

Regions, Regions, Regions: Untangling Different Concepts in Social Services Reform

When the General Assembly enacted S.L. 2017-41 (H 630) in June 2017, it set several wheels in motion related to reform of the social services system (See [legislation](#); [SOG summary](#)). Some of the ideas addressed in the reform conversation involve “regions” or inter-county collaborations. These ideas are often referred to as “regionalization,” but that term is simply too broad to be helpful. There are at least four distinct “regional” conversations underway, and they really need to be differentiated. My goal today is to abandon the term “regionalization” and clarify terminology for these social services reform conversations moving forward. To that end, this blog post will review the reform ideas related to regional social services work, give them unique names, and provide a brief update on the progress of these conversations.

Overview

North Carolina is one of a handful of states that has a state-supervised, county-administered social services system. This means that the counties are the ones on the front line delivering services, but they are accountable to the state. In some circumstances, social services staff are even considered agents of the state. (See, e.g., [In re N.X.A.](#), ___ N.C. App. ___, 803 S.E.2d 244 (2017); [G.S. 108A-14\(a\)\(5\)](#)). In most other states, social services programs are [state-administered](#).

There are currently four conversations underway about whether North Carolina's social services system should have a regional overlay. In short, these conversations relate to:

1. **Regional supervision:** Should the state establish a more coordinated and comprehensive regional structure for *supervising* the county-administered system? If so, what should that structure look like?
2. **Inter-county collaboration:** Within the state-supervised, county-administered system, are changes needed to encourage counties to collaborate with each other more often to deliver services?
3. **Optional regional administration:** Within the state-supervised system, do counties want to voluntarily join together to create a new legal entity to deliver some or all of the social services programs at the regional rather than the county level?
4. **Mandatory regional administration:** Should the state convert the state-supervised, county-administered system to a state-supervised, regionally-administered system?

These conversations are happening in several different (acronym-laden) contexts:

- The [Social Services Working Group](#) (SSWG) is charged with discussing #1, #2, and #4 above and providing feedback to the legislature;
- The [Center for the Support of Families](#) (CSF) is a consultant hired by the state and charged

- with researching and making recommendations related to social services system reform, including regional supervision, and child welfare reform; and
- The NC Department of Health and Human Services (DHHS) is required to submit recommendations to the legislature in November regarding improved regional supervision of the county-administered system.

In addition to these legislatively-mandated conversations, there are also many informal conversations underway at statewide association meetings, conferences, and around water coolers.

What follows is a brief overview of each of these four ideas and an update on the current conversations related to each one. Key issues and terms to focus on are:

- Supervision vs. Administration
- Optional vs. Mandatory

These terms – when combined with “region” – seem to generate significant confusion, which is understandable given that these four conversations are all happening concurrently. Let's break these ideas down separately now and see where things stand with each one.

Regional Supervision

Should the state establish a more coordinated and comprehensive regional structure for supervising the county-administered system? If so, what should that structure look like?

In the current state-supervised, county-administered system, the state – primarily DHHS – is responsible for oversight and support of county administration. For example, the state:

- Performs program monitoring;
- Provides technical assistance;
- Requires and monitors corrective action plans;
- Develops policies and procedures based on federal and state law; and
- Offers training.

This oversight and support function is available through central office staff but also through some DHHS staff who are located regionally. The current conversation is about making the regional support more robust, consistent, and comprehensive. The legislation specifically directed the SSWG to make [recommendations](#) for creating a better system of regional supervision and support. The SSWG's [report](#) on this issue was released in April 2018. Following up on that report, both CSF and DHHS are in the process of developing their own recommendations related to creating this system. While the legislature indicated an intent to have such a system in place by March 2020, additional legislative action will be required before DHHS can make any significant structural or

personnel changes.

Inter-County Collaboration

Within the state-supervised, county-administered system, are changes needed to encourage counties to collaborate with each other more often to deliver services?

County social services agencies currently collaborate in many different ways – sharing staff and programs, offering joint training, placing foster children across county lines, etc. These collaborations can be an excellent way to meet community needs efficiently and effectively. The legislature directed the SSWG to make recommendations for changes in the law that would make it *easier* for counties to collaborate with one another. The SSWG is discussing this issue now and will be making recommendations by February 1, 2019.

Optional Regional Administration

Within the state-supervised system, do counties want to voluntarily join together to create a new legal entity to deliver some or all of the social services programs at the regional rather than the county level?

Beginning in March 2019, counties have new authority to voluntarily join together to create regional departments of social services. ([G.S. 108A-15.7](#) et seq.). It is a local option that was enacted into law last year and that goes into effect next spring.

If counties choose to create a regional department, these new departments would be separate legal entities from the counties involved. The legal term is called a “public authority.” ([G.S. 159-7\(b\)\(10\)](#)). For example, the regional department would have its own director, governing board, personnel, budget, etc. The regional departments could include all of the social services programs or just a subset. For example, the department could focus exclusively on adult services (such as adult protective services and guardianship), economic services (such as public assistance programs), child welfare, or child support enforcement. This new authority is similar to the authority available to counties to establish regional public health departments (referred to as “district health departments”). There are currently [6 district health departments](#), composed of a total of 22 counties.

In order for a county to join a regional social services department, there must first be an agreement between the board of commissioners and, if applicable, the county’s governing board for social services (either a social services board or a consolidated human services board). [G.S. 108A-15.7](#). Once created, the governing board for a regional department will include at least 12 members, but may be up to 18 members depending on the size of the region. The appointment authority for this board parallels the appointment authority for a county board of social services: the board of county commissioners for each county in the region appoints two members, the state Social Services

Commission appoints two members, and the seated governing board members appoint the remaining members. [G.S. 108A-15.8](#).

Counties that choose to create a regional department will also need to reach an agreement with one another regarding their respective financial responsibilities. The original legislation directed the Social Services Commission to adopt a regulation related to this issue. The Commission's proposed regulation was recently published (see [proposed regulation](#) and accompanying [fiscal note](#)). It provides, in short, that the counties must agree about the amount or method for appropriating funds to the regional department for:

- The administration of programs;
- The county share of public assistance costs; and
- Any recoupments following fiscal or program monitoring or audit findings.

If the Commission adopts this or a substantially similar regulation, the counties will have significant flexibility in designing the financial agreements that support these optional regional departments. The Commission will hold a public hearing about the proposed regulation in Raleigh on November 14 and is accepting public [comments](#) through November 16. According to the Commission, the regulation is expected to go into effect March 1, 2019, which would coincide with the effective date for the law authorizing counties to create regional departments.

Mandatory Regional Administration

Should the state convert the state-supervised, county-administered system to a state-supervised, regionally-administered system?

When legislation addressing social services reform was initially proposed in 2017, it would have required the state to move away from a county-administered system to a regionally-administered system ([S 594](#)). [This version of the legislation did not make it out of committee](#). Instead, the legislature developed a revised version of the bill that focused on [regional supervision](#), as described above. There is no legal requirement that the state shift to a regionally-administered system.

The legislature did, however, direct the SSWG to discuss mandatory regional administration. Specifically, the law directs the SSWG to:

Develop a vision for transitioning the State from a county-administered system to a regionally administered system. The vision shall identify general benefits and challenges associated with making such a transition.

[S.L. 2017-41](#), Sec. 1.2(d)(2)b. The SSWG is just beginning this part of its work. The SSWG must submit a report to the legislature by February 1, 2019, which will offer feedback and

recommendations about (1) inter-county collaboration and (2) mandatory regional administration. Those interested in learning more about this issue or following the SSWG's discussions and deliberations are welcome to attend meetings, listen to live webcasts, view recordings, or review materials and meeting minutes. All information and materials are posted the SOG's Social Services [microsite](#) (scroll down the right side navigation bar to the "Social Services Working Group" heading). Anyone is also invited to share thoughts directly with the SSWG by sending an email (sswg@sog.unc.edu) or completing this public survey (related to the Stage Two topics of collaboration/mandatory regional administration).

Final Thoughts

There are obviously several different conversations about social services "regions" happening at the same time. It's worth noting that the [Medicaid Transformation](#) work that is underway is also developing a regional framework for program supervision, which will hopefully align with any other social services regions that are developed. As mentioned above, the only trick that I have for keeping them all straight is to focus on "supervision vs. administration" and "mandatory vs. optional." The SSWG would really like to come up with some better names for all of these things to minimize confusion. If you have any suggestions, please send SSWG an email or leave a comment on this post. Any and all feedback is quite welcome!