Statutory Changes Will Promote County Flexibility in Social Services Administration

A presentation to the Joint Legislative Program Evaluation Oversight Committee

May 2011

Carol Shaw
Handouts

The Full Report

Large White Handout

Today’s Slides
Evaluation Team

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Our Charge

S. L. 2009-451, Section 10.52 directed the Program Evaluation Division to study the consolidation of administrative functions of social services programs among counties including:

- Identifying factors affecting consolidation of programs
- Denoting opportunities for functional consolidation among counties

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Overview: Findings

• Five alternative structures for administration of social and other human services exist in NC and other states

• Statutory and perceived barriers inhibit counties from considering different structures of administering social services

• Administering programs at the county level is considered a major strength of NC’s social services system
Overview: Recommendations

• Eliminate the 425,000 population threshold to establish a consolidated human services agency

• Allow formation of DSS districts using the public health district as a model

• Direct DHHS to develop a plan to simplify and streamline supervision
Background
Social Services Defined

• Consists of programs and assistance provided by public and private agencies

• Meets the needs of children, families, senior citizens, persons with disabilities, and the economically disadvantaged

• Helps people achieve and maintain economic and social well-being
NC is one of 11 states providing social services programs through a state-supervised and county-administered system.
Current Structure of County Social Services Administration in NC

- County commissioners appoint members to the social services board
- North Carolina Social Services Commission appoints members to county social services board
- Social services board sets policy and provides direct supervision over Social Services Director
- County commissioners
  - County Manager
  - Social Services Board
  - Social Services Director
  - Social Services Agency
- County Social Services Board
- Social Services Commission
- County Commissioners
- North Carolina Social Services Commission
- County commissioners appoint members to the social services board

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Findings
Finding 1.

Alternative structures for administration of social services and other human services exist in North Carolina and other states.
Five Alternative Structures

1. Contracting for Social Services Administration
2. Regional Approach – Multi-County Social Services Agency
3. Regional Approach – Public Health District as a Model for Social Services
4. Consolidated Governance – County Commissioners Serving as the Social Services Board
5. Consolidated Governance and Administration – Human Services Agency

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### Alternative Structures in NC

#### Exhibit 3: Alternative Methods for Administering Social and Human Services in North Carolina

<table>
<thead>
<tr>
<th>Alternative Method</th>
<th>Description</th>
<th>Applicable Statutes</th>
<th>Governance</th>
<th>Counties Implementing</th>
<th>Benefits</th>
<th>Challenges</th>
<th>Other States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contracting for Social Services Administration</td>
<td>One county DSS contracts with another county DSS to administer social services</td>
<td>160A-461</td>
<td>This method does not change how the governance structure</td>
<td>Avary, Camden, Hyde, Pasquotank, Tyrrell, Washington, Watauga</td>
<td>Increases access to services in county</td>
<td>Negotiating contract terms to benefit all counties involved</td>
<td>MI, PA, VA, WI</td>
</tr>
<tr>
<td>Regional Approach – Multi-County Social Services Agency</td>
<td>Two or more county DSS boards form a single DSS agency to administer social services</td>
<td>108A-12(b) through 160A-466</td>
<td>Two or more county DSS director is responsible that the contract is properly executed</td>
<td>None</td>
<td>Increased efficiency in allocating resources</td>
<td>Complicated oversight structure requiring social services director to report to multiple social services boards</td>
<td>CA, CO, MI, ND, NY, PA, VA</td>
</tr>
<tr>
<td>Regional Approach – Public Health District as a Model for Social Services</td>
<td>County commissioners and local public health boards in two or more counties agree to form a health department district</td>
<td>130A-36 through 130A-58</td>
<td>One board with representation from each county</td>
<td>Allagony, Ashe, Avery, Bart, Camden, Chowan, Currituck, Gates, Guilford, Martin, McDowell, Mitchell, Pasquotank, Perquimans, Polk, Rutherford, Tyrrell, Vance, Washington, Watauga, Yancey</td>
<td>Simplified governance structure</td>
<td>Counties can choose to leave the district</td>
<td>CA, CO, MI, ND, NY, PA, VA</td>
</tr>
<tr>
<td>Consolidated Governance – County Commissioners Serving as the Social Services Board</td>
<td>County commissioners abolish the social services board and consolidate social services, public health, and mental health services and assumes all policy-making responsibilities of the social services board and other human services boards</td>
<td>153A-79(a) &amp; (f)</td>
<td>County commissioners serve as the board for human services, public health and mental health services</td>
<td>Mockleyburg</td>
<td>One board overseeing agencies</td>
<td>No involvement from community-at-large in the oversight of human services agencies</td>
<td>CA, CO, MI, ND, PA, VA, WI</td>
</tr>
<tr>
<td>Consolidated Governance and Administration – Human Services Agency</td>
<td>County commissioners appoint human services board and consolidate social services, public health, and mental health services into one agency</td>
<td>153A-79(b)(1) through 153A-15.1(c)</td>
<td>Consolidated board for social services, public health and mental health services</td>
<td>Wake</td>
<td>One board overseeing agencies</td>
<td>Increased workload for county commissioners</td>
<td>CA, CO, MI, ND, PA, VA, WI</td>
</tr>
</tbody>
</table>

Source: Program Evaluation Division based on interviews with participating counties, review of general statutes, and surveys of other states.

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Program Evaluation Division North Carolina General Assembly
3. Regional Approach
Public Health District Model

Each Board of County Commissioners appoints members to the public health board for the district.

Public health director oversees one agency serving counties in the district.

District Public Health Board

Public health board provides direct supervision to the public health director for the district.

District Public Health Director

District Public Health Agency

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4. Consolidated Governance

County Commissioners Serving as the Social Services Board

- **County Commissioners**
  - County commissioners serve as the board for all agencies
  - The general manager in the county manager’s office provides direct supervision over each agency and director

- **County Manager**
  - The general manager in the county manager’s office provides direct supervision over each agency and director

- **Social Services Director**
  - Each director oversees their respective agency

- **Social Services Agency**

- **Public Health Director**

- **Public Health Agency**

- **Mental Health Director**

- **Mental Health Agency**
5. Consolidated Governance and Administration

Human Services Agency

- County commissioners appoint human services board members
- County manager oversees the human services director
- Human services director oversees consolidated agency

Consolidated human services board sets policy for agency and provides advice and consent to county manager on the hiring and firing of the human services director

County Commissioners

County Manager

Human Services Director

Human Services Agency
Finding 2.
Statutory and perceived barriers inhibit counties from considering different structures of administering social services
Statutory Barrier

• NC Gen. Stat. §153A-77 imposes a population threshold on counties wanting to consolidate human services programs

• 97 counties do not meet the threshold

• Some counties not meeting the threshold want the option to form a consolidated human services agency

Report pp. 22-24
Buncombe County
Hybrid Consolidation of Human Services

• Created a consolidation hybrid that is legally permissible

• Statutory limitations forced a cumbersome structure for managing social services and public health

• Required creation of additional layers for governance and administration

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Removing the threshold would allow a more streamlined approach
Other Barriers

• County DSS directors’ perceptions make them wary of changing the current structure

• County managers believed there was room for improvement, but they need more information about alternatives

• State leadership and supervision may inhibit counties from considering alternative structures

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Finding 3.
Administering programs at the county level is considered a major strength of North Carolina’s social services system
Strengths of Current System

• Local control allows county DSSs to deliver services that meet community needs

• County social services boards are important
Counts Pay the Most for Social Services Administration

Federal
$513,756,259
48%

County
$521,720,156
49%

State
$32,019,115
3%

Total FY 2009-10 Expenditures
$1,067,495,530

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Recommendations
Recommendation 1.

Eliminate the 425,000 population threshold for counties to establish a consolidated human services agency
Eliminate Population Threshold

• Modify NC Gen. Stat. §153A-77 so all counties have the flexibility to establish a consolidated human services agency

• The population threshold should remain in place for consolidated governance (Mecklenburg model)

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Allow Counties to Establish a Human Services Agency for Social Services and Public Health

- Counties in multi-county local management entities need authority to establish a consolidated human services agency that does not include mental health and other services.

- Board composition and size will also need to be modified for a human services agency for social services and public health.

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Recommendation 2.

Allow formation of DSS districts using the public health district as a model
Allow Formation of DSS Districts

• Use public health district law as a model

• Legislation for the DSS district and social services district board should include
  – Three Board members from each county in the district including one county commissioner
  – Statutory authority for the DSS district director and district board remains the same

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Recommendation 3.

Direct the DHHS to develop a plan to simplify and streamline supervision of county DSSs
Simplify and Streamline State Supervision of County DSSs

• Direct DHHS to develop a plan using its goal-oriented structure organized around infrastructure and prevention

• Plan should address issues identified by DSS directors

• Require DHHS to develop plan in consultation with NC Associations of County DSS Directors and County Commissioners

• Report due no later than May 1, 2012
Findings Summary

• Alternative structures for administering social services exist and could improve efficiency and reduce administrative costs

• Statutory and perceived barriers inhibit counties from considering different structures of administering social services

• Administering programs at the county level is considered a major strength of NC’s social services system
Recommendations Summary

- Eliminate the population threshold for counties to establish a consolidated human services agency
- Allow formation of DSS districts using the public health district as a model
- Direct the DHHS to develop a plan to simplify and streamline supervision of county DSS
Report available online at
www.ncleg.net/PED/Reports/reports.html

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