered training for state agencies and taken on a number of formal tasks for child serving agencies.

The first of these tasks involved drafting a series of legislatively required Memoranda of Agreement to implement at-risk children's legislation – the Comprehensive Treatment Services Program (CTSP). While these were mental health funds, the legislation required multi-agency collaboration. This allowed agencies outside the DMH/DD/SAS and parent/family advocates greater input into how these funds are used and created a model for future collaboration. Since then, the Collaborative has taken on other formal tasks including the implementation of SB163, a bill aimed at improving communications between public agencies when children were moved from one county to another. Here the Collaborative created a communications protocol that defined who is responsible, and how and when notification is to be sent.

With federal agencies now requiring evidence of collaboration when they award competitive grants, the Collaborative has also been able to help a number of state and local agencies work together to secure competitive federal grants.

Since 2001 a number of state agencies and legislative committees have continued to ask the Collaborative to take on tasks that require either multiple agencies to work collaboratively to produce a report or a multi-agency advisory group. The State Collaborative helped the Division of Social Services prepare for the Child and Family Services Review (CFSR)—both the first one in 2001 and now the second one in 2007,

helped the Department of Public Instruction with its Homeless Plan, and worked with DMH/DD/SAS to develop a multi-disciplinary Child Mental Health Plan to move children from institutional to community settings. The Collaborative has served as an advisory group to programs in the Department of Pubic Instruction, the Administrative Office of the Courts, and the Division of Social Services. The Collaborative has continued to perform numerous cross-agency functions including helping agencies work on cross-disciplinary training, common assessment tools, and more unified ways to evaluate programs. (For a more detailed list of accomplishments see http://www.nccollaborative.org/intranet/downloadManagerControl.php?mode=getFile&elementID=60&type=5&atomID=14).

As it grew in size and took on more tasks, the North Carolina Collaborative for Children, Youth and Families has developed a number of work groups focused on training, evaluation, substance abuse, transitions to adulthood, assessment, cultural competency and practices, and school-based mental health. Increasingly it is in the work groups where the work of the Collaborative gets done, while the bi-monthly meetings deal with more general issues and hear reports from ongoing initiatives.

At present, the North Carolina Collaborative for Children, Youth and Families is cochaired by a Parent and a Research Scholar at the Center for Child and Family Policy at Duke University. The North Carolina Collaborative for Children, Youth and Families meets twice a month at locations posted on its website http://www.nccollaborative.org/ which was developed with funding from a number of agencies. People come to meetings to share information and solve problems through a "collaborative" process. Responsibility for minutes, mailing, etc. is shared across agencies. MH/DD/SAS maintains the email lists and posts the minutes on its web site.

In summary:

- The North Carolina Collaborative for Children, Youth and Families has a long history.
- This stakeholder Collaborative is unique in the nation for its level of activity and partnership.¹ Among other activities, it serves as the collaborative body for multiple state agencies that are mandated to collaborate with stakeholders.
- In addition, it participates as a partner with multiple agencies on specific projects.
- The State Collaborative has active involvement of families, particularly those with children with mental health issues.
- The Collaborative has an active, dedicated core group.
- It also conducts regular and extensive outreach. For example, the Collaborative has an extensive email list.

¹ See the unpublished paper written by Joel Rosch, What Structures Do We Need to Get Child Serving Agencies to Work Together More Effectively and Efficiently, in which he catalogues collaborative bodies in other States. (jbrrosch@duke.edu)

In 2007, the Collaborative's members concluded that the organization had matured sufficiently over the years that it needed to use a strategic planning process to develop a formal charter. A charter is an official, written instrument, executed by the participating parties, that formally specifies the organization's purpose and other elements of its work. The members identified the following advantages of having a formal charter:

- A charter can help the organization's credibility—it provides a formal definition and identity.
- It is an instrument that will help others to understand the purpose of the State Collaborative.
- A charter is a "middle of the road" approach. It does not have the legal implications, for example, of a Memorandum of Understanding (MOU), but it can still formalize the partnerships in the Collaborative.
- It can help validate who the group is without getting "stuck" in legislation belonging to a single group.
- It can be used to recruit other partners by defining who we are. It may help other potential partners understand why they should be part of the Collaborative.
- A charter can help establish a system of accountability—it defines the purpose, functions, relationships, boundaries, and responsibilities. If these are defined, it can help the organization remain functional and productive.
- It can model implementation of collaboration for local areas.
- A charter does not take away or jeopardize the authority of the participating agencies, nor relieve them of their liability.

Name and Purpose

The name of this organization is the North Carolina Collaborative for Children, Youth and Families.

The purpose of this organization is to serve as a vehicle for cross system collaboration among family members, youth, health, human services, juvenile justice, education, and courts—both public and private—together with other community partners in order to promote the achievement of better outcomes for the children, youth and families of North Carolina.

Mission and Vision

The North Carolina Collaborative for Children, Youth and Families is a forum for collaboration, advocacy and action among families, public and private child, youth and family serving agencies and community partners to improve outcomes for all children, youth and families in the State. We share responsibility and accountability for ensuring that children, youth and families are healthy, safe and successful at home, in school, and in their communities.

Our vision is that children, youth and families are healthy, safe and successful at home, in school and in their communities.

Principles and Values Guiding the Collaborative's Work

The Collaborative uses these principles and values as a lens to ensure that when we undertake work and activities, we do so with these as our frame:

- We—families, agencies and community partners—come together to promote the growth and development of a system of care for children, youth and families in North Carolina.
- The core principles of system of care guide everything the Collaborative does: interagency collaboration; individualized, strengths-based practices; cultural competence; community-based services; full participation of families and youth at all levels of the system; and shared responsibility for successful results.
- We commit our energy and resources to working with state, local and private agencies, youth and families, and other community partners to achieve better outcomes for the State's children, youth and families.
- Families and youth participate at every level of practice, program and policy making. We advocate for this same inclusion and participation at all levels of participating agencies and organizations.
- To achieve better outcomes, it is essential that children, youth and families are equal partners in deciding on individualized plans, and in accessing least restrictive, community-based services, regardless of what agency is serving them.
- Child and family teams are where service plans for children, youth, and families build on strengths and are individualized to meet the family's needs.
- We commit ourselves, collectively, individually, and as agency, community, or organizational representatives, to sharing and developing resources for the children, youth, and families of North Carolina.
- We promote prevention and early intervention for children, youth, and families.

Strengths of the Collaborative

The Collaborative clearly possesses some core strengths, identified by its members:

- Common vision
- Youth and family partnerships
- Commitment
- Humor
- Resources
- National reputation
- Good communication
- Wide representation of stakeholders
- Trust building/relationships

- Expertise
- Regular meeting schedule and meeting place
- Energy
- Open meetings
- Walking the talk
- Neutral space
- Track record of influencing policy and procedures
- Legislative recognition

Membership

It is useful to think about the membership of the North Carolina Collaborative as having two different levels. The first level includes members who participate in the meetings and the overall work of the Collaborative. Membership is fluid and dynamic and new partners are always welcome. In addition, the organization has an extensive network of youth, family members, providers, and other community partners. The Collaborative draws on this network for work group membership and involvement in its activities and projects.

The Collaborative represents the following organizations and agencies:

- Family members:
 - North Carolina Families United.
 - Other parents.
- State agencies:
 - Administrative Office of the Courts (AOC).
 - o Department of Juvenile Justice and Delinquency Prevention (DJJDP).
 - Department of Health and Human Services (DHHS):
 - Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (DMH/DD/SAS).
 - Division of Public Health (DPH).
 - Division of Social Services (DSS).
 - Division of Medical Assistance (DMA).
 - Division of Child Development (DCD)
 - Division of Vocational Rehabilitation
 - Office of Education Services (OES).
 - Department of Administration
 - Youth Advocacy and Involvement Office (DOA-YAIO)
 - North Carolina Council for Women and Domestic Violence Commission
 - Department of Public Instruction (DPI).
 - Exceptional Children
 - Healthy Schools
 - Safe Schools

- County agencies:
 - County Departments of Social Services.
 - Local Management Entities (LMEs).
- Community Organizations:
 - o Action for Children.
 - Carolina Legal Assistance.
 - Eastern Area Health Education Center (AHEC).
 - o Mental Health America of North Carolina.
 - National Alliance for Mental Illness, North Carolina (NAMI/NC).
 - The North Carolina Council of Community Programs.
 - The North Carolina School Psychologists Association.
 - o MeckCARES
- Colleges/Universities:
 - Duke University.
 - Guilford Community College.
 - North Carolina State University (NCSU).
 - University of North Carolina (UNC)-Chapel Hill.
 - University of North Carolina (UNC)-Greensboro.

Meetings and Leadership

The North Carolina Collaborative meets twice a month. Meetings are held the second and fourth Fridays of each month (meetings in November and December are adjusted for holidays). The Collaborative's work groups meet as needed, generally at least once a month, and report back to the Collaborative.

Decision making is by consensus. Leadership is chosen by consensus.

Thus far, there are two kinds of leaders in the work of the Collaborative:

- The North Carolina Collaborative Co-Chairs. One co-chair is always a parent. The co-chairs plan the agenda and chair the meetings.
- The Chairs of the work groups.

The North Carolina Collaborative's Current Activities with Agencies

The North Carolina Collaborative is unique in the nation for its level of activity and partnership. Among other activities, it serves as the collaborative body for multiple state agencies that are mandated to collaborate with stakeholders. In addition, it participates as a partner with multiple agencies on specific projects. The following is a delineation of the Collaborative's current activities with public agencies and other organizations in North Carolina:

- Administrative Office of the Courts (AOC):
 - The Collaborative serves as the stakeholder group for the statewide enhancement grant targeting supported drug treatment from the Office of Juvenile Justice and Delinquency Prevention (OJJDP).
- Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS):
 - The Collaborative serves as the stakeholder group for North Carolina's Mental Health Block Grant. It also is the stakeholder group for the Substance Abuse Block Grant.
 - It works with the Division in its system of care (SOC) initiative.
 - It assists the Division in implementing adolescent substance abuse treatment coordination.
 - The Collaborative assisted the Division in the development of the Memoranda of Agreement (MOA) for comprehensive treatment service programs.
 - It serves as advisors to the Division's Children's Mental Health Plan.
- Department of Public Instruction (DPI):
 - The Collaborative serves as the official Advisory Group for the Homeless Education program.
 - It serves as the implementing group for the Department's IDEA partnership Shared Agenda grant.
 - The Collaborative serves as the state level Advisory Group for Positive Behavior Support (PBS) in North Carolina schools (National Initiative) and is instrumental in helping to create a demand for the Positive Behavior Support (PBS) program.
 - It also serves as one of the Stakeholder Groups for Exceptional Children Division State Performance Plan.
 - The Collaborative works with the School Safety and Climate section.
- Department of Public Instruction (DPI)—Local Education Agencies:
 - The Collaborative assisted the Department in its Safe School Grants.
- Division of Social Services (DSS)—Family Support and Child Welfare Services:
 - The Collaborative serves as the officially mandated stakeholder group for both the Title IV-B planning (the required five year Child and Family Services Plan and the annual Progress and Services Report [APSR]) and for the State's Child and Family Services Review (CFSR).
 - It also serves as the stakeholder group for the Division's Systems of Care (SOC) Demonstration Grant in Alamance, Bladen, and Mecklenburg Counties.
- Mecklenburg County Government:
 - The Collaborative serves as one of the advisory group for MeckCARES.

- Eastern Areas Health Education Center (AHEC):
 - The Collaborative serves as the advisory group to the school mental health project.
- North Carolina Families United:
 - The Collaborative facilitates access for families to have a voice and leadership in policy making in the various public agencies.
 - It serves as the stakeholder group for the Statewide Federation of Families Network Grant.

Functions/Areas of Focus and Current Work Groups

The North Carolina Collaborative provides a number of key functions for state and private provider agencies, families and youth, and other stakeholders. The Collaborative:

- Serves as the community stakeholder group for public agencies that are mandated to collaborate with stakeholders in the design and delivery of their services.
- Recruits family and youth members as partners to work with public agencies and other organizations who need family and youth voices in system design and operations.
- Networks among members of the Collaborative as well as with others.
- Shares information among participants.
- Promotes the blending of funds.
- Provides support both for grant applications and for the projects when they are funded.
- Promotes the efficient use of dollars, space, and resources.
- Provides advocacy.
- Finds solutions, leading to products, new policy, procedures, or practices.
- Identifies gaps in services and works to fill those gaps.
- Promotes culturally competent practices in the delivery of human services.
- Supports community efforts.
- Facilitates and supports strategic planning.
- Shares and celebrates successes.
- Provides state and local training and technical assistance.
- Promotes the utilization of evidence-based best practice.
- Develops common training curricula.
- Provides training, education, and technical assistance.

In addition to the functions listed above, the North Carolina Collaborative currently is focusing on seven critical areas:

- 1. Early Screening/Assessment Work Group. The purpose of this work group is to promote the need for early screening, assessments, and interventions for children, youth, and their families. The goals of the work group are to make recommendations about:
 - Use of reliable screening protocols by youth-serving agencies to identify mental health, physical health, substance abuse, abuse and/or neglect, learning and development, and interpersonal relationship concerns that warrant further assessment.
 - Timely assessment of all youth who screen positive for possible developmental, mental health, physical health, substance abuse, physical, sexual and emotional abuse, neglect, learning and delinquency risk factors.
 - Ongoing assessment of life domains to achieve and maintain positive outcomes.
- 2. Cultural Competence Work Group. Cultural competency is the ability of individuals and systems to respond respectfully and effectively to people of all cultures in a manner that recognizes, affirms, and values the worth of individuals, families, and communities and protects and preserves the dignity of each. This work group us composed of representatives from child serving agencies and family members working to support the system of care principle of cultural competency in the delivery of services to children, youth and families.
- **3. Gathering Information and Results/Evaluation Work Group.** The purpose of this work group is to assist child service agencies in creating a system of care evaluation tool. The work group encourages the use of strengths-based performance management tools and information systems to measure results. The goals of the work group are to:
 - Provide guidance to all child serving agencies in North Carolina on how to measure results.
 - Create an evaluation framework that is supportive to all child service agencies.
 - Support the creation of evaluation tools and instruments that are effective in measuring the success of the system of care initiative.
- **4. School-Based Behavioral and Mental Health Work Group.** The Collaboraive established this work group to explore ways that schools can access mental health services for their students and their families. The goals of the work group are to:

- Foster the development of local planning and implementation of behavioral and mental health services delivered at school.
- Develop and promote a statewide plan for coordinated behavioral and mental health services delivered at school.
- Promote quality behavioral and mental health services in the schools.
- 5. Adolescent Substance Abuse Services Work Group. This work group explores ways in which adolescent substance abuse treatment knowledge and skills can be infused into the family-centered philosophy and planning. The work group also provides advice and guidance to the DMHDD/SAS which is managing the Adolescent Substance Abuse Coordination Grant funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). The goals of the work group are to:
 - Foster the involvement of parents and youth in treatment and in advocacy.
 - Develop and promote training for professionals who work with youth.
 - Promote substance abuse services based on evidence-based practices.
 - Develop the workforce of the future by collaborating with institutions of higher education.
- 6. Training and Technical Assistance Work Group. This work group supports and provides technical assistance and training on system of care practices and principles to both public and private child serving systems and family organizations. Some of the ways the work group supports training efforts include:
 - Sponsoring regional and statewide system of care conferences.
 - Encouraging public and private agencies to work together in providing system of care training.
 - Supporting Child and Family Team training.
 - Developing the State Collaborative website.
- 7. Youth in Transition Work Group. This work group is a network of representatives from public and private agencies that promote successful transitions to adulthood for youth in our communities. The work group's aim is to inform and influence the systems affecting transitioning youth by advocating for improved services and outcomes. The goals of the work group are to:
 - Share and disseminate information.
 - Promote collaboration.

- Advocate for improved services and improved outcomes in all areas of life for transitioning youth.
- **8. Membership Work Group**. This work group focuses on sustaining diverse representation in the Collaborative. The work group conducts targeted recruitment as new issues and challenges emerge.

New Issues: the Process and the Collaborative's Emerging Interests

In any living system, new issues and challenges continuously emerge. This has happened throughout the life of the North Carolina Collaborative. Typically, when a new issue emerges on the horizon:

- A member brings the issue to the attention of the Collaborative.
- If there is a consensus that this is an issue the Collaborative should address, the issue is assigned to a work group or a new work group is created. The work group reports back to the Collaborative.

In addition, the North Carolina Collaborative holds an annual day for strategic planning. At this annual strategic planning day, this Charter is reviewed and updated, and the Collaborative identifies three to five priorities or goals for the upcoming year.

Accomplishments

The Collaborative has assisted agencies and families with a number of issues. Below are some recent examples. The North Carolina Collaborative:

- Drafted a series of legislatively required Memoranda of Agreement (MOA) to implement at-risk children's legislation the Comprehensive Treatment Services Program (CTSP).²
 http://www.nccollaborative.org/intranet/downloadManagerControl.php?mode=getFile&elementID=185&type=5&atomID=67
- 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."
- 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.

14

² SL 2001-424 21.60 COMPREHENSIVE TREATMENT SERVICES PROGRAM.

- Assisted with the implementation of SB163³, 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.
- Developed training materials and guidelines for judges involved in juvenile and family court.
- Helped local agencies navigate what they perceive to be state-created barriers to local collaboration. The Collaborative also 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.
- Helped DMH/DD/SAS to develop a multi-disciplinary Child Mental Health Plan to move children from institutional to community settings.
- 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.
- Created 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.
- Served as a stakeholder group for various child serving agencies.
- Assisted legislative staff in shaping legislation that promotes systems of care in achieving positive outcomes for children and families.

As a result of these and other activities:

 There is now much greater understanding between agencies of how each are funded and why they do what they do, supporting the practice of blending funding.

 Members representing both public and private child serving agencies and organizations now meet regularly through the Collaborative's various work

 $^{^3}$ 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.

groups to coordinate projects that further collaborative efforts on issues affecting children and families. For example, the State Collaborative has provided:

- Speakers for various meetings and conferences across the state.
- Five Regional system of care (SOC) trainings across the state on system of care principles and child and family teams through blended funding.
- Plans for an annual statewide system of care conference.
- Technical assistance to local collaborative groups when requested.
- The North Carolina Collaborative website developed through blended funding (http://www.nccollaborative.org).
- A cross-agency child and family team curriculum written from the family's perspective developed through blended funding and available for use by all agencies.

These accomplishments have been possible through the collective work and the relationships that have been established between members of the North Carolina Collaborative.

Changing the Charter

This Charter is intended to be a living document. The North Carolina Collaborative has agreed to hold an annual meeting which will be a strategic planning session and a review of the Charter to determine what needs to be changed. In addition, any member of the Collaborative can propose a change at any meeting and if there is a consensus about the change, it can be made without waiting for the annual meeting. However, notice to consider a change to the Charter will be given in the agenda for the meeting where the change will be considered.