



MECKLENBURG COUNTY
North Carolina

Charting the Path Forward: YFS Practice Improvement Strategy

June 2, 2026

Agenda

- **2026 Overview and Timeline**
- **System Strengths**
- **System Opportunities**
- **Solutions and Action Steps**

YFS 2026 Overview

- **Initiated Child Safety and Operational Stability Plan**
- **Updated Standard Operating Procedures and Internal Program Improvement Plan**
- **Initiated Case Review Process with Allies4Outcomes**
- **Provided Executive Coaches for CFAS/YFS Leaders**
- **Coordinated Comprehensive Audit Plan for CFAS**
- **Convened Weekly Executive Team Meetings with CFAS leadership**
- **Increased Resources within County Manager's Budget supported by Board of County Commissioners**

Timeline of Events

<i>January 2026</i>	<i>February 2026</i>	<i>March 2026</i>
<ul style="list-style-type: none">➤ Debrief meeting with staff and leadership➤ Consulted with Human Resources and initiated Investigation➤ DHHS case notification of record review➤ Provided case record to DHHS➤ Participated in monthly Regional Child Welfare Consultant meeting	<ul style="list-style-type: none">➤ DHHS entrance meeting➤ Participated in monthly Regional Child Welfare Consultant meeting	<ul style="list-style-type: none">➤ Participated in monthly Regional Child Welfare Consultant Meeting➤ Completed Internal Program Review➤ Meeting with Representative Chesser

Timeline of Events

<i>April 2026</i>	<i>May 2026</i>
<ul style="list-style-type: none">➤ Participated in monthly Regional Child Welfare Consultant Meeting➤ Updated Allies4Outcomes Scope of Work for longer term engagement	<ul style="list-style-type: none">➤ DHHS Child Welfare Program Review Debrief Meeting with CFAS➤ Received DHHS Letter of Findings & Corrective Action requirement➤ DHHS Debrief Meeting with executive county leadership➤ Received House Oversight Committee request to testify on June 4, 2026

96%

Intake case decisions were appropriately screened according to policy.

91%

Screened-in Intakes were assigned to the most appropriate track.

82%

Screened-in Intakes were assigned to the appropriate response time to the allegation characteristics.

63%

Notification letters were sent within 5 days of the CPS Intake.

Case Review Results

60% DHHS Benchmark for Successful Compliance

**STRENGTHS in
INTAKE**

64%

Cases where reports contained allegations that may have met the criminal definition of child abuse, verbal and written notifications to the District Attorney and Law Enforcement were made.

***District Attorney and Law Enforcement have accepted written notification through a proxy box as adequate.*

84%

Safety Assessments had appropriate outcomes.

77%

Information documented on Safety Assessments correlated with information obtained from the interview and observations.

77%

Ongoing face-to-face contacts after initiation were made with all of the children in the home at least monthly.

100%

Contacts were made at least weekly with temporary safety providers.

Case Review Results

60% DHHS Benchmark for Successful Compliance

***STRENGTHS in
ASSESSMENTS /
INVESTIGATIONS***

73%

Collateral contacts identified in the Intake report were made.

93%

Collateral contacts identified by the parent/caretakers were made.

77%

Collateral contacts of other persons or agencies known to be currently involved with the family or have knowledge of the family were made.

94%

At least two (2) collateral contacts were made during the CPS Assessment.

Case Review Results

60% DHHS Benchmark for Successful Compliance

*STRENGTHS in
ASSESSMENTS /
INVESTIGATIONS (cont.)*

64%

Cases contained supervisory consultation during the CPS Assessment at a minimum of every other week and when there was a change in circumstances that impacted safety.

80%

Cases contained documentation that reflect an assessment of well-being needs for the alleged children.

71%

Cases contained documentation that reflect referrals were made for any identified well-being issues for the alleged children.

Case Review Results

60% DHHS Benchmark for Successful Compliance

*ADDITIONAL
CASE RELATED
STRENGTHS*

72%

Cases contained thorough and accurate completion of the Family Risk Assessment of Abuse/Neglect prior to or at the time of case decision.

77%

Cases contained appropriate case decisions and were supported by documented information.

86%

Cases contained thorough and accurate completion of Family Assessments of Strengths and Needs.

Case Review Results

60% DHHS Benchmark for Successful Compliance

***ADDITIONAL
CASE RELATED
STRENGTHS (CONT.)***

A decorative icon consisting of a grey, wavy-edged banner with the text '90%' written in blue.

Cases identified child characteristics as a need if the case moved to In-Home with a temporary safety provider or moved to Permanency Planning.

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Cases included a clear rationale as to why the children met the need for ongoing services based on imminent risk of foster care.

Case Review Results

60% DHHS Benchmark for Successful Compliance

***ADDITIONAL
CASE RELATED
STRENGTHS (CONT.)***

52%

Intake workers did not ask sufficient questions to fully explore all alleged maltreatments.

37%

Reporter letters not sent within 5 days of the CPS intake.

36%

When reports contained allegations that may have met the criminal definition of child abuse, case files did not include verbal and written notifications to the DA and Law Enforcement

Practice Assessment and Case Review Results

Opportunities in Intake

48%

Face-to-face contacts with **Children** occurred after initiation with alleged child victim

52%

Face-to-face contacts with **Mothers** occurred

34%

Face-to-face contacts with **Fathers** occurred

53%

Face-to-face contacts with **Non-resident Parents** occurred

Practice Assessment and Case Review Results

*Opportunities in
Assessment/Investigations*

64%

Cases contained supervisory oversight at a minimum of every other week

58%

Cases did not contain all required components of quality oversight

45%

Cases did not document or show efforts to conduct separate interviews with children regarding safety.

43%

Safety assessments had safety plans that were adequate to ensure safety

Practice Assessment and Case Review Results

Opportunities in Assessment/Investigations (Cont.)

Action Steps:

January - March 2026

Completed random reviews and monthly audits of Intake screen out reports and notifications.

87.7% of cases were appropriately screened

Updated internal research expectations to include full history notation, all reported allegations, screening decisions and all prior screen-outs.

Updated Intake staff expectations to contact police in KBCOPS (Knowledge Based Community Oriented Policing) reports and online reporters for clarification when needed.

Created a PathNC dashboard to monitor compliance.

Additional Action Steps:

January - March 2026

Safety Assessments reviewed and signed by supervisors for second-level review within 24hrs.

12 of 20 new positions will be dedicated to Investigations/Assessments in an attempt to meet DHHS Investigation compliance standards of 6 cases per worker.

Realigned staff and supervisors to balance caseloads, support productivity, and stabilize teams while filling critical Investigations vacancies.

Implemented enhanced third-level reviews at intake for high acuity cases including Assistant Director and Director involvement.

Caseload average was 14 cases

Additional Action Steps:

January - March 2026 (cont.)

Access to Records:

Staff to contact relevant professionals directly for necessary information if liaisons or records are unavailable.

Third-Level Review:

Senior Social Services Managers to conduct a review for Assessment/Investigations cases with 3+ prior investigations or Family In-Home cases within 2 years before closure.

Fourth-Level Review:

Assistant Division Director to review any Regional Abuse and Medical Specialist (RAMS), fatality, or critical incident cases before substantiation and closure.

Supervisory Accountability:

Explicit expectations established regarding supervisor's ensuring required practice/efforts, documentation, and record uploads before case closure/transfer.

Action Steps:

April - May 2026

Requested training for all Intake staff and supervisors regarding probing questions & expectations to fully explore all alleged maltreatment.

CFAS CQI and DHHS teams to collaboratively complete random samples to assess progress quarterly.

YFS leadership is assessing options for notification to the District Attorney and Law Enforcement.

Current notification practice is to email their proxy boxes.

Action Steps:

April - May 2026 (cont.)

Safety Assessments are now staffed with supervisors before implementation and completion with families.

Requested DHHS provide more in-depth training on safety assessments for staff and supervisors.

Implemented a documentation template for PathNC to ensure complete documentation for every record.

Elevated a request to DHHS to provide accurate reporting in PathNC regarding contacts.

Future Action Steps:

Beginning June 2026

In collaboration with YFS, Allies4Outcomes will provide:

**Experienced Child Welfare
Staff (2 supervisors & 10
workers) working alongside
YFS staff and supervisors**

**Supervisory Oversight,
Coaching and Technical
Assistance for Practice
Improvements & Capacity
Building**

**Intentional Workforce
Support through
Resiliency Group Sessions**

**Fiscal
Capacity Building**



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