Governor’s Advisory Committee on Performance Management
September 30, 2022
10:00 a.m. – 12:00 p.m.

Location:
Webex

Meeting Link: Click here
Dial-in Number: (415) 655-0003
Meeting Number: 2420 213 0090

Meeting Agenda

<table>
<thead>
<tr>
<th>Item</th>
<th>Speaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Call to Order and Opening Remarks</td>
<td>Dr. David Ammons</td>
</tr>
<tr>
<td>B. Results First – Adult Mental Health</td>
<td>Carrie Hollis, NC Office of State Budget and Management</td>
</tr>
<tr>
<td>C. Results First – Juvenile Justice</td>
<td>Cindy Porterfield, Division of Juvenile Justice and Delinquency Prevention</td>
</tr>
<tr>
<td>D. Updates on Performance Management</td>
<td>Committee Members</td>
</tr>
</tbody>
</table>
Minutes

- Call to Order and Opening Remarks – Vice Chairman Dr. Ammons begins the meeting.
  - Vice Chairman made general announcements to the Committee, including:
    - Retirement of Chairman Perusse, effective November 1, 2022, and the announcement of the new Budget Director and Committee Chairwoman, Kristin Walker.
    - Recognition of David Smith, for his 50 years of service to the state with the Department of Agricultural and Consumer Services.

- Results First – Adult Mental Health
  - Carrie Hollis, Principal Program Analyst, provided an overview of the Results First Initiative, which includes program inventories, evidence reviews, and benefit-cost analyses. She explained how findings could inform decisions in North Carolina and 26 other states that have participated in the Results First Initiative.
  - Carrie Hollis then described the project completed with the Adult Mental Health Division (AMH) within the Division of Mental Health, Developmental Disabilities and Substance Abuse Services at the NC Department of Health and Human Services. The project focused on 25 programs targeting adults with mental health and substance use disorders. The goal of these programs is to reduce both the onset and severity of mental health conditions.
  - OSBM and AMH found that ten of the 25 programs are proven to improve at least one outcome of interest. The team also identified two programs as promising but needing more research to validate their effectiveness. OSBM and AMH then compared the benefits and costs for five programs, identifying three as both proven and cost-effective. Those three programs are:
    - Individual Placement and Support;
    - Peer Support Services; and,
    - Resource Intensive Comprehensive Case Management.
  - Dr. Ammons asked about how these findings influence agency operations. The project team’s recommendations encourage the expansion of cost-effective and proven programs and shared that the project team hopes that their work will inform decisions and identify research gaps, leading to investment in beneficial programs and new program evaluations.
  - More information about the NC Results First Adult Mental Health project can be found here.

- Results First – Juvenile Justice
  - Cindy Porterfield, Director of Juvenile Community Programs for the Division of Juvenile Justice (DJJ) at the NC Department of Public Safety, outlined the division’s comprehensive strategy to provide appropriate and effective interventions to youth to disrupt the cycle of recidivism and maximize benefits to victims, the justice system, juveniles, and families. She then shared the project focus: statewide contract programs that targeted adjudicated juveniles with a high-risk of reoffending.
  - First, Cindy Porterfield established the baseline rate of recidivism for youth who do not receive program intervention: 55% of high-risk juveniles recidivate within five years. The average cost of a recidivating event in North Carolina is $120,000.
  - The inventory and evidence review found three programs as proven to reduce recidivism. The project team found that all has substantial returns on investment of more than $5 per dollar
spent in at least one population served. Functional Family Therapy (FFT), when delivered to youth re-entering communities on post-release supervision, has a return on investment of $9.44 per dollar spent. Meanwhile, FFT delivered to court-involved youth, while still effective at reducing recidivism, only returns $0.97 per dollar spent. As a result of this work, DPS aims to expand the use of FFT with post-release supervision youth, which may include seeking additional funding to increase overall program capacity.

- Dr. Ammons asked if all juvenile offenders could hypothetically participate in one of DJJ’s programs. Cindy Porterfield noted that DJJ has 22 different program types for juveniles and works to match them to the best intervention. However, sometimes programs cannot fully serve juveniles because of a lack of capacity or a juveniles’ behavior. Carrie Hollis added that the comparison group was juveniles who would be eligible for the services but had not participated. She also shared that one of the most helpful findings was that, by preventing a recidivating event, the state could observe significant cost savings and keeps an individual from moving further into the juvenile or adult criminal justice system.

- More information about the NC Results First Juvenile Justice project can be found [here](#).

### Updates on Performance Management

- Dr. Ammons invited Committee members to share updates from their organizations on performance management and evidence-based policy work.
- David Smith noted that the NC State Fair starts soon and invited Committee members and others on the call to attend.
- OSBM highlighted operational excellence, including performance management and evidence-based policymaking efforts, as a previous priority in the Governor’s Recommended Budget. After describing potential proposals, OSBM shared that operational excellence would be a topic for discussion at the next meeting. OSBM indicated Committee members should brainstorm ideas and initiatives related to operational excellence and prepare to discuss them.