Guilford County Health & Human Services

From Consolidation to Integration

Board of County Commissioners Work Session
June 4, 2026

Objectives

- Review history of the consolidated human services agency model in NC and Guilford County.
- Discuss current activities across Guilford's Department of Health and Human Services (HHS) to realize consolidation benefits and *move from consolidation to integration*.
- Brief the BOCC of future consolidation opportunities to maximize benefits for both residents and our HHS workforce.
- Request Board action to change HHS's name from "Department" to "Agency".

History of HHS Consolidation in NC

In 2012, the North Carolina General Assembly enacted legislation (SL2012-126) that provided counties with options for how they can organize and govern local human services agencies. As of 2012, all counties are now allowed:

- to create consolidated human services agencies that are either governed by an appointed board or by the board of county commissioners.

- to keep separate county public health and social services departments but abolish their appointed governing boards and have the elected board of county commissioners assume that role.

Resource: North Carolina Human Services Hub (A resource of the UNC School of Social Work)

History of HHS Consolidation in NC

In 2014, Guilford County consolidated under <u>Option D</u>, creating:

- *the Department of Health & Human Services* and
- the *Health and Human Services Advisory Committee (HHSAC).*

Under Option D, the BOCC assumed the responsibilities of both the Public Health and Social Services Boards.

Options For Human Services Agency Organization And Governance

A. Separate Agencies with Appointed Governing Boards

Organization. Human services agencies (such as a local health department and county department of social services) remain separate.	**Governance.** Local appointed governing boards oversee the county's local human services agencies (i.e. local board of health and county board of social services).

B. Separate Agencies with Partial or Full BOCC Governance

Organization. Human services agencies (such as a local health department and county department of social services) remain separate.	**Governance.** The BOCC directly assumes the powers and duties of one or more of the governing boards responsible for overseeing a local human services agency (i.e., local board of health and/or county board of social services).[a]

C. CHSA with Appointed CHS Governing Board

Organization. The BOCC creates a new CHSA by combining two or more human services functions, departments, or agencies.	**Governance.** The BOCC appoints a new consolidated human services ("CHS") board that serves as the CHSA's governing board.

D. CHSA with BOCC Governance

Organization. The BOCC creates a new CHSA by combining two or more human services functions, departments, or agencies.	**Governance.** The BOCC becomes the CHSA's governing board when it directly assumes the powers and duties of the CHS board.

a. In some counties, the BOCC governs all human services agencies, while in others, the BOCC has only assumed governance of one agency while leaving another under the control of an appointed governing board.

Resource: North Carolina Human Services Hub (A resource of the UNC School of Social Work)

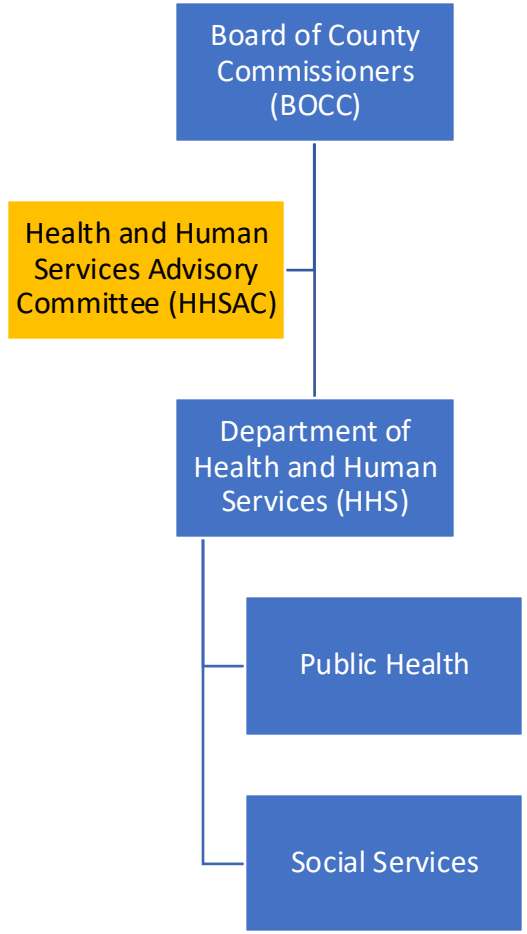
HHS Advisory Committee (HHSAC)

HHSAC serves as an **advisory body for HHS** and its work includes:

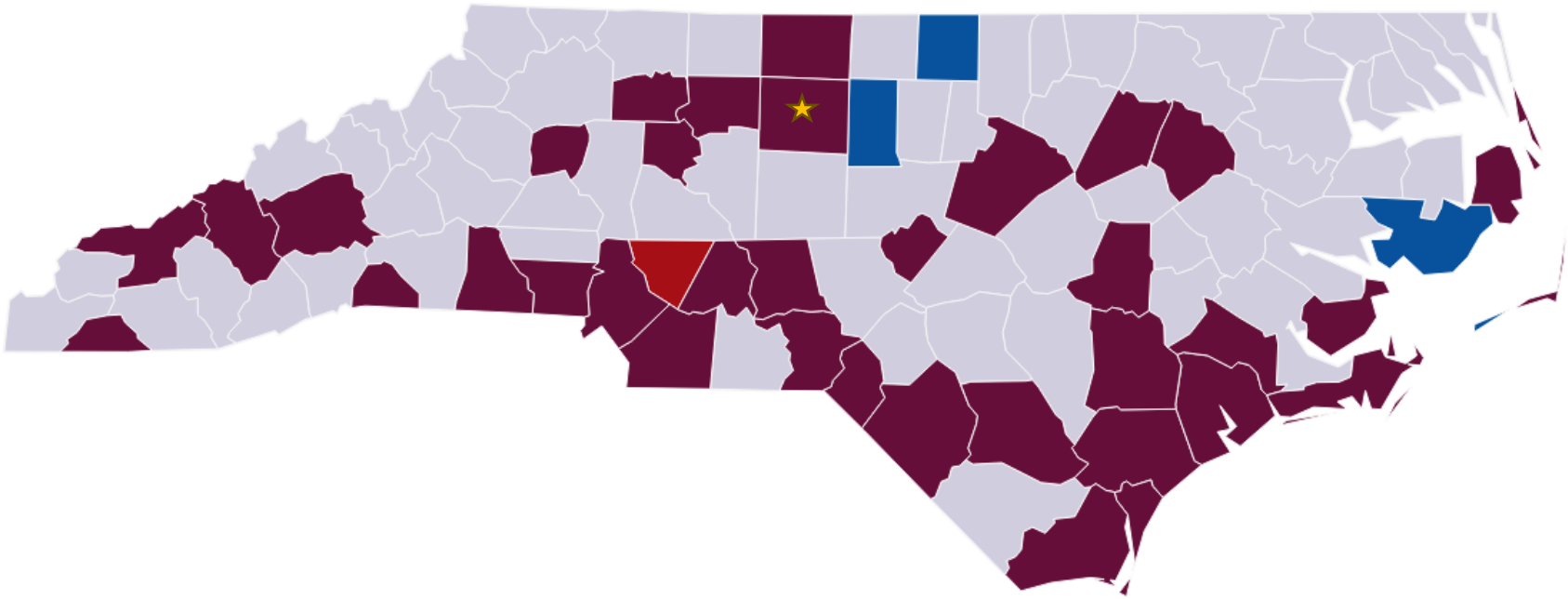
- Guiding policies and programs to protect and promote HHS service needs in the community
- Advocating and advising on critical issues in HHS and overall community well-being
- Assisting to develop long-term goals and plans to address community needs and enhance services
- Providing recommendations on HHS and community well-being topics to County Commissioners

HHSAC is comprised of **14 members appointed by the Board of Commissioners**.

- 1 Sitting Commissioner
- 7 Licensed professionals from specific fields *(physician, dentist, optometrist, veterinarian, registered nurse, pharmacist, and professional engineer)*
- 3 Licensed Professional Positions from other fields *(preferred expertise in education, social work, behavioral health, or other human services areas)*
- 3 at large members *(1 each from Greensboro, High Point and unincorporated Guilford Co.)*
- All members must be County residents.



Counties with Consolidated Human Services Agencies including Social Services and Public Health



A total of 36 counties, **including Guilford,** have consolidated human services agencies that include both Public Health and Social Services. Cabarrus County has a consolidated agency with a public hospital authority.

Source: North Carolina Human Services Hub (A resource of the UNC School of Social Work)

Health and Human Services in Guilford County

History of Consolidation in Guilford County

MAY 2014	Guilford County BOC consolidated Social Services and Public Health into DHHS. The BOC assumed the role of prior governing boards, HHSAC created.
NOV 2015	Initial Consolidation Report focused on opportunities, priorities, and strategic direction.
JUL-DEC 2022	BOC approved a comprehensive Consolidation Study to inform and advance our HHS priorities.
APR - OCT 2023	CCR Consultants engaged with HHS staff and stakeholders through interviews and focus groups.
FEB 2024	CCR provided a comprehensive report, including core values and specific measures to operationalize them.
AUG 2024	HHS Practice & Operational (P&O) Framework developed, aligned with County-wide strategic efforts.
APR 2025	Leadership Launch Event - DSS & PH leadership collaboratively refined the Framework.
OCT 2025	Practice & Operational Framework Launch

HHS Practice Standards

Guilford County HHS:

- Promotes and **delivers whole person, family wellness across ages and abilities** in a non-judgmental manner that addresses implicit historical bias and builds resiliency.
- Administers **programs and services with a Guilford County centric focus** by adopting processes and delivery models that foster and sustain equity, access, and diversity throughout the services spectrum.
- Assures **low barrier, "no wrong door" access** to programs and services that includes warm, seamless handoffs and referrals when required and limits the need for anyone being served to tell their story more than once.
- Fosters **employee health**, including mental health, **and wellness**: "we can't do well for others if we're not doing well for ourselves."

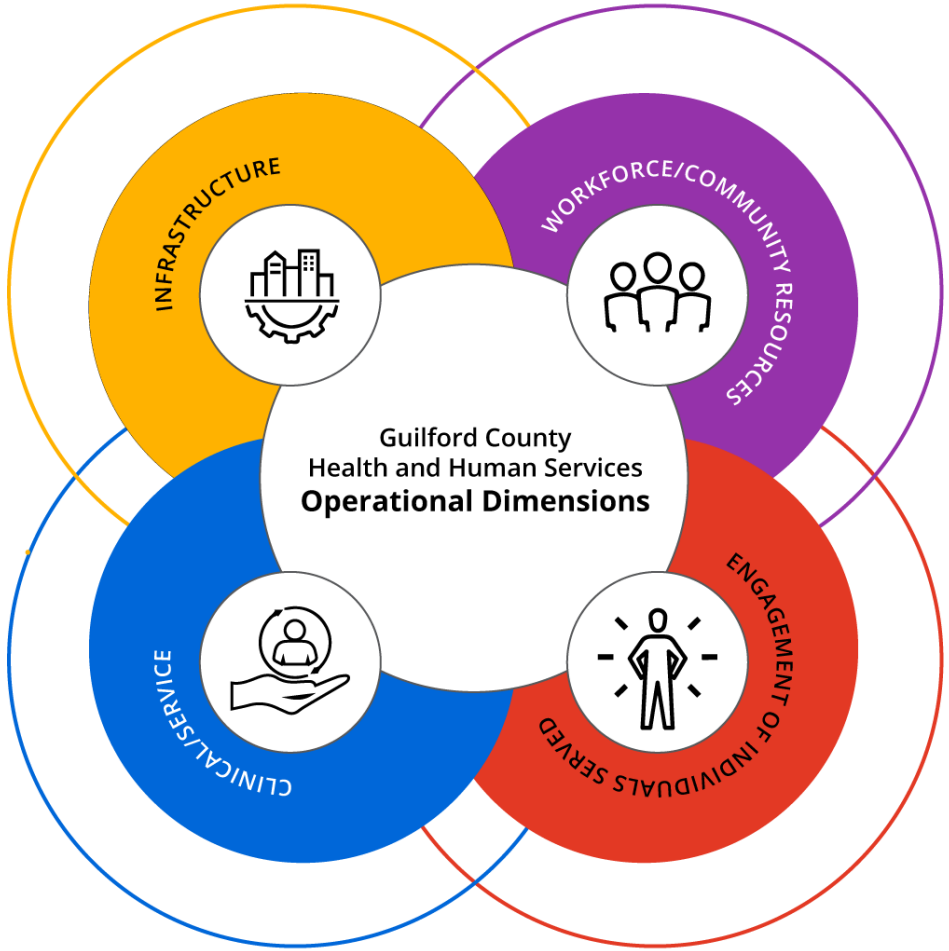
Key Themes/Areas of Opportunity Identified in our Consolidation Study Reports

- Using Teams for Integration
- Information Sharing, Referrals, and Warm Hand-Offs
- Staff Awareness and Orientation
- Revisiting the Reception and Intake Process
- Considering Facility Adequacy and Location
- HHS Governance and Organizational Capacity

CCR Report: Guilford County HHS: A Roadmap to Strategic Planning (Feb 2024)

Consolidation is good…Integration is better!

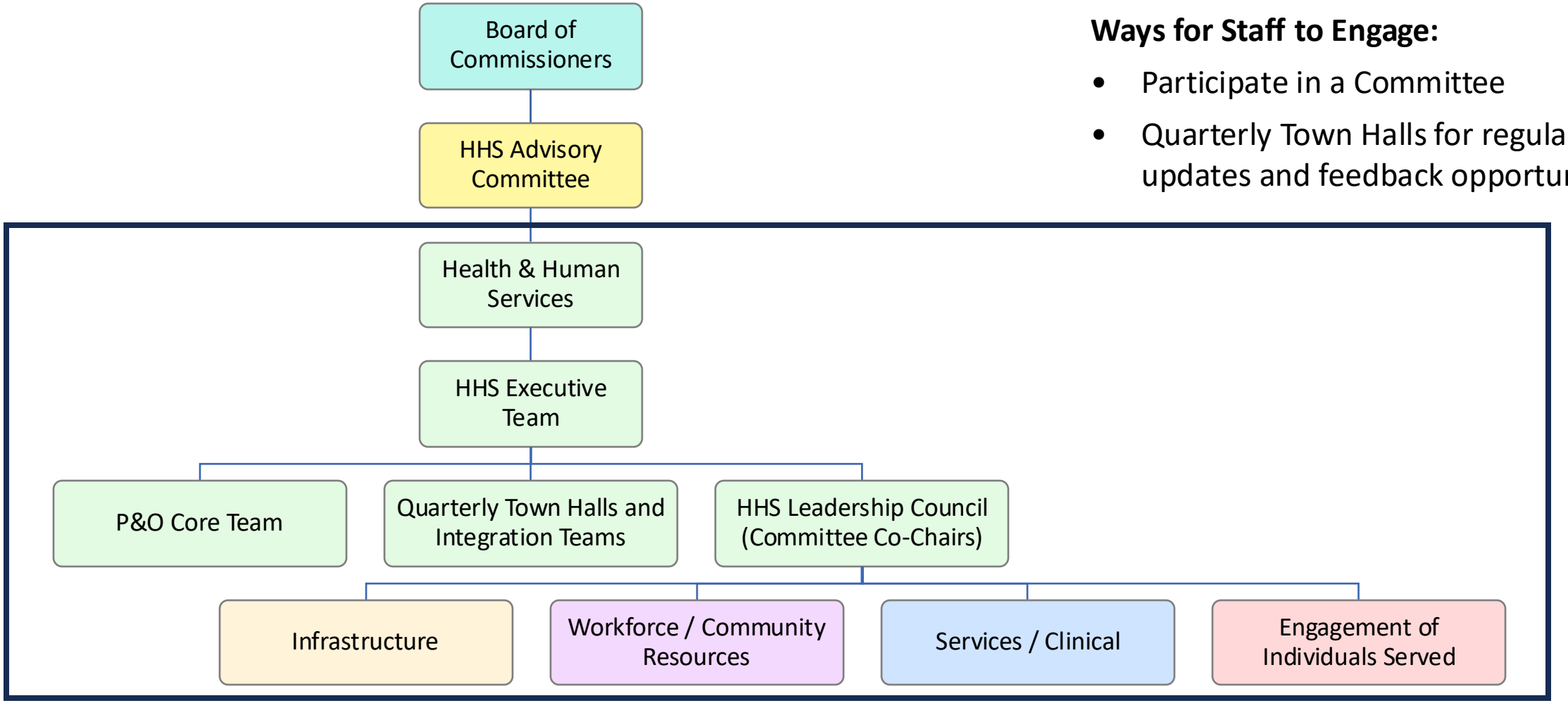
Practice & Operational Framework



The HHS P&O Framework is our guide for the next five years as we move from consolidation to integration.

- It aligns our vision with action – defining what we'll focus on and how we'll get there.
- It is built around four "Operational Dimensions":
  - Infrastructure
  - Workforce / Community Resources
  - Services / Clinical
  - Engagement of Individuals Served

Staff Practice & Operational Governance



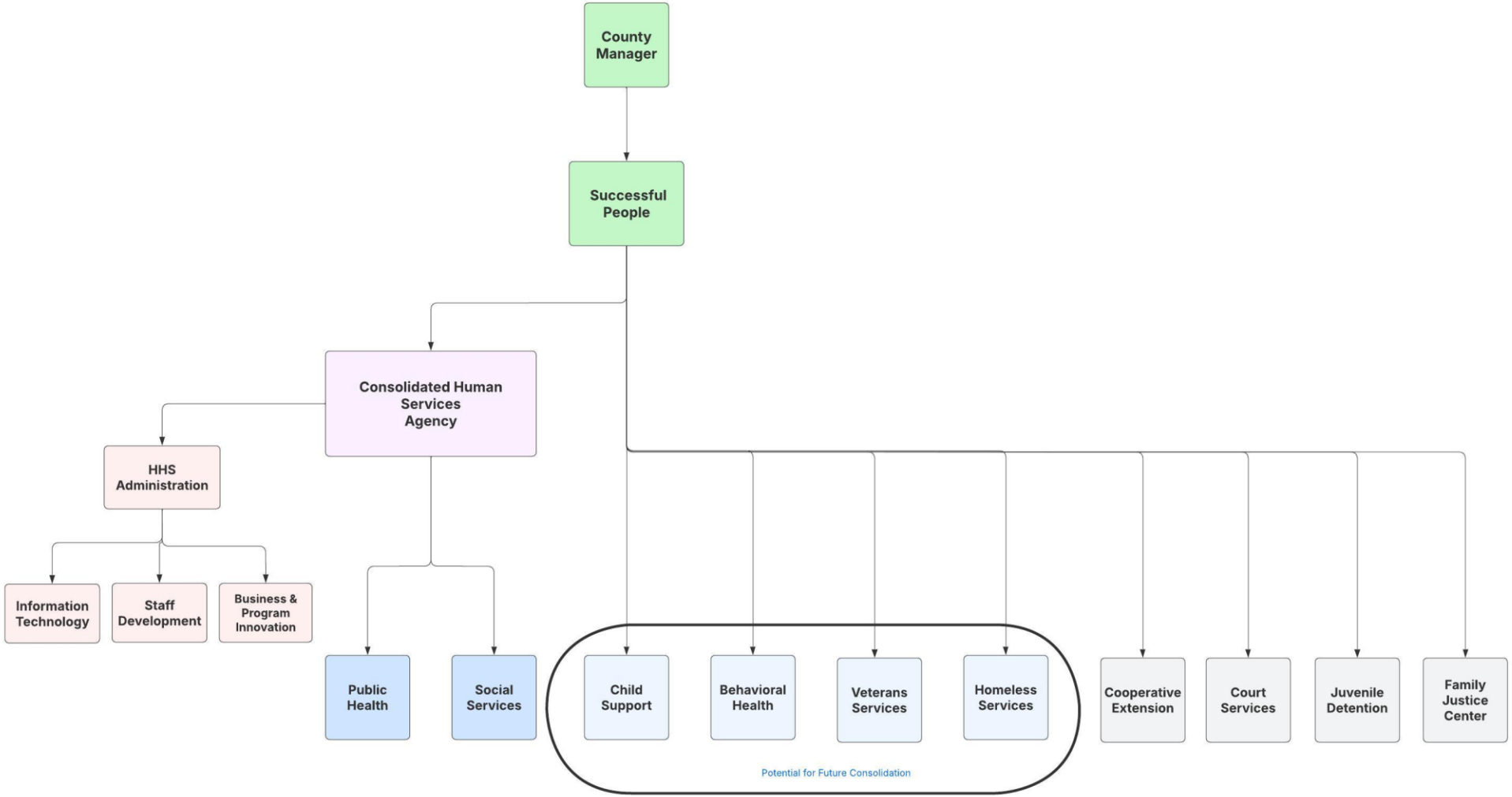
Ways for Staff to Engage:

- Participate in a Committee
- Quarterly Town Halls for regular updates and feedback opportunities

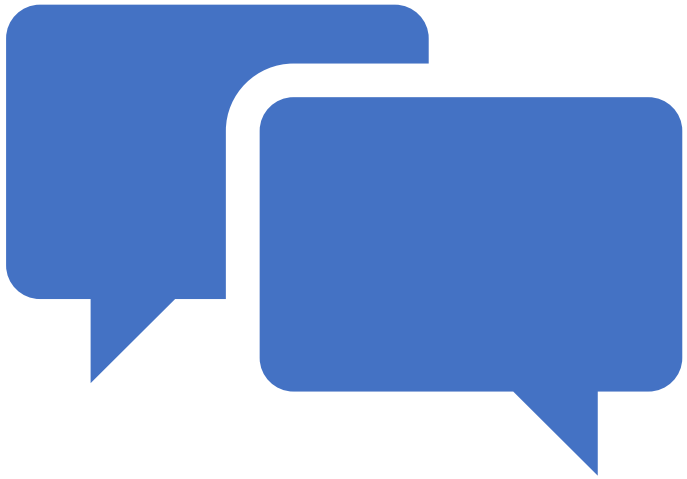
Notable Ideas in Development Now

- **Evaluating our infrastructure and client experiences in it** including ways to improve our space through service navigation, client intake, and the overall lobby experience.
- **Developing a unified HHS supervisor training program** including initial orientation and ongoing support and skill building.
- **Hosting an employee resource fair** to bring staff together to build relationships and increase knowledge of programs agency-wide.
- **Learning from our residents' lived experiences** using our services, living in our communities, and interacting with us.

Future Consolidation Opportunities



Q&A



Board Action Requested

Direct staff to develop a resolution to rename the “Department of Health & Human Services” to the “Health & Human Services Agency” to be adopted with the FY27 budget effective on July 1, 2026.