Community Plan for the Carroll County Local Management Board FY 20

Our Vision: A community where all children, youth and families thrive

Our Partners

CCYB, BERC, Family Law, DJS, DSS, CCPS, CCPL, Change, Family and Children's, Catholic Charities, Dads/MomWorks, Human Relations Commission, NAACP, Boys and Girls Club
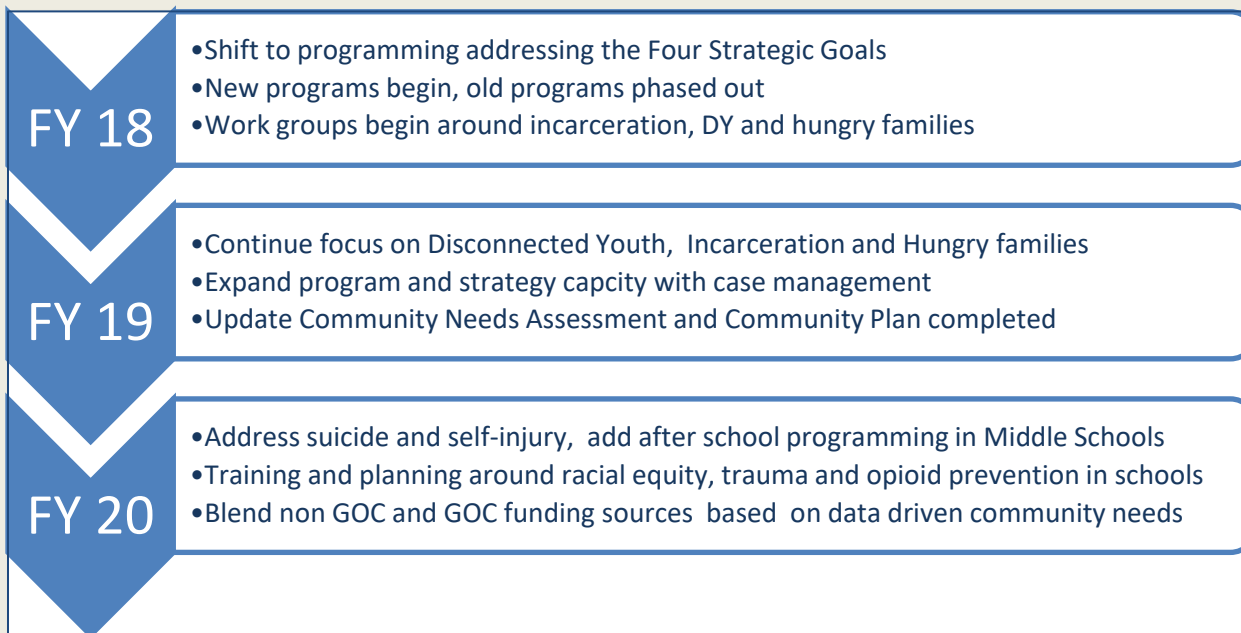
Our Funded Programs

Connecting Youth in Carroll, Customized Employment, Family Engagement, Family Ties, Interagency Family Preservation Preserving Safe and Stable Families, Project Connect, After School programming

Our Community Iniatives

Circle of Caring, Youth Reach, E-SMART, Community Services Council, Hungry Children Roundtable, Incarceration Workgroup, Connecting Youth Coordinating Council, Suicide Coalition

CCLMB began the FY20 Strategic Planning Process with a retreat to focus on our Mission and Vision, and to analyze our Strengths, Weaknesses, Opportunities and Challenges. LMB staff also completed a thorough review and presentation of local and state Indicators, held Key Informant Focus groups and facilitated Turn the Curve Exercises, in order to complete the FY19 - 20 Needs Assessment. The Needs Assessment is the driving force behind this Community Plan, providing a data driven analysis of gaps and silos in services, racial equity and program outcomes. This Community Plan is our road map for addressing the unique challenges facing our county's children, youth and families.

FY 18
- Shift to programming addressing the Four Strategic Goals
- New programs begin, old programs phased out
- Work groups begin around incarceration, DY and hungry families

FY 19
- Continue focus on Disconnected Youth, Incarceration and Hungry families
- Expand program and strategy capcity with case management
- Update Community Needs Assessment and Community Plan completed

FY 20
- Address suicide and self-injury, add after school programming in Middle Schools
- Training and planning around racial equity, trauma and opioid prevention in schools
- Blend non GOC and GOC funding sources based on data driven community needs

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The Planning Timeline

Action Steps and Timeline	August 2018	September 2018	October 2018	November 2018	December 2018	January 2019	February 2019	March 2019
LMB Retreat	✓							
Focus Groups and survey	✓	✓	✓	✓	✓	✓		
Roundtable Workgroups		✓	✓	✓	✓	✓		
Data Collection & update of Results and Indicators	✓	✓	✓	✓	✓	✓		
Needs Assessment preparation					✓	✓	✓	
Results and Indicators presented to Board							✓	
Adopt Community Plan and approve FY 20 Programs &Strategies								✓

CCLMB Impact on the Eight Results of Child-Well Being

CCLMB Priority	Results	Target Population Served	Funded program or strategy	Funding	CCLMB role
*New in FY 20	Babies Born healthy	Expectant moms and babies	E-SMART	SAMHSA	E-SMART leadership team
	Healthy Children	Age 0-8 0-17	E-SMART Suicide Intervention Team	SAMHSA GOC	E-SMART leadership team *CCLMB funded program (FY 20)*
	Children enter school read to learn	Pre-school	E-SMART	SAMHSA	E-SMART leadership team
*New in FY 20 (non GOC)	Children are successful in school	5-21	CCPS *After school programming (non-CPA)*	MSDE *CCLMB to vendor*	*CCLMB Funded Program *Program implementation and monitoring*
	Youth will complete school	5-21	CCPS	MSDE	Collaboration
Prioritized in FY 18	Youth will have opportunities for employment and career readiness	Youth age 16-24 not in school and not working	Connecting Youth in Carroll	GOC to CCYSB HSP BERC Change, Inc.	CCLMB funded program
Prioritized starting in 2018	Families are Safe and Economically Stable	Families and children impacted by incarceration	Project Connect & Family Ties	GOC to Circuit Court & Catholic Charities	CCLMB funded program
			IAFP & PSSF	*DHR/ LDSS to CCLMB for CCYSB & HSP*	*CCLMB funded program (non-CPA)*
	Communities are safe for children, youth and families	Youth with DJS involvement	*Family Engagement*	*DJS to CCLMB for CCYSB*	*CCLMB funded program (non-CPA)*

Needs Assessment Snapshot:

Carroll County continues to perform well on many indicators related to families, youth and children indicating that services and supports are adequate for the needs of many in our community. Carroll County has high performing schools, the highest graduation rate in the state and a high median income. However, Carroll has regional pockets of poverty, is faced with rural transportation issues, a dangerous opioid crisis and high housing prices. These challenges all impact the lives of those in the Strategic Goal lens. Data drawn from the Needs Assessment does point to several areas of high concern, including how these three "Big Needs" all have an impact on each other. Poverty is a risk factor for poor mental health, and transportation issues often make accessing mental health and substance related disorder treatment difficult. Untreated mental health can lead to difficulties securing or maintaining employment, raising the chances of falling into or remaining in poverty. The interconnectedness of mental health, poverty and substance use cannot be addressed by a single organization alone. The CCLMB is committed to working with collaborative partners, moving towards a true collective impact model to help ensure population level mental and physical health.

Transportation	Regional pockets of poverty and food insecurity	Substance use, mental health and suicide

Disconnected and Homeless Youth:

Employment rates in Carroll County have stagnated for youth 18-24 while those at the state level have improved. Youth unemployment rates are nearly 3 times the overall unemployment rate in the County. Carroll has also seen the attainment of a Bachelor's degree by this cohort stagnating. The numbers of unaccompanied homeless youth have declined in the last 5 years; however, Carroll continues to see about 50 youth 18 – 24 in adult shelters – an unacceptable condition. Without CCLMB's Connecting Youth program there are significant gaps in coordinated services for disconnected and homeless youth.

Array of services and gap for Disconnected and Homeless Youth

Strategy- (*CPA funded FY 18 and FY19)	Youth not in school Not working	Homeless	Agency
Job training	✓	✓	Change, BERC
*On-demand mental health and substance use treatment	Gap without CPA	Gap without CPA	CCYSB
Transportation	Gap without CPA	Gap without CPA	CCYSB, HSP, CTS
Emergency Shelter	N/A	Gap (Unaccompanied Youth Under 18)	HSP
Housing	N/A	✓	HSP, Bureau of Housing
Basic necessities	✓	✓	CCYSB, HSP, Community partners
*Coordinated case management	Gap without CPA	Gap without CPA	CCYSB, HSP
*Barrier identification and resolution planning	Gap without CPA	Gap without CPA	CCYSB
*Support groups for disconnected youth	Gap without CPA	Gap without CPA	CCYSB, HSP

* CPA – Community Partnership Agreement (Annual Funding through Governor's Office of Children)
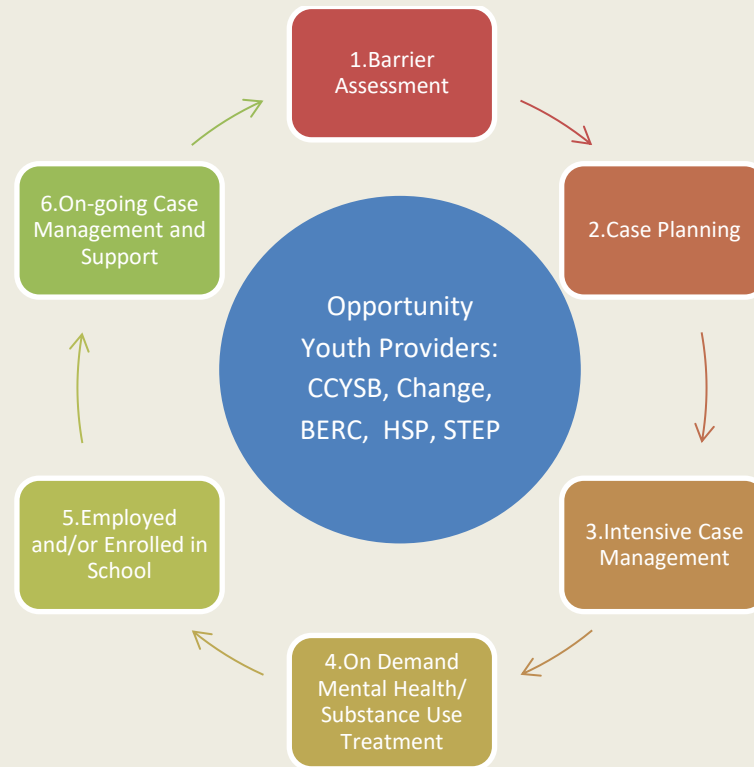
What we know:
Disconnected and homeless youth also present with complex issues and demonstrate a strong need for mental health and/or substance use services. Based on the 94 youth served during the first 18 months of the Connecting Youth Program:

- Westminster (21157) and Taneytown (21787) represent the majority of disconnected/homeless youth currently being served. These are also the areas in the County with the highest ALICE and poverty rates.

- Top barriers as determined by Initial Barrier Screening:
  1. Transportation 90%
  2. Mental health 83%
  3. Homelessness and housing instability 55%
  4. Poverty and difficulty meeting basic needs 53%
  5. Substance related disorder 33%

What is working to connect youth to work and school:

- Coordination of services through engagement managers- including weekly team meeting between agencies
- Demolishing silos
- On-demand mental health and substance use services through CCYSB
- Coordinated case management with 90-day case plan reviews to assess barriers
- Consistent and non-judgmental relationship building with youth is key to maintaining program engagement

The program has enabled 54% of youth served with case management to enroll in classes or secure employment.

The circular process diagram contains:
- Center: Opportunity Youth Providers: CCYSB, Change, BERC, HSP, STEP
- 1. Barrier Assessment
- 2. Case Planning
- 3. Intensive Case Management
- 4. On Demand Mental Health/ Substance Use Treatment
- 5. Employed and/or Enrolled in School
- 6. On-going Case Management and Support

FY 20 Focus:

- Address transportation barriers to Mental Health and Substance related disorder treatment
- Explore prevention strategies in partnership with Carroll County Public School system to identify youth who are at risk of disconnection and begin to provide services prior to exiting the school system
- Offer Customized Employment model for disconnected youth with significant mental health barriers

Families and Children Impacted by Incarceration

Face-to-face visits provide a resiliency factor for children, helping to negate the trauma of having a parent incarcerated. Having a parent incarcerated is listed as an Adverse Childhood Experience due to disruption in the parent/child relationship. Both incarcerated parents and caregivers, through the Family Ties program report positive outcomes for the children who have participated in face-to-face visits. Even with programming in place and with robust support of our Detention Center Partner staff, Carroll still finds there are significant barriers to connections between children and their parents during incarceration, including transportation, stigma and strained family relationships. *In FY 20, the Family Ties program will be paused. The Justice Re-investment Act has significantly lowered both the number of incarcerated individuals and the length of time spent behind bars, resulting in a significant decrease in those eligible for participation in Family Ties.*

In FY 19 and 20, Project Connect will fill this gap by directly supporting caregivers and children, providing connections to the incarcerated parents through letters, phone calls and visits.
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Array of Services and gaps for Children and Families Impacted by Incarceration

Strategy (*CPA funded FY 18 and FY19)	Children	Incarcerated parents	Families and caregivers	Parents on pre-trail supervision	Parents in custody awaiting trial
*Support groups	✓	gap	✓	✓	gap
*Parenting classes	N/A	✓	✓	✓	✓
*Case management	✓	✓	✓	✓	gap
*Face to face visits	✓	✓	✓	gap	gap
Substance use treatment	Referrals If needed	✓	✓	✓	✓
Mental health treatment	✓	✓	✓	✓	✓
Re-entry services	N/A	✓	✓	✓	N/A
Transportation	✓	N/A	✓	N/A	N/A
***Parent reading program*	✓	✓	✓	N/A	✓

Support groups, parenting classes, face to face visits and case management were gaps in services, prior to FY 18 /19CPA.
**New partnership with CCDC and CCPL, no funding required*

What We Know:
Mental health and substance use issues also have a tremendous impact on the county's incarcerated population, and their families. 80% of those who enter the Carroll County Detention Center (CCDC) in a given year self-report substance use issues. Substance use evaluation is available, and some incarcerated individuals are eligible to participate in off-site drug treatment programs. Substance use groups including AA and NA also operate inside the Detention Center. In addition, medical treatment for addiction (methadone, suboxone) will be available to incarcerated individuals in MD, starting in FY 20.

- 71% of those surveyed inside the Detention Center are parents
- 2233 individuals were arrested in 2018, potential number of children impacted=1585
- 1544 were booked into the Carroll County Detention Center
- 80% or 1232 self-report substance use issues (drugs and alcohol)
- Potential # of children impacted by incarceration and substance use= 862
- Average daily count at the CCDC is 181 individuals (84% male 16% female)
- 40% of the population is serving a sentence, the remaining 60% are awaiting trial
- The Justice Reinvestment Act of 2016 has lowered the number of arrests, lowered the number of individuals incarcerated and shortened the amount of time individuals are incarcerated in Carroll County

FY 20 Focus:

- Increase case management to include families with children over age 5, including maintaining services for families, extending beyond the period of incarceration to impact successful re-entry into the community
- Partner with Carroll County Public Schools/State's Attorney Office *Handle with Care Program* to more easily identify children impacted by incarceration, with the goal of linking them to services
- Build community understanding of Adverse Childhood Experiences (ACES) as it related to incarceration in the Law Enforcement community and build on the work being done by the State Attorney's Office, Carroll County Public Schools and Law Enforcement, the local partners in the ***Handle with Care Program.***
- Continue to work with the Carroll County Detention Center and Incarceration workgroup to understand the impact of the Justice Reinvestment Act of 2016 on our local families impacted by incarceration.
- Receive Technical Assistance around a visiting program for incarcerated parents and their children.

Hungry Children

Although Hungry Children are not currently a prioritized population, the CCLMB has stepped up to lead a more coordinated and intentional effort to share resources and strategies to best serve our hungry families. For example, CCLMB's work has facilitated increased coordination between Boys and Girls Club (B& GC) and CCPS to complete Free and Reduced Meal Rate (FaRM) applications and increased involvement of UMD Extension Service with local food pantries.

Since the CCLMB first explored the impact of the 4 strategic populations in 2017, we have uncovered evidence that Hungry Children is a larger problem than initially thought. Even though Carroll's poverty, hunger and food insecurity rates are below the state averages, on-the-ground work reveals that our families who are hungry and food insecure need a high intensity level of community response to feed their families; meaning they are very hungry and very food insecure. Real-time accounts of those serving these populations have seen a shift from food pantries and soup kitchens being a secondary source of supplemental food to now becoming; at times, the only source of food for families.

What we know:
- The FaRM rate at The Boys and Girls Club is double the average rate throughout CCPS
- 55% of children at BGC are from single families, the group most likely to live in poverty in Carroll
- 52% of the children served at BGC are of minority race, groups shown to have higher rates of poverty
- There is a need for more "backpack" or "weekend" food programs for our public school students
- Increase in food distributed by Rescue Mission, through Feeding America, Growth in food pantries in schools, through the Hungry Families Roundtable Collaboration
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FY 20 Focus: The CCLMB will continue to foster collaboration for the move to greater self-sufficiency for families that struggle with hunger and food insecurity.

- Continue to lead efforts to coordinate and build capacity and networks for non-profits and faith based agencies that are responding to hungry families through the Hungry Children Roundtable
- Provide training and coordination for food pantries, in order to maximize client use of food (cooking and nutrition classes and pantry "organization for maximum efficiency) in partnership with the Agricultural Extension Office
- Exploring disparities for FaRM kids for Indicators related to school readiness and success in school.

Array of services and gaps for hungry children and families

Service/Program	Gap?	Agency/Partner
Summer Meals	Yes (limited eligibility areas)	CCPS, non-profits and faith based
Community Meals	Gap (transportation)	Faith-based, non-profits
Means Tested	Yes (families are above the income levels but still in need of food	DSS, CCHD
FARM	Yes (not all eligible families enroll)	CCPS
Food Pantries	Gap (availability of healthy food, transportation)	Non-profits and faith based
Backpack program	Gap (select schools only)	CCPS
After school meals	Gap (no formal program exists)	Boys and Girls Club, CCPS

FY 20 Focus on Carroll County Specific Indicators

Suicide and Self Harm (as referenced in the FY 20 Needs Assessment page 54-55)
The indicators for suicide continue to be disturbingly high than the state, .with Carroll County having the second highest rate of age-adjusted suicide in the state. Suicide is the first leading cause of death for MD children age 10-14 and the second for that age 15-24. CCPS, in partnership with CCYSB, has been collecting data, and serving youth for over 30 years who are identified through their school to have threats of self-injury and suicide. This data has been on an upward negative trend for years. There are limited resources, in place to assist these children and their families, but capacity is needed to serve all youth, through an increase in prevention work, intervention services and community wide advocacy.

What we know:
- The strong partnership that exists between CCYSB and CCPS has been effective in identifying at risk children; however, with the exception of Mental Health First Aid, there are limited community and parent resources, outside of the school setting, for children experiencing suicidal ideation and thoughts of self-injury. Mental Health First Aid is available, for free, to all citizens, parents and professionals through the Carroll County Health Department.
- Carroll County Public Schools and the Carroll County Health Department are also rolling out *Sources of Strength* (SOS) across county middle and high schools. *SOS* is an evidenced-based best practice listed on SAMHSA's online registry of interventions that have demonstrated effectiveness in the prevention or treatment of mental health and substance use disorders, including some interventions that address suicide.
- FY Elementary School Intervention Program- implemented to provide services to elementary school students struggling with challenging behaviors and emotions. These students may have spoken of suicide and or self-harm but do not pose an immediate risk. (CCPS and CCYSB)

FY 20 Focus:
- Funding for a new suicide strategy that builds on the CCPS/CCYSB program which will provide immediate assessment and consultation for youth experiencing suicidal ideation and self-injury. The program will also lead community efforts to raise awareness around this issue.
- Continue to assess behavioral and mental health of school aged population, with a focus on subpopulations (middle school, LGBTQ youth)
- Build system-wide capacity for trauma-informed care through CCLMB sponsored training.
- Implement after school programming in select Middle Schools throughout the county, using Sources of Strength framework

Opioid Crisis (data referenced in FY 20 Needs Assessment page 55-56.)

What we know:

- Deaths from opioid overdoses in Carroll increased from 44 in 2016 to 71 in 2018.
- Fewer individuals are dying from heroin alone, the increase in deaths can be attributed to the rise in the drug containing Fentanyl

Data collection around overdoses remains a complicated problem, making the true extent of the problem difficult to capture. The Senior Opioid Policy Workgroup, of which the CCLMB is a member, is working to address this issue.

FY 20 Focus:

- Obtain accurate and comprehensive data of opioid overdoses (identified need through the Senior Policy Opioid Workgroup)
- Implement after school programming in select Middle Schools throughout the county, using Sources of Strength framework
- Provide on-going training regarding intergenerational substance use in families
- Collaborate with county agencies to secure the influx of state and federal funds targeted at the Opioid crisis, using county specific, data driven decision making and evidenced-based programming

Array of services and gaps for substance use treatment in Carroll County

	In-patient	Peer Support	TCM	Out-patient	PHP	Recovery houses	Substance Use groups	Detox	24/7 crisis support & medical detox
Youth (under 18)	gap	gap	Potomac (MA only)	CHC	CHC	gap	CCYSB	Access Carroll	Gap
Adults	RSS	CCHD	Potomac (MA only)	CHC	CHC	Located in Westminster and Taneytown	NA, Sober Truth	Access Carroll	New program FY20-21

Subpopulation Disparities

A deeper dive into the subpopulation data reveals large disparities when race, sexual orientation and income are considered. African Americans, Hispanics, LBG and FaRM youth have significantly worse outcomes than the overall population for a myriad of indicators including: birth to adolescents, low birth rate, kindergarten readiness, ELA and math assessments, truancy, and graduation rates. These subpopulations will be a focus of CCLMB meetings through FY20.

Racial Equity and Cultural Competency

Carroll County, through the CCLMB and the Continuum of Care, will begin the "groundwork" for bringing a greater understanding of racial equity and cultural competency to our community. Work will be focused on individual, agency and community understanding of the impact of inequity, systemic racism and implicit bias.

Issues Shared Across the Nation

Affordable housing, the opioid crisis and transportation continue to surface as significant needs in Carroll County, mirroring national trends. These issues are larger than the CCLMB can address alone; however, the CCLMB will remain a partner in the on-going work of improving transportation as it impacts Disconnected Youth and those impacted by incarceration. The CCLMB will also play a larger role in planning and program implementation as it relates to the opioid crisis; understand that poverty, mental health and transportation are interconnected. The CCLMB is successfully engaging new partners and stakeholders, and continues to look for opportunities to participate in and lead the extensive collaborative work our agencies and community service providers carry out on behalf of our children, youth and families.

The Role of Collective Impact-

A high level of collaboration is evident across Carroll County agencies working to improve the lives of its most vulnerable citizens. Collaboration was named the top strength of the human services system according to the most recent community survey. However, the CCLMB recognizes that collaboration is only one piece of Collective Impact. In FY 20, the CCLMB will embark on more intentional impact by following the recognized Principles of Practice:

- focus on equity,
- are inclusive of community members - adding youth voice to CCLMB and Connecting Youth Coordinating Council
- share and cultivate community wide data- begin data sharing with Health Dept., Use of Results Based Accountability
- focus on system strategies that are customized for Carroll County population level change, data driven local decisions

Collective Impact

Common Agenda- a shared vision for change, including a common understanding of the problem

Shared Measurement- collecting data and measuring results consistently across participants

Mutually reinforcing activities-organization and agency activities are differentiated while still being coordinated

Continuous communication- consistent and open communication across participants to assure mutual objectives and motivation

Backbone support- dedicated staff to serve as backbone for entire initiative and to coordinate organization and agencies