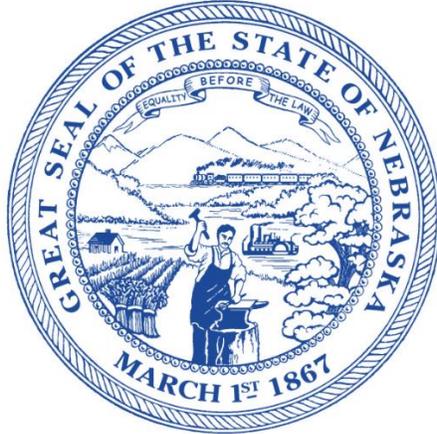


The Nebraska Foster Care Review Office Quarterly Report



Submitted pursuant to Neb. Rev. Stat. §43-1303(4)

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Table of Contents

| | |
|---|----|
| Executive Summary | 3 |
| Special Section: Update on FCRO Annual Report Recommendations | 6 |
| All children in out-of-home or trial home visit placements | 12 |
| Average daily population of DHHS/CFS involved children | 13 |
| Children solely involved with DHHS/CFS, Point-in-time view | 16 |
| Average daily population of Youth at the Youth Rehabilitation and Treatment Centers (YRTCs) | 22 |
| Youth at YRTCs, Point-in-time view | 23 |
| Average daily population of Probation supervised youth | 25 |
| Youth solely supervised by Probation, Point-in-time view | 27 |
| Youth with both DHHS/CFS and Probation involvement, Point-in-time view | 32 |
| Appendix A: Definitions | 37 |
| Appendix B: Background on the FCRO..... | 38 |
| Appendix C: Response from the Department of Health and Human Services | 40 |
| Appendix D: Response from the Office of Probation Administration | 45 |
| Appendix E: Recommendations from Sept. 2018 Annual Report..... | 47 |
| FCRO contact information | 50 |

Executive Summary

The Foster Care Review Office (FCRO) provides Quarterly Reports to inform the Nebraska Legislature, child welfare system stakeholders, juvenile justice system stakeholders, other policy makers, and the public on identified conditions and outcomes for Nebraska's children in out-of-home care [aka foster care] as defined by statute, as well as to recommend needed changes as required.¹

We listed several major data driven recommendations to stakeholders in our September 2018 Annual Report,² as in all such reports. In this Quarterly update, we offered the relevant stakeholders an opportunity to respond to the recommendations; their responses and relevant updates from the FCRO constitute the Special Section of this report.

The following are some important data and findings described in this report.

Special Update on Annual Report Recommendations

The Department of Health and Human Services Child and Family Services Division (DHHS/CFS) provided a detailed response to the FCRO recommendations specific to their agency.³ The response highlights the collaborations between DHHS/CFS and other DHHS divisions, the Department of Behavioral Health and the Department of Developmental Disabilities and the collaboration between DHHS/CFS and the Juvenile Division of the Administrative Office of Courts and Probation. The DHHS/CFS response also includes the implementation of the Family First Prevention Act, the work done to recruit and maintain foster homes, and the implementation of Safety Organized Practice. PromiseShip, the private contractor responsible for case management in the Eastern Service Area, deferred responses to DHHS/CFS.

The Juvenile Division of the Administrative Office of Courts and Probation (Probation) provided a letter in response to the FCRO recommendations.⁴ The letter references several web addresses on the Supreme Court website containing information relevant to the FCRO recommendations.

Licensed vs. Approved Foster Homes

Thanks to the statute change last legislative session, the FCRO is now able to provide updated information regarding the placement licensing information for children in relative and kinship placements. Only **3.9% of children in kinship placements** are in licensed placements, and only **23.0% of children in relative placements** are in licensed

¹ See Appendix B for more information about the FCRO.

² See Appendix E for the complete list of recommendations from the September 2018 Annual Report.

³ See Appendix C for the complete letter.

⁴ See Appendix D for the complete letter.

placements. In order to receive Federal Title IV-E funds, eligible children must reside in a licensed placement.

Declining numbers of state wards in out-of-home or trial home visit placements

As first reported in the September FCRO Annual Report, the rapid decline in the number of children out-of-home has continued into the first quarter of the 2018-19 Fiscal Year. On average, **there were 16.4% fewer children in out-of-home care in September 2018 compared to the same time last year.** The decline has been most significant for the Central Service Area (-20.9%), but even the area with the smallest population change, the Western Service Area, decreased by **14.4%**. As we stated in the 2018 Annual Report in September:

For several years, the FCRO has recommended that child welfare stakeholders collaborate to innovate system improvements that leave more children safely in their homes while ensuring that those children whose safety cannot be assured are placed in temporary foster care. At the current time, however, we are not able to state confidently that the decrease in the number of children in out-of-home care is a reflection of an improved system.

An analysis of entries and exits from out-of-home care indicates that the decrease in the number of state wards is due to fewer children entering care. The patterns of children exiting care have remained relatively stable over the last three years.

Other key findings from this Quarterly Report include:

- When comparing the number of children in out-of-home care and trial home visit to the number of children in the population for the county, **the counties with the highest rates of children in out-of-home or trial home visit placement are the rural counties of Garden, Harlan, Wheeler, Pawnee, Deuel, Furnas, Lincoln, Boyd, Keith, and Madison.**
- Minority youth continue to be overrepresented in the child welfare and juvenile justice systems.
- DHHS/CFS wards continue to be placed in the least restrictive, most family like settings at very high rates (**96.1%**). The majority of those placed at congregate care facilities are placed in Nebraska (**89 of 97**).
- **Over 25%** of the children in the Central, Eastern, Northern, and Southeast Service Areas have had more than 4 workers since the most recent removal.
- **27.5%** of DHHS/CFS wards have had more than four placement moves, including **142** children under age 6.
- The percentage of children with multiple removals from the home has decreased slightly over the last 18 months from a high of 24% to **22.5%**. Despite the

improvement, **the State must do more to address why more than 1 in 5 children currently in the system had a prior removal.**

- The average daily population of girls placed at the Geneva YRTC has increased from **23 in September 2017 to 27 in September 2018**. In that same period, the average number of boys has decreased **13% from 92 to 80**.
- The average daily population of Probation supervised youth in out-of-home placement has decreased by **14.3%** from September 2017 to September 2018.
- When congregate care is needed, Probation is utilizing in-state placements more frequently. **The majority, 89.2%, of youth in congregate care were placed in Nebraska**, compared to 74.6% at the end of 2017, and 85.3% at the end of the 2017-18 fiscal year. A similar increase in youth placed in state occurred for dually-involved youth (**80.3%**, an increase from 75.4% in March 2018).
- Over the last year, there has been an increase in the proportion of dually-involved youth who are male. Currently **72.5%** of the dually involved population is male, compared to 63.1% in December 2017, 66.7% in March 2018, and 72.3% in June 2018.

Recommendations

The FCRO will continue to work with all stakeholders to pursue the recommendations in the September 2018 FCRO Annual Report, found in Appendix E of this report.

Special Update on September 2018 Annual Report Recommendations

In the September 2018 Annual Report, the Foster Care Review Office made a number of recommendations to improve conditions for children involved with Nebraska's child welfare and/or juvenile justice systems.⁵ For this quarterly report, we invited the Chief Justice of the Nebraska Supreme Court, the Nebraska Probation Administrator, the Director of Child and Family Services Division of the Nebraska Department of Health and Human Services, and the Executive Director of PromiseShip to respond.

The following are Annual Report recommendations that have agency responses and/or other updated information following each as bulleted items. Appendix E has a copy of all the 2018 Annual Report Recommendations.

DHHS/CFS Recommendations with Responses:

The Nebraska Department of Health and Human Services Child and Family Services Division (DHHS/CFS) provided a letter with direct responses to every recommendation specific to DHHS. PromiseShip, the private contractor responsible for case management in the Eastern Service Area, deferred responses to DHHS/CFS.

1. Establish an effective, evidence-supported, goal driven, out-come based service array throughout the State to meet the needs of children and families involved in the child welfare system to include the following:
 - Preventative services for neglect and substance use in collaboration with DHHS Behavioral Health;
 - ❖ **From the DHHS/CFS response:** *“Both CFS and DBH have been meeting with the therapeutic community providers in the state who provide substance abuse treatment with models where the mothers and children can live together and not be separated due to a mother’s treatment. These meetings have focused on establishing performance goals...and how the service is potentially preventing entry into the child welfare system. Additionally, through ...the federal Family First Prevention Service Act (FFPSA), these meetings have turned to look at how child welfare federal IV-E dollars can assist with the costs...CFS also worked with The Bridge in Hastings (therapeutic community) to expand capacity for rural families so they didn’t have to travel to Lincoln or Omaha to receive treatment.....”⁶*

⁵ The full report is available at <http://www.fcro.nebraska.gov/pdf/FCRO-Reports/2018-annual-report.pdf>

⁶ DHHS/CFS's full response can be found in Appendix C. The FCRO thanks DHHS/CFS for this thoughtful reply.

- Out-of-home services such as family support and parenting time services that have the least traumatic impact on children.
 - ❖ **From the DHHS/CFS response:** *“In compliance with FFPSA we are moving towards evidenced based practices for all in-home parenting services. Through the past year we have been increasingly using Circle of Security classes for parenting education...that allows parents to reflect on how they were parented and how that affects their parenting....This fall we entered into a contract with the Nebraska Association for the Education of Young Children to coordinate and enroll referred families into the class that works best for them building on family voice and choice.”*
- Stabilization of placements and recruitment of foster parents based upon the needs of the child/youth in collaboration with foster care providers;
 - ❖ **From the DHHS/CFS response:** *“Contracted agency supported foster care providers are funded to recruit foster homes to meet the needs of the children...These discussions occur in family team meetings as well as local and statewide provider meetings. CFS will continue to identify relative and kinship homes to support children...”*
- Creation of treatment foster care services which actively engage families and would meet the needs of older youth;
 - ❖ **From the DHHS/CFS response:** *“In this past year, meetings have occurred...to develop a therapeutic foster care service definition...During these meetings...there was also discussion exploring the possibility of implementing this service...Meetings will continue to explore opportunities to implement therapeutic foster care services.”*
- In-home supports for foster parents especially relative/kin placements;
 - ❖ **From the DHHS/CFS response:** *“Contracted agency supported foster care providers are funded to provide in-home supports to all their foster parents to ensure placement stability. Resource Development staff within CFS provide monthly contact and support to relative and kinship foster parents who are not supported by a contracted agency. In addition, CFS may approve additional wraparound services to ensure placement stability in non-agency contracted homes.”*
- Mental and behavioral services for children/youth in collaboration with DHHS Behavioral Health;
 - ❖ **From the DHHS/CFS response:** *“CFS has been an active participant in the Children’s System of Care efforts on a statewide level as well as the local team meetings. Children’s System of Care work is led by the Division of Behavioral Health (DBH) and is about stakeholders partnering to ensure*

families have access to the services they need so that a child does not have to be part of one 'system' to receive those services....Mobile Crisis Response is available in all jurisdictions of the state...Therapeutic Consultation for school systems was also implemented in several rural schools who may not have the resources they need to address the behavioral health needs of children...."

- Developmental disability services for children/youth in collaboration with DHHS Developmental Disabilities; and
 - ❖ **From the DHHS/CFS response:** *"CFS and DDD continue to meet on a regular basis to understand the eligibility criteria for the waiver program and what DDD needs from families or CFS to make an accurate eligibility determination."*
 - Enhanced services and case management for older youth.
 - ❖ **From the DHHS/CFS response:** *"Nebraska offers extended foster care services...under the Bridge to Independence [b2i] Program. Effective October 1st, CFS and the Administrative Office of Probation began practicing the Crossover Children Model statewide. [It] is an evidence based model of case management for children that are dually involved in both child welfare and probation cases. The crux of the model is clear and consistent communication between both the probation office and the child welfare worker. It allows for joint family team meetings as well as joint court dates...DHHS believes that ultimately, providing services for older children and young adults needs to come from the community in which they live..."*
2. Establish clear and concise policy and procedures with regard to effective safety planning to include clear expectations for the families and mechanisms to ensure compliance with the safety plan. This is true whether the safety plan involves a court-involved case or non-court case or out-of-home placement.
- ❖ **From the DHHS/CFS response:** *"To assist the case managers in their safety planning with families, CFS developed a tool for case managers to use in their conversations about possible interventions or services that can be utilized with specific safety threats that are identified through the SDM Safety Assessment. The tool does not take the place of the safety plan nor does it replace the important conversation that has to be had with families. It simply helps the case manager, in the moments of when they may be under a lot of stress, to think clearly about what is available in the community as well as what is available with the family's network to provide safety for the children involved."*

- ❖ **The DHHS/CFS response continues:** *“CFS is implementing Safety Organized Practice (SOP). The tools and practices included in SOP will add concepts and practices for CFS staff to enhance engagement with children and families to create a shared focus among all the stakeholders; to help stakeholders consider complicated and ambiguous case information together and sorting it into meaningful categories; and clearing the way for stakeholders to engage in rigorous, sustainable, consistent on the ground child safety efforts. SOP provides additional structure that will help guide workers, families, and network supports in developing well-formed goals and building strong safety networks. SOP pushes all of us to work with the families’ network of supports in safety planning, as well as formal services, to build a safety plan and to teach parents how to provide a protective environment...SOP and current practice require safety planning for both court and non-court involved cases when an active safety threat exists.”*

Juvenile Probation Recommendations with Responses:

The Juvenile Services Division of the Administrative Office of the Courts & Probation provided a letter⁷ responding generally to the three recommendations in the Annual Report.

1. Determine the feasibility of replicating the Robert F Kennedy National Resource Center for Juvenile Justice System’s Assessment in District 4J (Douglas County).
2. Establish an effective, evidence-supported, goal-driven, outcome based service array throughout the State to meet the needs of youth involved in the juvenile justice system to include the following:
 - a. Community based services prior to being placed out-of-home;
 - b. Recruitment and retention of foster homes to meet the needs of probation youth;
 - c. Creation of services for parents to assist in managing the behaviors of their youth;
3. Creation of concrete action steps when parents’ issues prevent a youth from returning home in collaboration with all juvenile justice stakeholders.

- ❖ **The Juvenile Division of the AOC/P response:** *“As outlined in statute, the Probation Administrator establishes and maintains policies, standards, and procedures for the system with the concurrence of the Supreme Court.” Additionally, as further outlined, the Administrative Office of the Courts & Probation cooperates with all agencies which are concerned with treatment or*

⁷ See Appendix D for the complete letter. The FCRO thanks the Office of Probation Administration for its prompt reply.

welfare of persons on probation. As such, the reports, findings, and recommendations of the Foster Care Review Office are taken seriously. The recommendations from each report are thoroughly reviewed and are included as considerations within Probation's ongoing evaluation of its evidence-based practices and policies...FCRO report recommendations are also beneficial in evaluating judicial branch education and training targeted to Probation system employees...the following web addresses may be of value in gauging the efficacy of Probation's programs and services aimed at Nebraska youth."

- <https://supremecourt.nebraska.gov/probation/juvenile>. Includes general information about the Juvenile Services Division, the 2016 and 2017 Annual Statistical Report of Juvenile Justice, and specific reports on Probation's Juvenile Justice Reform.
- <https://supremecourt.nebraska.gov/sites/default/files/2017-2019-strategic-agenda.pdf>. Biannual Supreme Court Strategic Agenda

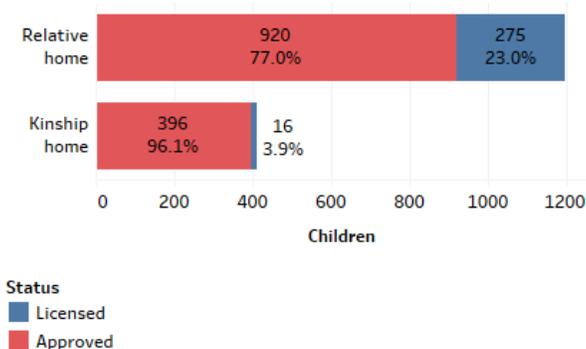
Legislative recommendations with additional information:

The FCRO did not request responses from members of the Legislature, but is able to provide updated information unavailable at the time of the publication of the Annual Report.

1. Enact legislation requiring that all relative and kinship placements must obtain a child-specific foster care license within 120 days of placement. This legislation must include the requirement that DHHS, through its regulations, create the process for obtaining a child-specific foster care license.

❖ ***Additional Data from the FCRO:*** *In the 2018 Annual Report, the FCRO expressed concerns that relative and kinship foster homes are frequently approved, rather than licensed. Licensing would require a standardized training to assist foster parents to better meet the needs of children. Additionally, Federal IV-E funding for eligible children is currently available for licensed homes only.⁸ The FCRO is now able to report on the license status of relative and kin homes. As is shown in **Figure 1**, on 9/30/2018 **23.0%** of the children placed in relative homes are in homes that are licensed, and only **3.9%** of children placed in kinship homes are in homes that are licensed.*

⁸ For more information on the benefits of relative and kin placements, as well as the benefits of licensing for relative and kin placements, please see pages 15-16 of the FCRO Annual Report: <http://fcro.nebraska.gov/pdf/FCRO-Reports/2018-annual-report.pdf>.

Figure 1: License Status of Relative and Kin Foster Homes on 9/30/2018

Judicial System recommendations with additional information:

The FCRO did not receive a response from the Chief Justice, however, the Juvenile Division of the Administrative Office of the Courts and Probation is part of the Judicial Branch. The Nebraska Supreme Court Strategic Agenda link referenced in the Juvenile Division letter (Appendix D) includes information related to the FCRO recommendations for the Judicial System: <https://supremecourt.nebraska.gov/sites/default/files/2017-2019-strategic-agenda.pdf>.

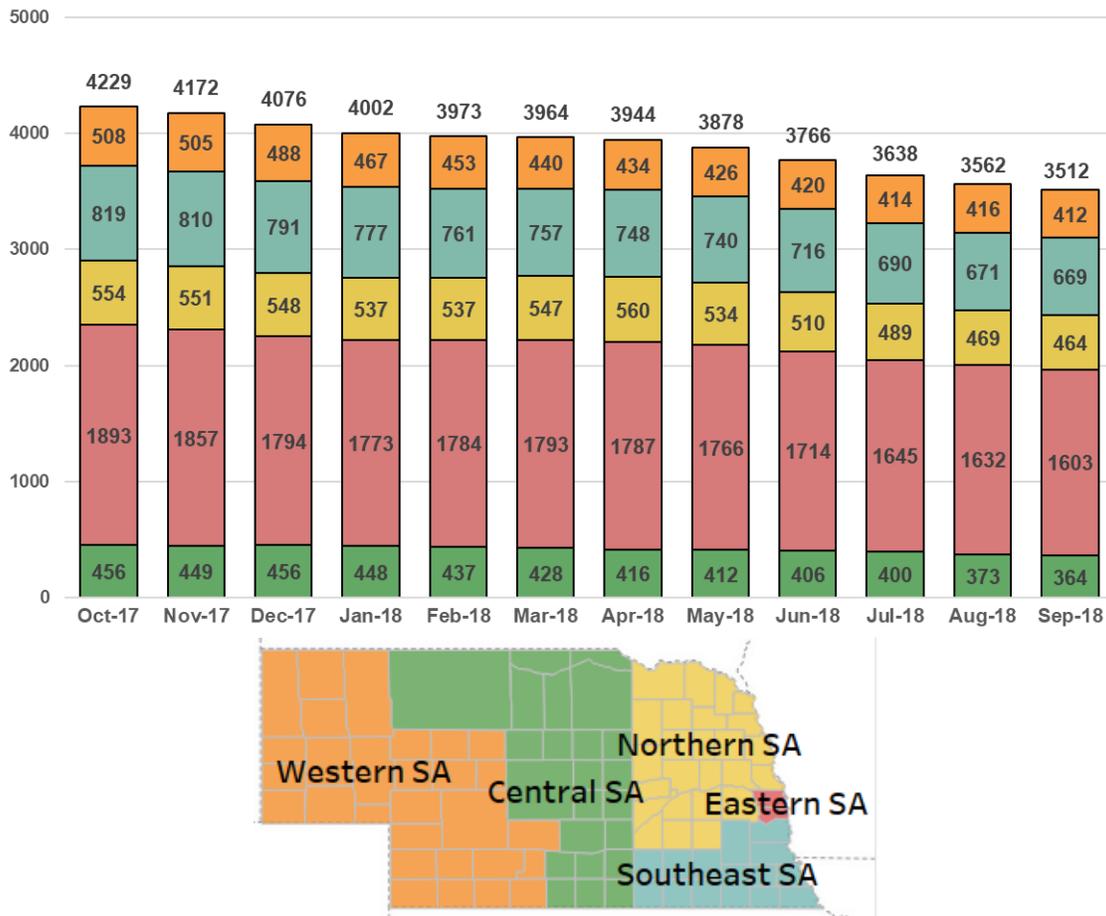
1. Require that all guardians ad litem must receive a copy of the home study prior to placement of a child in a home or within 60 days if the placement is the first placement of a child.
2. Ensure compliance with the Supreme Courts' Progression Standards for juvenile court.
 - ❖ **Additional Information:** *The Nebraska Court Improvement Project has a dashboard that contains periodic updates on key court data on case progression. They suggest opening the dashboard in Internet Explorer. https://supremecourt.nebraska.gov/sites/default/files/Court_Improvement_Dashboard_11.1.18.mht*
3. Explore the feasibility and impact of court review hearings held every three months instead of every six months to increase accountability across the system.
4. Ensure that the child/youth's voice is integrated into all legal proceedings including appearance at court hearings and involvement in all aspects of case planning.

Average Daily Population of Children with any DHHS/CFS Involvement

Daily population

Figure 3 shows the decline in average daily population (ADP) per month of DHHS/CFS involved children in out-of-home or trial home visit placements over the course of the last 12 months (including those simultaneously serviced by the Office of Probation).

Figure 3: Average Daily Population of All DHHS/CFS Involved Children in Out-of-Home or Trial Home Visit Placements –
(includes children with simultaneous involvement with Probation)¹⁰



Over the course of the last year, there has been a consistent, steady decrease in the number of DHHS/CFS involved children in out-of-home care or trial home visit. **Figure 4** compares the average daily populations from September 2017 to September 2018 by

¹⁰ The FCRO's FCTS data system is a dynamic computer system that occasionally receives reports on children's entries, changes, or exits long after the event took place. The FCRO also has a robust internal CQI process that can catch and reverse many errors in children's records regardless of the cause and that works to create the most accurate data possible. Therefore, due to delayed reporting and internal CQI some of the numbers on this rolling year chart will not exactly match that of previous reports.

service area. Statewide, the number of DHHS/CFS involved children in out-of-home care or trial home visit has decreased by **16.4%** in the last year, with the largest decrease in the Central Service Area (**-20.9%**).

Figure 4: Percent Change in All DHHS/CFS Involved Children in Out-of-Home or Trial Home Visit Placements

| Service Area | Sept 2017 ADP | Sept 2018 ADP | % Change |
|------------------|---------------|---------------|---------------|
| Central SA | 460 | 364 | -20.9% |
| Eastern SA | 1,899 | 1,603 | -15.6% |
| Northern SA | 550 | 464 | -15.7% |
| Southeast SA | 812 | 669 | -17.6% |
| Western SA | 482 | 412 | -14.4% |
| Statewide | 4,203 | 3,512 | -16.4% |

Entries and Exits

In order to better understand the decline in the out-of-home and trial home visit population, the FCRO examined the number of children entering and exiting foster care over the last year by Service Area. The number of children entering the foster care system dropped dramatically during May, June, and July of 2018 (**Figure 5**). During that same period, there was an increase in children leaving the foster care system (**Figure 6**). The Eastern Service Area, in particular, had a high number of exits in May and June of 2018, which is related to a concerted effort from PromiseShip to bring permanency to children whose cases had stalled. As a result of this effort, more than 80 adoptions were finalized in just two months.

Figure 5: Entries by DHHS/CFS Service Area

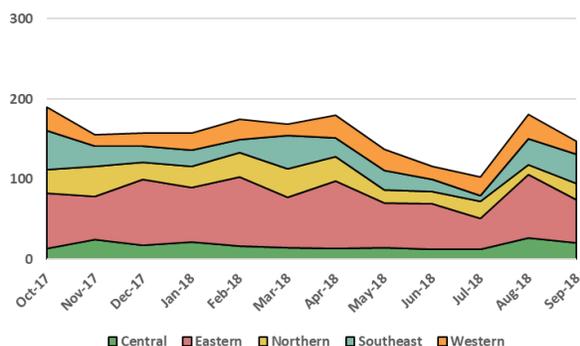
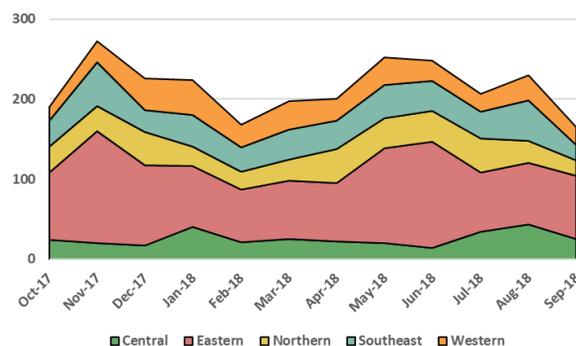
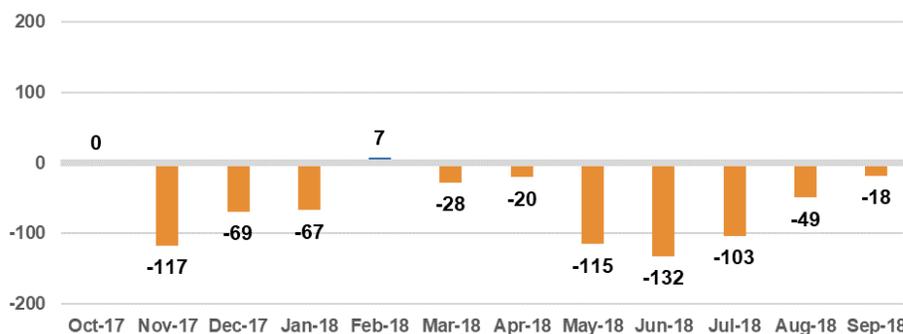


Figure 6: Exits by DHHS/CFS Service Area



Decreasing entries and increasing exits both contribute to the decrease in children in out-of-home care or trial home visit. **Figure 7** shows the net effect of entries and exits on the number of children in out-of-home care.

Figure 7: Statewide Net Entrances and Exits of DHHS/CFS Involved Children



In order to better understand how significantly the population of children in out-of-home care has decreased and why that decrease has occurred, the FCRO analyzed the number of entries and exits during a three-year period by quarter. As shown below in **Figures 8** and **9**, the decrease in the number of children in out-of-home placement is driven by the decrease in entries into the foster care system during the last year (**Figure 8**), because, while exits have increased, the patterns in exits have not changed (**Figure 9**).¹¹

Figure 8: Statewide Entrances of DHHS/CFS Involved Children

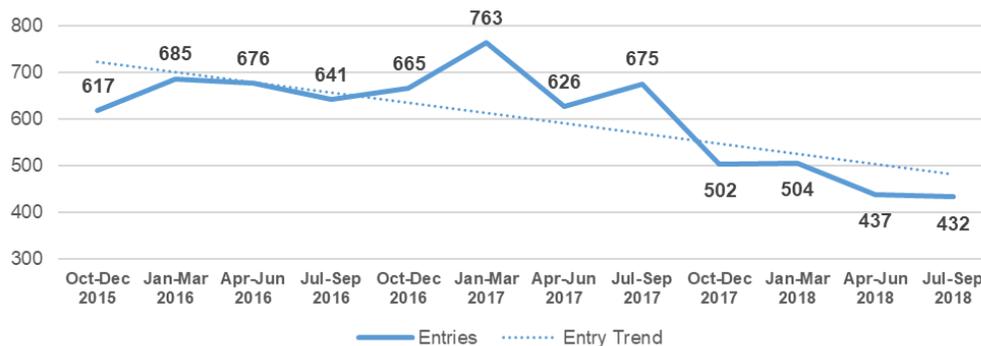
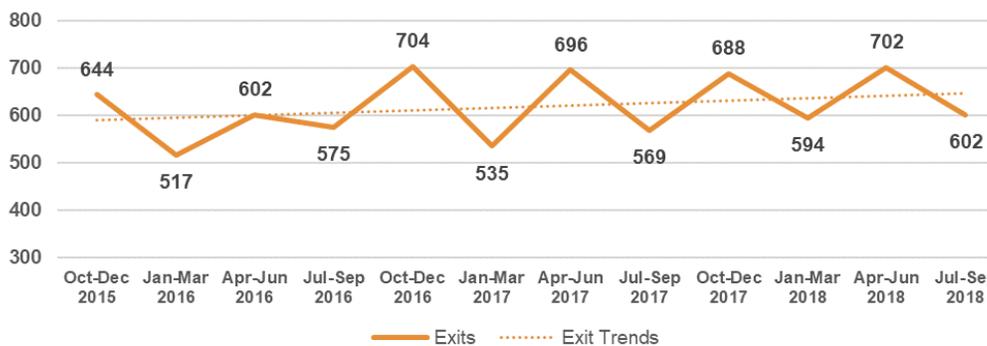


Figure 9: Statewide Exits of DHHS/CFS Involved Children



¹¹ This data can be isolated by DHHS/CFS service area, and is available on request. See the last page for updated FCRO contact information.

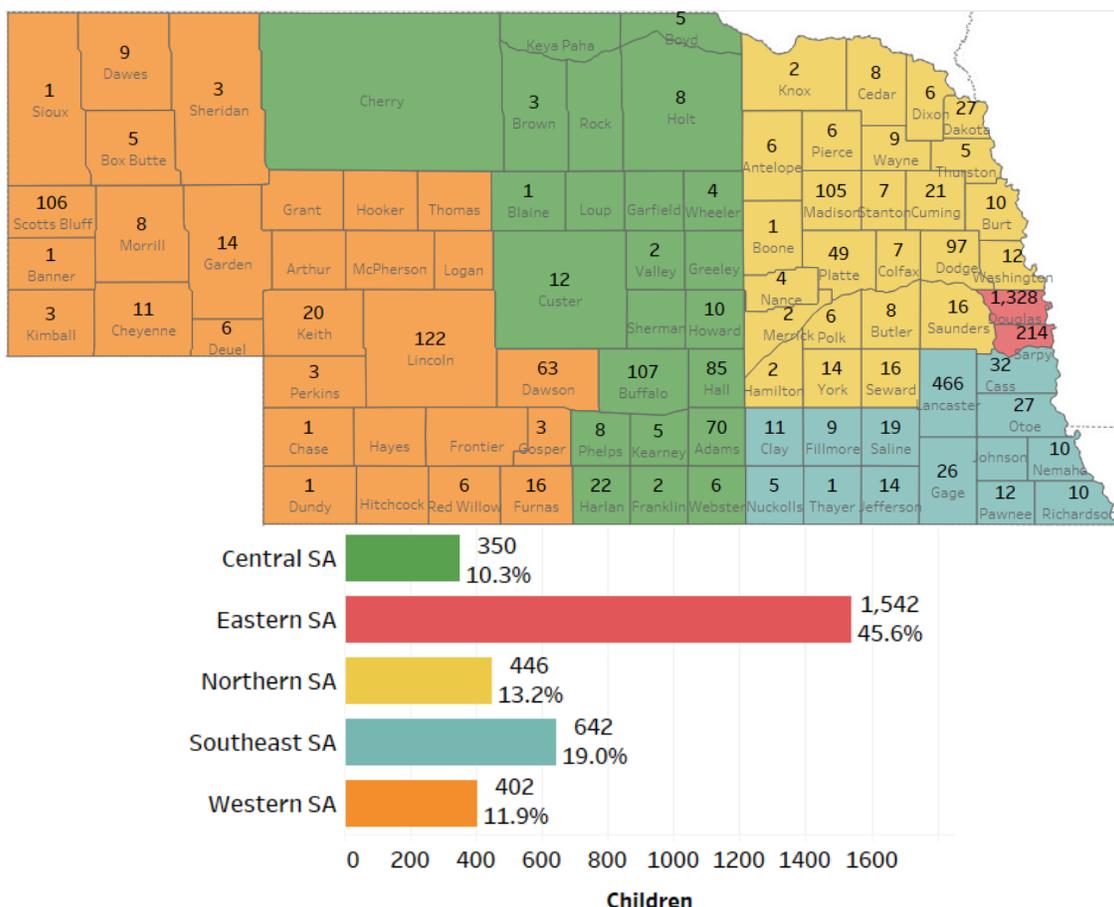
Children Solely Involved with DHHS/CFS – Point-in-time (Single Day) View

Single day data on DHHS/CFS wards in this section includes only children that meet the following criteria: 1) involved with DHHS/CFS and no other state agency and 2) reported to be in either an out-of-home or trial home visit placement.¹² On September 30, 2018, there were **3,385 children** who met those criteria.

Demographics

County. Figure 10 shows the **3,385 DHHS/CFS wards** by county and the region. Child abuse and neglect affects every region of the state, as shown by the distribution of children in care.

Figure 10: DHHS/CFS Wards in Out-of-Home or Trial Home Visit Placement on 9/30/18 by DHHS/CFS Service Area, n=3,382



Counties without numbers had no children in out-of-home care or trial home visit on Sept. 30, 2018.

¹² Youth at a YRTC, youth only involved with Probation, or youth dually involved with Probation are not included, and are described elsewhere in this report.

As expected, most of the children are from the two largest urban areas (Omaha and Lincoln, in the Eastern and Southeast Service Areas respectively). Perhaps more importantly, though, is the number of state wards in smaller counties with relatively few children in the population. When comparing the number of children in out-of-home care and trial home visit to the number of children in the population for the county, **the counties with the highest rates of children in out-of-home or trial home visit placement are Garden, Harlan, Wheeler, Pawnee, Deuel, Furnas, Lincoln, Boyd, Keith, and Madison.**

Gender. Girls and boys are equally represented in the population of children in care on 9/30/2018, as has been true for several years.

Age. Consistent with past reports, approximately **42% of children in care are 5 and under, 33%** are between 6 and 12, and **26%** are teenagers.

Race and Ethnicity. As the FCRO and others have consistently reported, minority children continue to be overrepresented in the out-of-home population. As reported in the 2018 Annual Report, the Census estimates that 6.3% of Nebraska's children are Black or African American, 2.3% are American Indian or Alaska Native, and 4.5% are multiracial. **Yet, for all three groups, their representation in the out-of-home population is more than double their representation in the general population.**

Figure 11: DHHS/CFS Wards in Out-of-Home or Trial Home Visit Placement on 9/30/18 by Race or Ethnicity, n=3,382

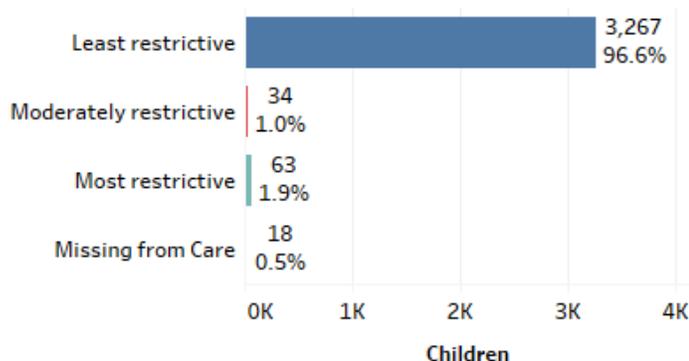
| | | |
|--|-------|-------|
| White | 2,066 | 61.1% |
| Black or African American | 575 | 17.0% |
| Two or more races | 425 | 12.6% |
| American Indian and Alaska Native | 201 | 5.9% |
| Asian | 29 | 0.9% |
| Native Hawaiian and Other Pacific Islander | 10 | 0.3% |
| Unknown or Other | 76 | 2.2% |
| Hispanic | 657 | 19.4% |
| Not Hispanic | 2,348 | 69.4% |
| Unable to determine | 377 | 11.1% |

Placements

Placement Restrictiveness. Children in foster care need to live in the least restrictive, most home-like temporary placement possible in order for them to grow and thrive. Some children need congregated care, which could be moderately or most restrictive. A more moderate restrictiveness level includes non-treatment group facilities, and the most restrictive are the facilities that specialize in psychiatric, medical, or juvenile justice related issues and group emergency placements.

Figure 12 shows that most (2,849 or 96.1%) DHHS/CFS wards in out-of-home placements or trial home visits were placed in a family-like, least restrictive setting. Moderate or most restrictive placements should be reserved for children who need more intensive levels of treatment or different types of services within their placement. The proportion of children in the least restrictive setting has remained above 95% for the past two years.

Figure 12: Placement Restrictiveness for DHSS/CFS Wards in Out-of-home or Trial Home Placements on 9/30/18, n=3,382



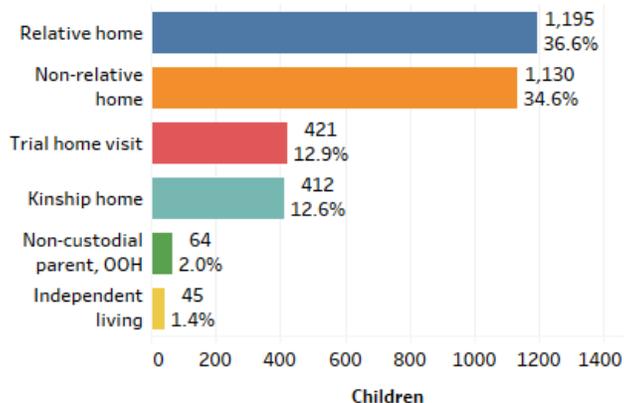
Children “missing from care” must always be a top priority as their safety cannot be assured

Home-like Placements. There are several different types of least restrictive placements:

- “Relative” is defined in statute as a blood relationship, while “kin” in Nebraska is defined as fictive relatives, such as a coach or teacher, who by statute are to have had a prior positive relationship with the child.
- “Non-custodial parent out-of-home” refers to instances where children were removed from one parent and placed with the other but legal issues around custody have yet to be resolved.
- “Independent living” is for teens nearing adulthood, such as those in a college dorm or apartment.

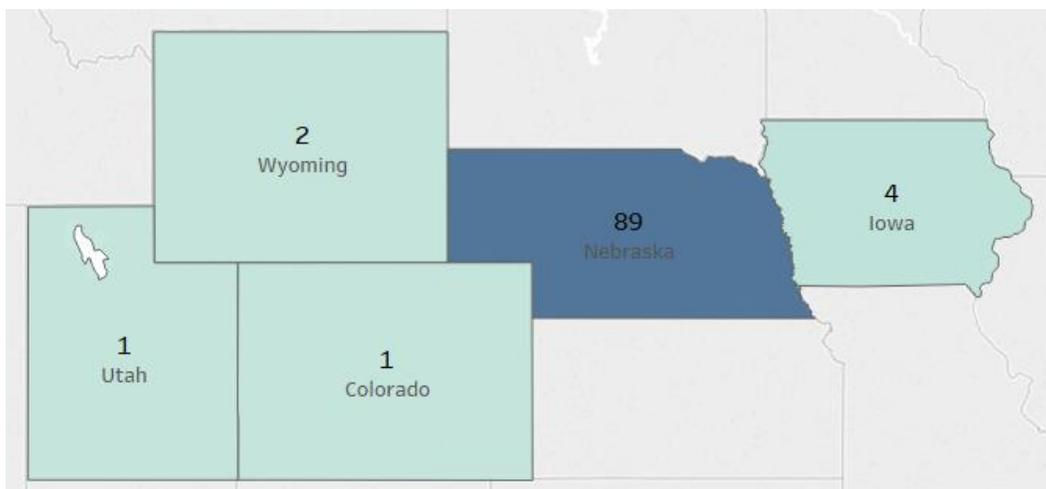
Figure 13 shows that the majority of children in a foster home are placed with relatives or kin.

Figure 13: Specific Placement Type for DHHS/CFS Wards in the Least Restrictive Placement Category on 9/30/2018, n=3,267



Congregate Care. Figure 14 shows states where the 97 DHHS/CFS wards in the moderately and most restrictive congregate (group) facilities are placed. Most (89) are in Nebraska, with the remainder in bordering or nearby states with specialized facilities.

Figure 14: State of Placement for DHHS/CFS Wards in Congregate Care on 9/30/18, n=97

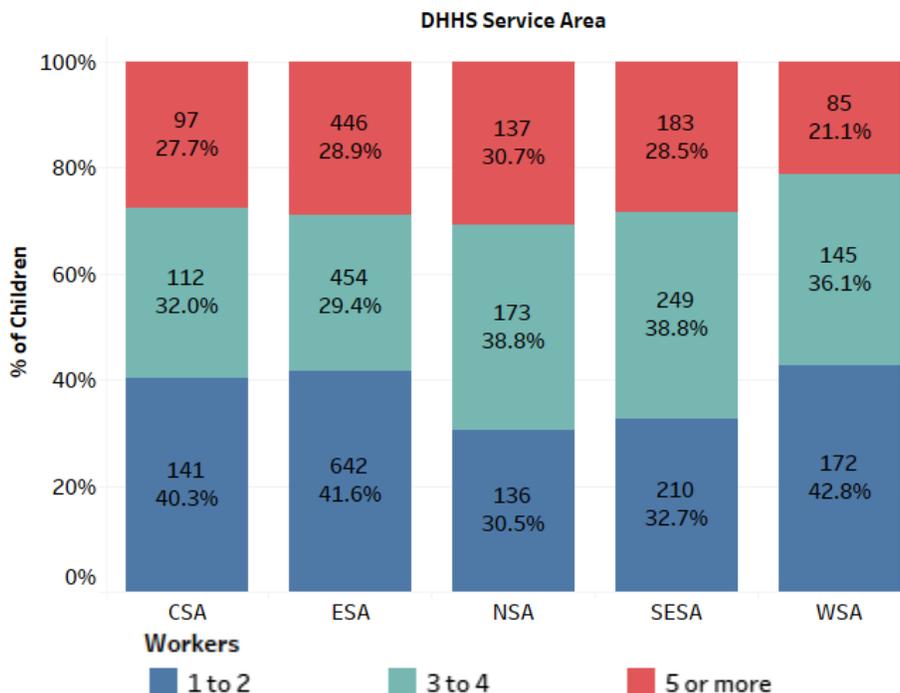


Number of Workers during Current Episode of Care

Figure 15 below shows the number of workers during the current episode of care for 3,382 children in out-of-home or trial home visit placement on 9/30/18. Workers here include PromiseShip (formerly NFC) Permanency Specialists in the Eastern Service Area where DHHS/CFS contracts for such services, and DHHS/CFS case managers elsewhere.

More than four workers is considered an unacceptable number of worker transfers that likely significantly delays permanency.¹³ **Over 25% of the children in the Central, Eastern, Northern, and Southeast Service Areas have had more than 4 workers since the most recent removal.**

Figure 15: Number of Workers for DHHS/CFS Wards 3/31/18 in Current Episode, n=3,382



Multiple placement moves

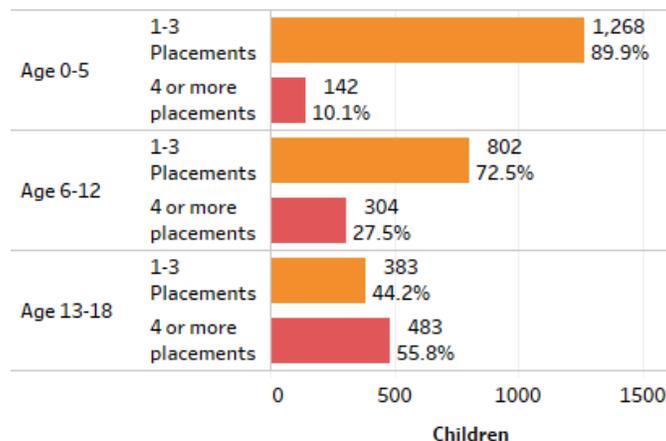
In the last two fiscal quarters, there has been a slight increase in the proportion of children with four or more placements while in state custody. Of the children in care on 9/30/2018, **27.5%** of wards experienced four or more placement moves over their lifetime (**Figure 16**), up from 25.0% of those in care in December 2017 and March 2018.¹⁴ It is very concerning that **10.1% of young children** have experienced a high level of placement change.¹⁵

¹³ Review of Turnover in Milwaukee County Private Agency Child Welfare Ongoing Case Management Staff, January 2005.

¹⁴ This does not include placements with parents, respite short-term placements (such as to allow foster parents to jointly attend a training) or episodes of being missing from care.

¹⁵ The FCRO 2017 Annual Report includes information on the effects of placement changes on children.

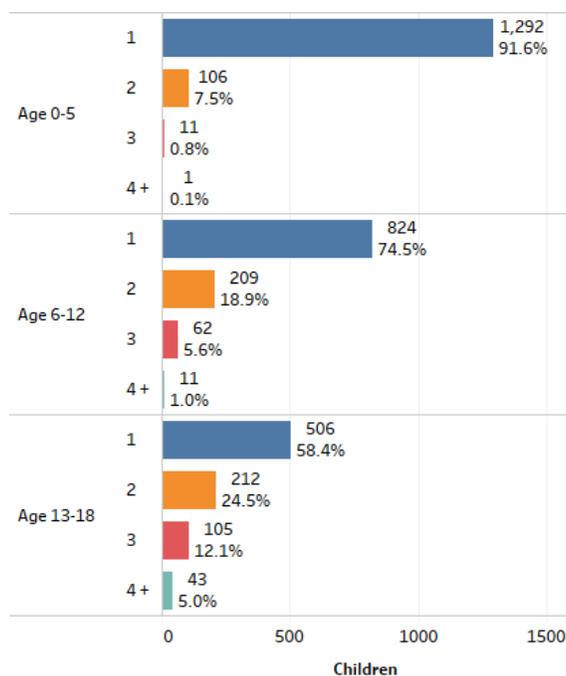
Figure 16: Lifetime Placement Moves for DHHS/CFS wards in Out-of-Home or Trial Home Visit on 9/30/18, n=3,382



Lifetime episodes involving a removal from the home

Figure 17 shows that **760 (22.5%)** of the DHHS/CFS wards in care on 9/30/18 had experienced more than one removal from the parental home. The percent of children with multiple removals from the home has decreased from the range 23.2% to 24.0% reported over the last 18 months. Each removal can be traumatic and increases the likelihood of additional moves between placements, so while there is some improvement, **the State must do more to address why more than 1 in 5 children currently in the system had a prior removal.**

Figure 17: Lifetime Removals for DHHS/CFS Wards in Out-of-Home or Trial Home Visit Placements on 9/30/18, n=3,382

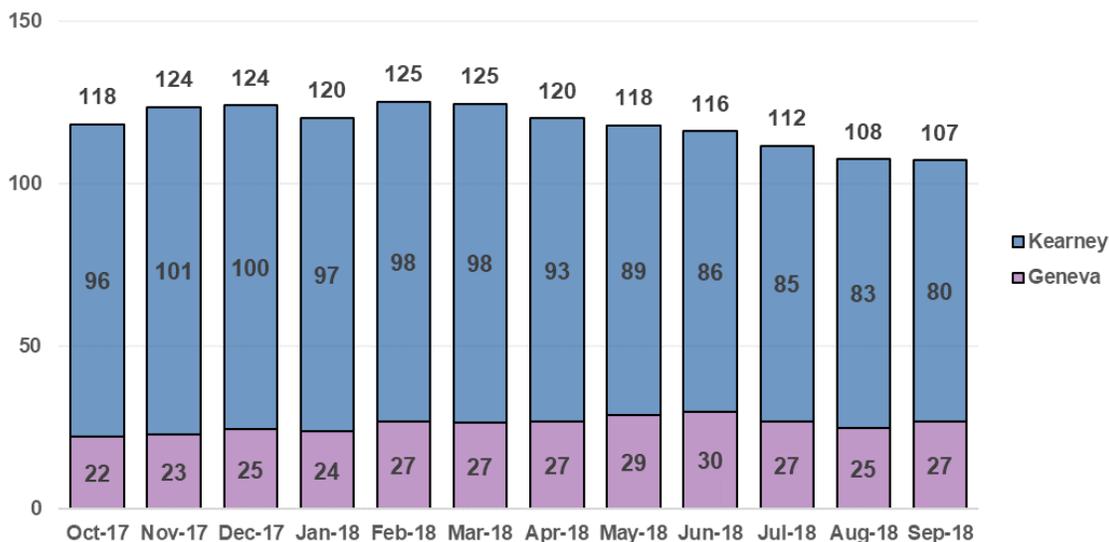


Average Daily Population of DHHS/OJS Youth Placed at a Youth Rehabilitation and Treatment Center (YRTC)

Placement at a Rehabilitation and Treatment Center is the most restrictive type of placement, and by statute is to be reserved for those youth whose behavioral issues have not been successfully treated in a less restrictive placement. The DHHS Office of Juvenile Services (DHHS/OJS) is responsible for the YRTCs in Kearney where boys are placed and Geneva where girls are placed.

Figure 18 shows the average daily number of DHHS/OJS wards at each of YRTCs for the last rolling year.

Figure 18: Average Daily Number of DHHS/OJS Wards Placed at a Youth Rehabilitation and Treatment Center



The average daily population of girls placed at the Geneva YRTC facility has increased by 17.4% while the average daily population of boys placed at the Kearney YRTC facility has decreased by 13.0% (**Figure 19**). Given that there are an average of three times as many boys placed at a YRTC than girls, the shift in the Kearney population has led to an overall decrease in YRTC placements for the state.

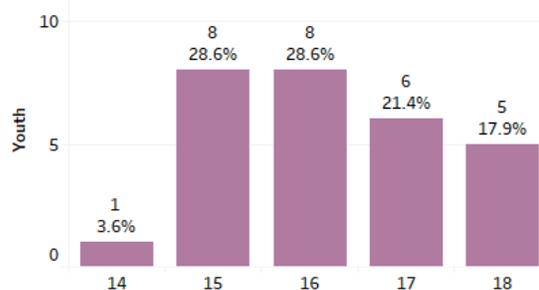
Figure 19: Percent Change in Youth Placed at the YRTC

| YRTC Facility | Sept 2017 ADP | Sept 2018 ADP | % Change |
|------------------|---------------|---------------|--------------|
| Geneva (Girls) | 23 | 27 | 17.4% |
| Kearney(Boys) | 92 | 80 | -13.0% |
| Statewide | 115 | 107 | -6.9% |

National research indicates that girls are less likely to be a part of the juvenile justice population; the number of girls placed at the Geneva YRTC (28 of 110) reflects this pattern.

On average, the girls at Geneva are slightly younger than the boys at Kearney (16.2 years and 16.7 years, respectively).

Figure 22: Ages of Youth Placed at the Kearney YRTC under DHHS/OJS on 9/30/18, n=28



Race and Ethnicity. There is significant racial and ethnic disproportionality in the YRTC populations at Geneva and Kearney. Disproportionality has increased since the publication of the FCRO Annual report in September. **Black or African American youth make up 6.0% of Nebraska’s youth population, but are 30.5% of the youth placed at the Kearney facility (up from 23.8% on 6/30/18). American Indian and Alaska Native youth are 2.0% of Nebraska’s population, but 11.0% of the boys placed at the Kearney facility and 28.6% of the girls placed at the Geneva facility (up from 9.5% and 20.0%, respectively, on 6/30/18).**

Figure 23: Race and Ethnicity of Youth Placed at a Youth Rehabilitation and Treatment Center under DHHS/OJS on 9/30/18, n=110

| | | | |
|------------------|-----------------------------------|----|--------|
| Kearney/ Boys | American Indian and Alaska Native | 9 | 11.0% |
| | Black or African American | 25 | 30.5% |
| | Two or more races | 5 | 6.1% |
| | Unknown or Other | 11 | 13.4% |
| | White | 32 | 39.0% |
| Total | | 82 | 100.0% |
| Geneva/ Girls | American Indian and Alaska Native | 8 | 28.6% |
| | Black or African American | 3 | 10.7% |
| | Two or more races | 3 | 10.7% |
| | Unknown or Other | 5 | 17.9% |
| | White | 9 | 32.1% |
| Total | | 28 | 100.0% |
| Kearney/ Boys | Hispanic | 16 | 19.5% |
| | Not Hispanic | 51 | 62.2% |
| | Unable to determi.. | 15 | 18.3% |
| | Total | 82 | 100.0% |
| Geneva/ Girls | Hispanic | 7 | 25.0% |
| | Not Hispanic | 14 | 50.0% |
| | Unable to determi.. | 7 | 25.0% |
| | Total | 28 | 100.0% |

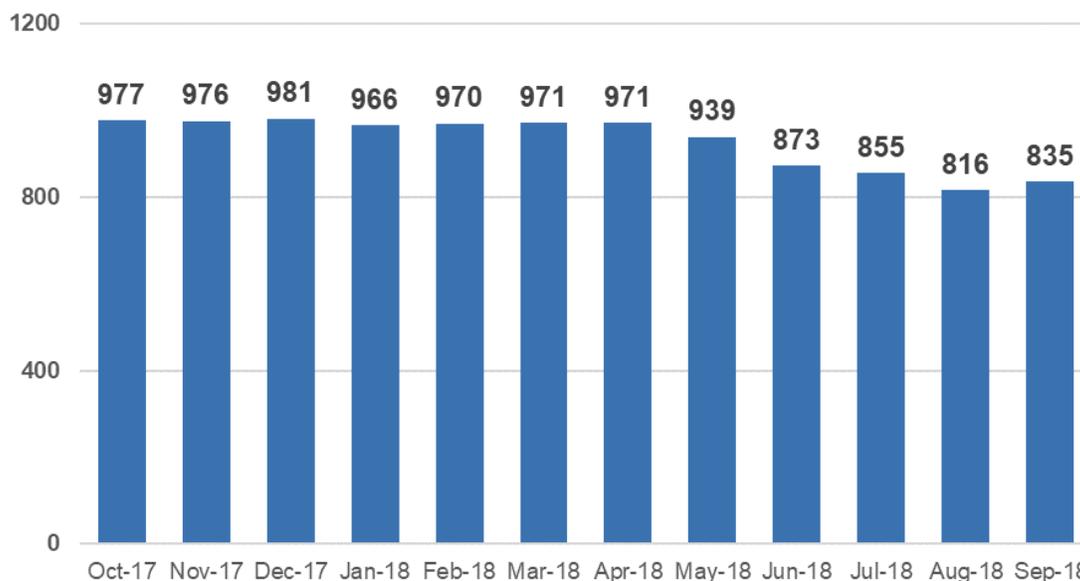
Average Daily Population for Youth With any Probation Involvement

Average daily population

Figure 24 shows the average daily population (ADP) per month of all Probation-involved youth in out-of-home placements for the last 12 months (including those with simultaneous involvement with DHHS/CFS). The FCRO Annual Report released in September 2018, highlighted the relative stability of the juvenile probation population, noting a recent downward trend through June of 2018. That downward trend continued through July and August of 2018, with a slight increase during September.

Figure 24: Average Daily Population of Youth in Out-of-Home Care Supervised by Probation

(includes children with simultaneous involvement with DHHS/CFS)

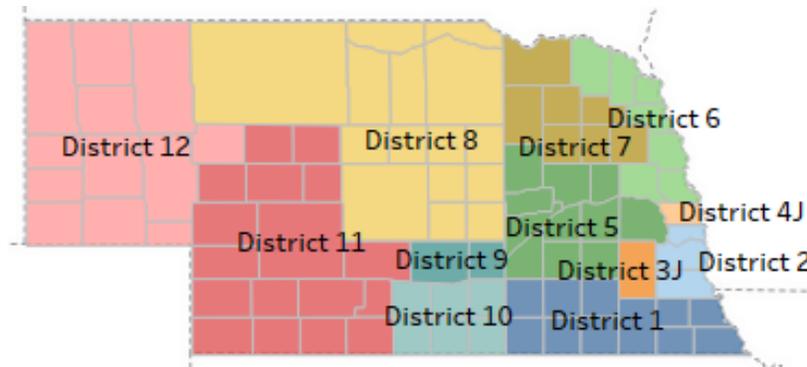


As shown in **Figure 25**, even with the recent increase in the out-of-home population, there are 14.3% fewer youth in out-of-home care than a year ago. Not all areas of the state have seen a decrease in the number of probation youth in out-of-home care. The most populous regions of 3J (Lancaster county) and 4J (Douglas county), have seen decreases of **26.6%** and **10.5%**, respectively. However, Districts 1, 7, 10, and 12 have all seen increases in the average number of youth in out-of-home care from September of 2017 to September 2018.

Figure 25: Percent Change in Probation Involved Youth in Out-of-Home Placement

(includes children with simultaneous involvement with DHHS/CFS)

| Judicial District | Sept 2017 ADP | Sept 2018 ADP | % Change |
|-------------------|---------------|---------------|---------------|
| District 1 | 28 | 33 | 17.9% |
| District 2 | 52 | 45 | -13.5% |
| District 3J | 248 | 182 | -26.6% |
| District 4J | 352 | 315 | -10.5% |
| District 5 | 36 | 26 | -27.8% |
| District 6 | 73 | 56 | -23.3% |
| District 7 | 34 | 41 | 20.6% |
| District 8 | 14 | 6 | -57.1% |
| District 9 | 61 | 56 | -8.2% |
| District 10 | 20 | 26 | 30.0% |
| District 11 | 63 | 46 | -27.0% |
| District 12 | 32 | 36 | 12.5% |
| Statewide | 1013 | 868 | -14.3% |



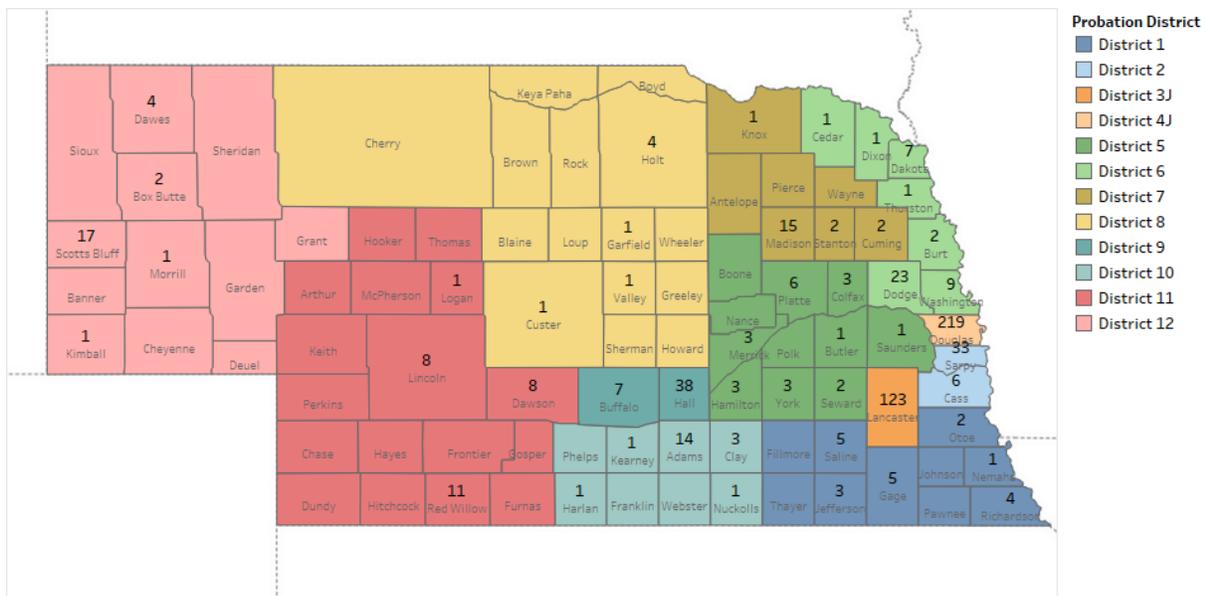
Youth in Out-of-Home Care Supervised by the Office of Juvenile Probation - Point-in-time (Single Day) View

Single-day data on Probation involved youth in an out-of-home placement here includes only those youth whose involvement is solely with Probation.

Demographics

County. Figure 26 shows the Probation district and the county of court, for the **612 Probation youth** in out-of-home care on 9/30/18 that are not involved with either DHHS/CFS or DHHS/OJS. Juvenile Probation Districts by statute are different than the regions used for DHHS/CFS wards. Aggregated totals by District are on the next page in Figure 27.

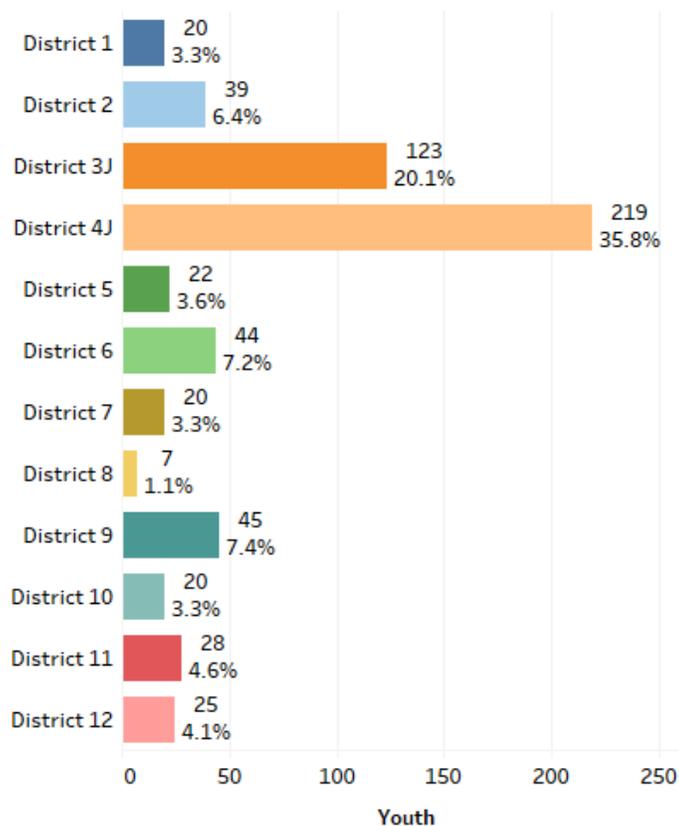
Figure 26: County of Origin for Probation Supervised Youth in Out-of-Home Care on 9/30/18, n=612*



*The District borders changed slightly when LB697 took effect on July 19, 2018, so this map is slightly different from previous maps.

Counties without numbers have no children in out-of-home care on 9/30/18.

Figure 27: District for Probation Supervised Youth in Out-of-Home Care on 9/30/18, n=612

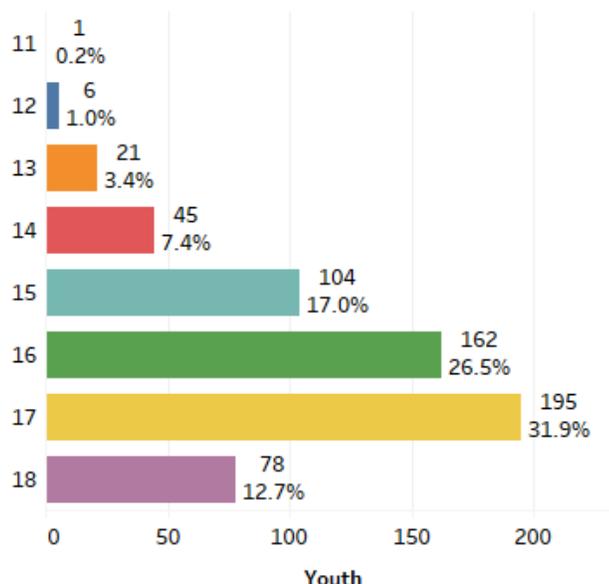


Age. Figure 28 shows the ages of Probation youth in out-of-home care on 9/30/18. For the past two years, 27-30% of probation youth have been under the age of 16, and this pattern holds true for the youth out of home on 9/30/18, where **177 (28.9%) were under age 16.**

The FCRO and other advocates have raised questions regarding which is the best system to deal with the youngest court-involved youth and their families because there is a strong correlation between early traumatic events and juvenile delinquency, particularly multiple childhood victimizations and dysfunctional families.¹⁶

¹⁶ National Child Traumatic Stress Network “Victimization and Juvenile Offending” 2016, among many others.

Figure 28: Age of Probation Supervised Youth in Out-of-Home Care on 9/30/18, n=612



Gender. There are over twice as many boys (**66.3%**) in out-of-home care served by Probation as there are girls (**33.7%**). Current percentages are similar to the numbers throughout 2017 and earlier in 2018.

Race and Ethnicity. Disproportionate representation of minority youth continues to be a problem (See **Figure 29**). Black youth make up **6.0%** of the Nebraska youth population and **23.5%** of the Probation youth out-of-home. Native children are also represented at a rate twice their proportion of the general population.

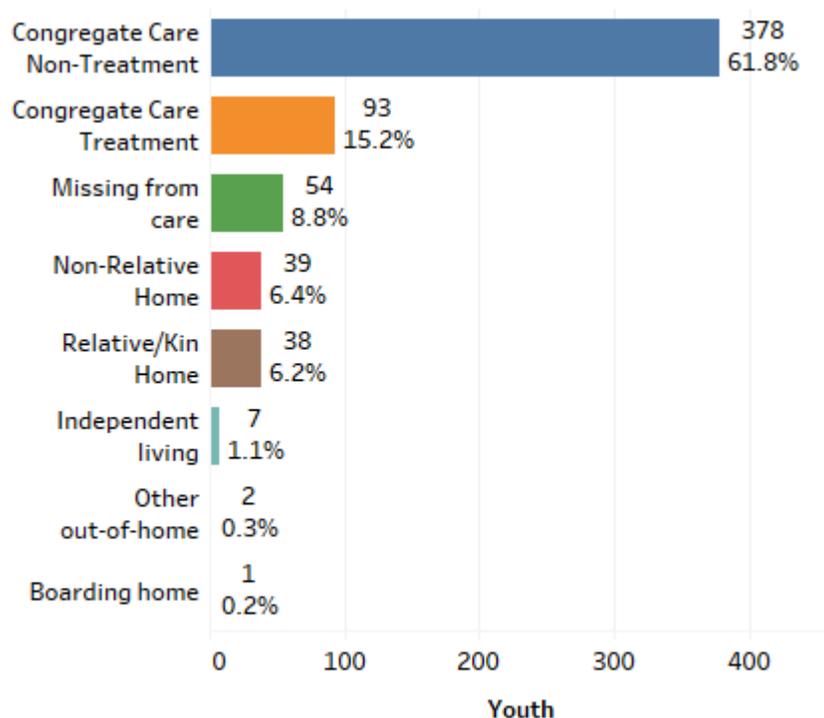
Figure 29: Race and Ethnicity of Probation Supervised Youth in Out-of-Home Care on 9/30/18, n=612

| | | |
|-----------------------------------|-----|-------|
| White | 329 | 53.8% |
| Black or African American | 144 | 23.5% |
| American Indian and Alaska Native | 27 | 4.4% |
| Asian | 5 | 0.8% |
| Two or more races | 21 | 3.4% |
| Unknown or Other | 86 | 14.1% |
| Hispanic | 125 | 20.4% |
| Not Hispanic | 427 | 69.8% |
| Unable to determine | 60 | 9.8% |

Placements

Placement Type. Figure 30 shows that **15.2%** of Probation youth in out-of-home care are in congregate treatment placements. This is a decrease from the all-time high reported in the FCRO Annual Report of 16.1% on 6/30/18, but still an increase from a year ago at the same time (14.4% on 9/30/17). Congregate treatment placements include acute inpatient hospitalization, psychiatric residential treatment facilities, short term residential and treatment group home. Non-treatment congregate care would include crisis stabilization, developmental disability group home, enhanced shelter, group home (A and B), maternity group home (parenting and non-parenting), independent living and shelter.

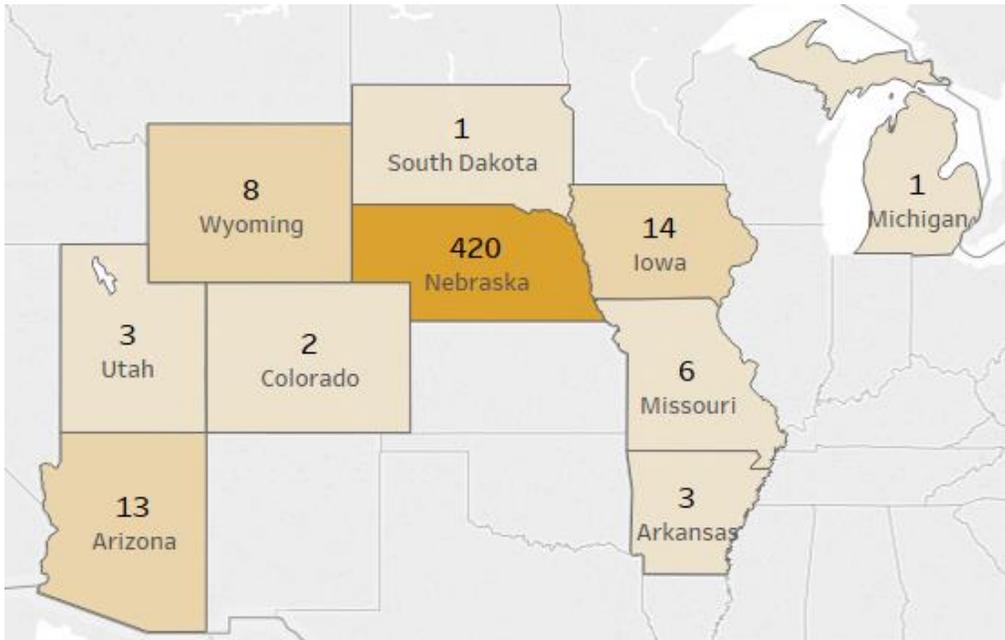
Figure 30: Treatment or Non-Treatment Placements of Probation Supervised Youth in Out-of-Home Care on 9/30/18, n=612



Youth missing from care must always be a top priority as their safety cannot be assured.

Congregate Care. When congregate care is needed, Probation is utilizing in-state placements more frequently. Per Figure 31, **89.2% of youth in congregate care were placed in Nebraska**, compared to 74.6% at the end of 2017, and 85.3% at the end of the 2017-18 fiscal year. Those placed out of state are most frequently in Iowa (**14, 3.0%**), Arizona (**13, 2.8%**) or Wyoming (**8, 1.9%**).

Figure 31: State Where Youth in Congregate Care Supervised by Probation were Placed on 9/30/18, n=471



Youth in Out-of-Home Care with Simultaneous DHHS/CFS and Probation Involvement – Point-in-time (Single Day) View

On 9/30/18, **109 youth were involved with both DHHS/CFS and the Office of Juvenile Probation** (dually-involved youth). The percent of youth dually involved has consistently remained around **2.6%** of the total out-of-home population.

Demographics

County. Dually-involved youth come from all parts of the state, as illustrated in **Figure 32** below, with the majority from the most populous areas (Douglas and Lancaster counties) as would be expected.

Figure 32: Dually-Involved Youth in Out-of-Home or Trial Home Visit Placement on 9/30/18, n=109

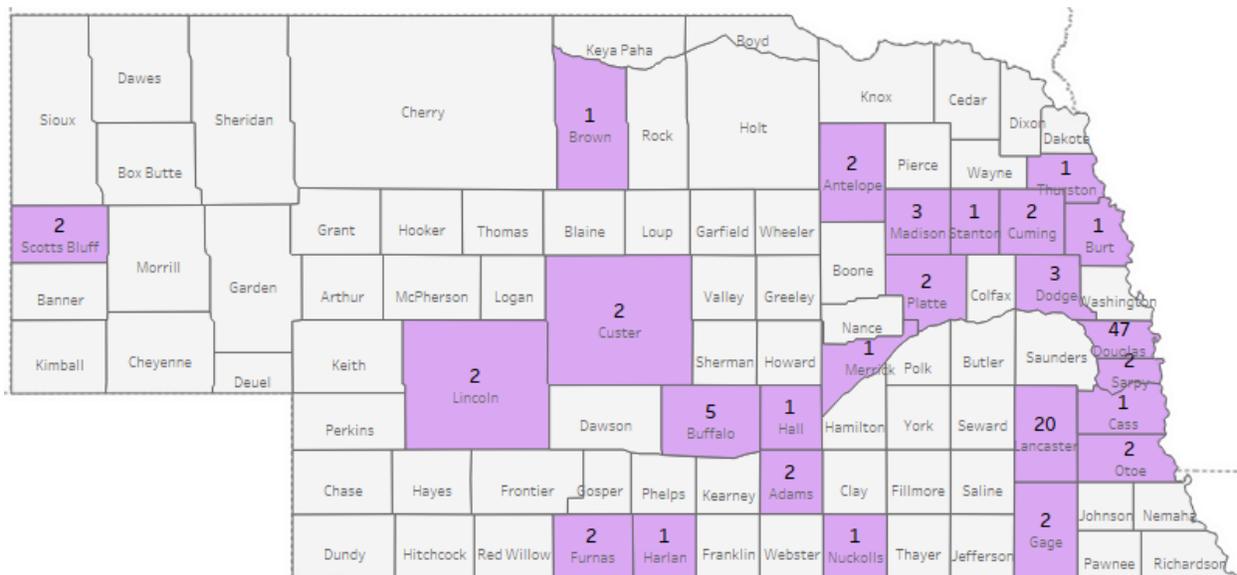
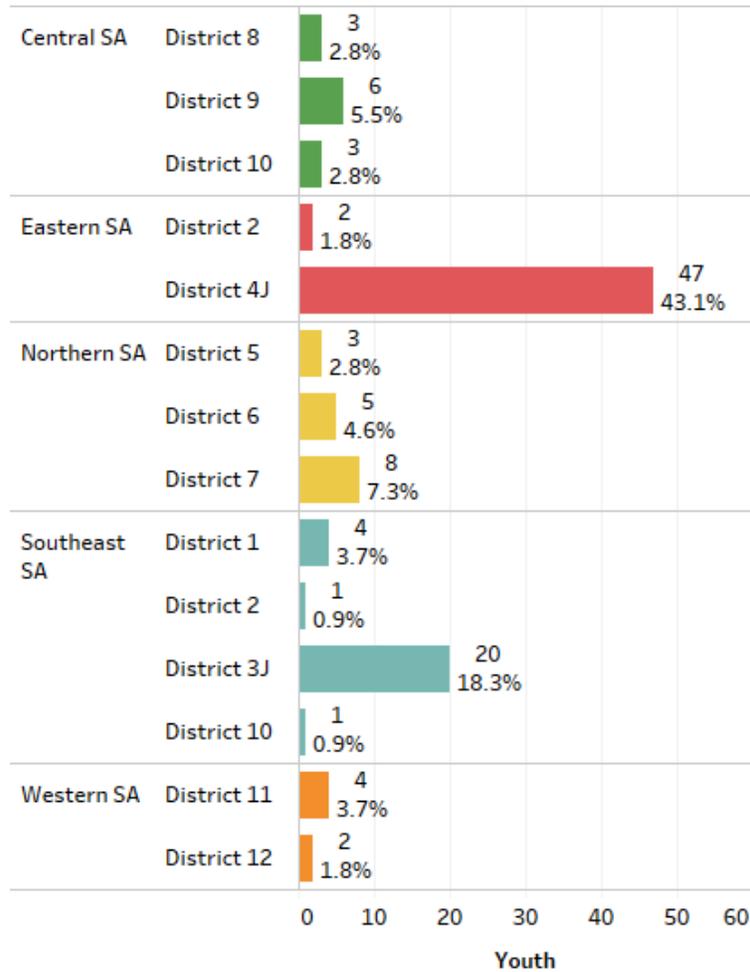


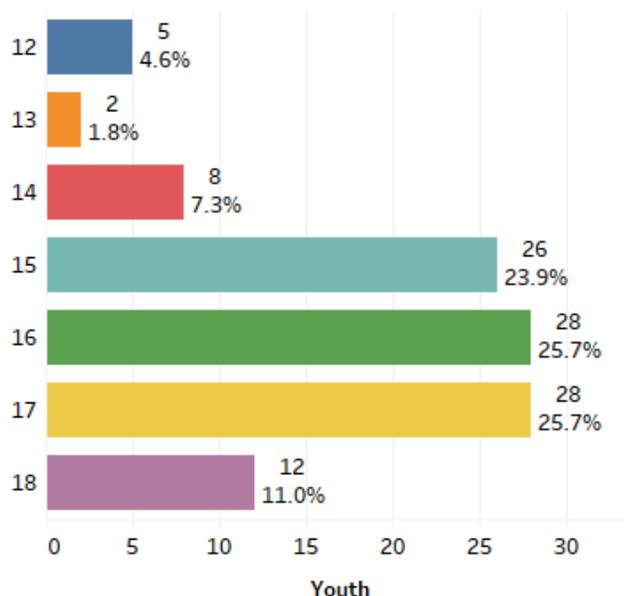
Figure 33 shows how many children are placed in each of the DHHS/CFS or Probation districts.

Figure 33: Dually-Involved Youth in Out-of-Home or Trial Home Visit Placement on 9/30/18, by Statutorily Defined Regions (DHHS/CFS service area followed by Probation region), n=109



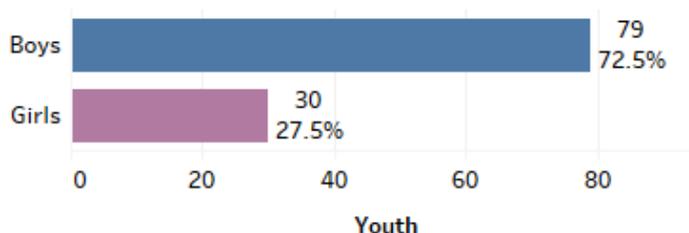
Age. Figure 34 indicates that most dual-agency youth are teenagers, with consistently just over 1/3 (37.6% on 9/30/18) under the age of 16.

Figure 34: Ages of Dually-Involved Youth in Out-of-Home or Trial Home Placement on 9/30/18, n=109



Gender. Figure 35 shows that, as is true with other juvenile justice populations, there are more boys in this group than girls. Over the last year, there has been an increase in the proportion of dually-involved youth who are male. Currently 72.5% of the dually involved population is male, compared to 63.1% in December 2017, 66.7% in March 2018, and 72.3% in June 2018.

Figure 35: Gender of Dually-Involved Youth in Out-of-Home or Trial Home Placement on 9/30/18, n=109



Race and Ethnicity. Black, Native, and multi-racial youth continue to be overrepresented in the dually-involved population. The disproportionality has increased for Black and multi-racial youth since the FCRO Annual report (24.1% and 13.4%, respectively).

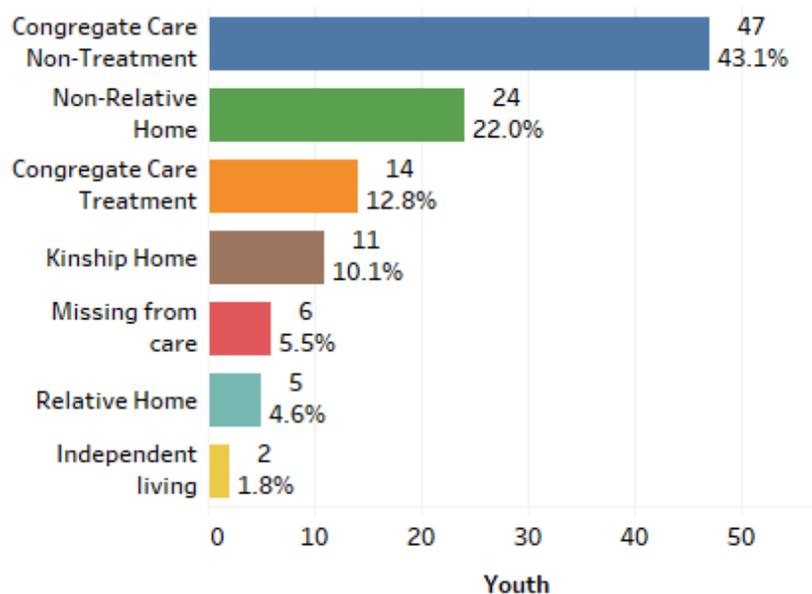
Figure 36: Race of Dually-Involved Youth in Out-of-Home or Trial Home Placement on 9/30/18, n=109

| | | |
|--|----|-------|
| White | 53 | 48.6% |
| Black or African American | 30 | 27.5% |
| American Indian and Alaska Native | 8 | 7.3% |
| Asian | 1 | 0.9% |
| Two or more races | 16 | 14.7% |
| Native Hawaiian and Other Pacific Islander | 1 | 0.9% |
| Hispanic | 18 | 16.5% |
| Not Hispanic | 76 | 69.7% |
| Unable to determine | 15 | 13.8% |

Placements

Placement Type. Figure 37 shows the placement types for youth with dual agency involvement, using Probation’s definitions of treatment and non-treatment found on page 30.

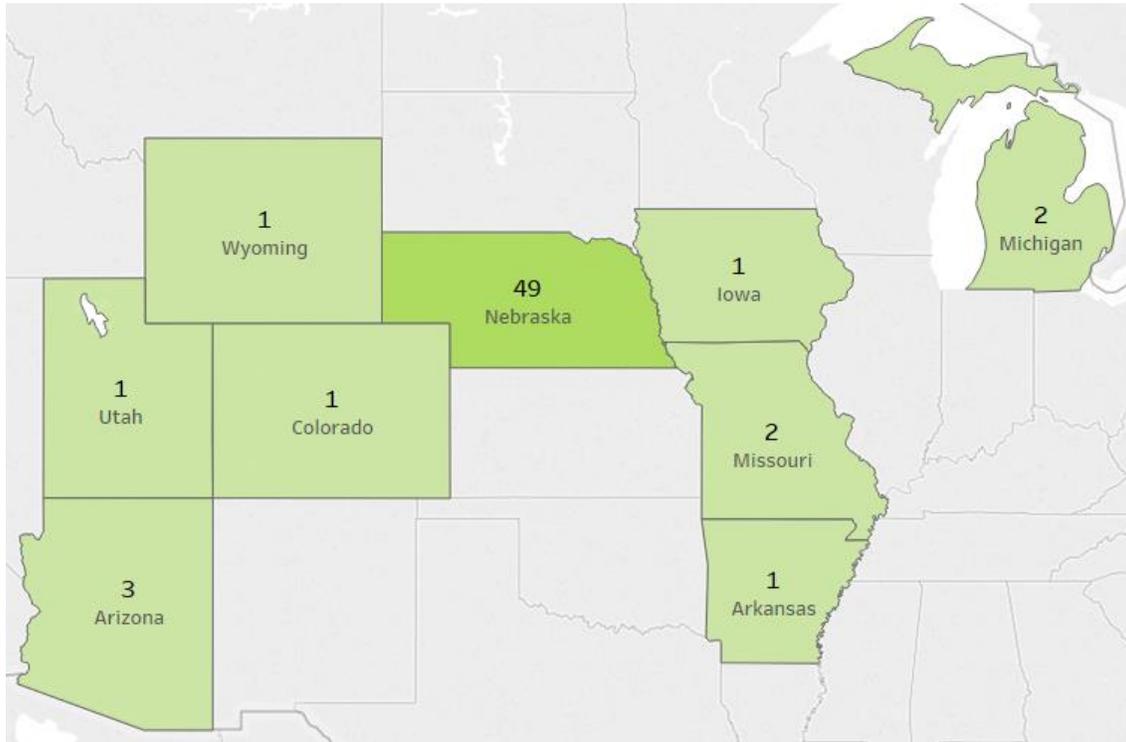
Figure 37: Placement Types for Dually-Involved Youth in Out-of-Home or Trial Home Placement on 9/30/18, n=109



Youth missing from care must always be a top priority as their safety cannot be assured.

Congregate Care. Figure 38 shows the state where dual served youth in congregate care are placed. Similar to the pattern with Probation supervised youth in congregate care facilities, the proportion of dually-involved youth placed in state is increasing (**80.3%, an increase from the 75.4% in March 2018**).

Figure 38: Placement State for Youth in a Congregate Care Facility 9/30/18 that are Served by both DHHS/CFS and Probation, n=61



APPENDIX A: Definitions

- **FCRO** is the Foster Care Review Office, author of this report.
- **DHHS/CFS** is the Department of Health and Human Services (**DHHS**) Division of Children and Family Services.
- **DHHS/OJS** is the Department of Health and Human Services (DHHS) Office of Juvenile Services. **OJS** oversees the **YRTCs**, which are the Youth Rehabilitation and Treatment Centers at Geneva (girls) and Kearney (boys).
- **Probation** is a shortened reference to the Administrative Office of Juvenile Probation Administration.
- **Child** is defined by statute as being age birth through eighteen; in Nebraska a child becomes a legal adult on their 19th birthday.
- **Youth** is a term used by the FCRO in deference to the developmental stage of those involved with the juvenile justice system, who are normally ages 14-18.
- **Out-of-home care** (OOH care) is 24-hour substitute care for children placed away from their parents or guardians and for whom the State agency has placement and care responsibility. This includes, but is not limited to, foster family homes, foster homes of relatives, group homes, emergency shelters, residential treatment facilities, child-care institutions, pre-adoptive homes, detention facilities, youth rehabilitation facilities, and runaways from any of those facility types. It includes court ordered placements and non-court cases.

The FCRO uses the term “out-of-home care” to avoid confusion because some researchers and groups define “**foster care**” narrowly to be only care in foster family homes, while the term “**out-of-home care**” is broader.

- A **trial home visit** (THV) by statute is a temporary placement with the parent from which the child was removed and during which placement the Court and DHHS/CFS remain involved.
- Neb. Rev. Stat. 71-1901(9) defines “**relative placement**” as that where the foster caregiver has a blood, marriage, or adoption relationship, and for Indian children they may also be an extended family member per **ICWA** (which is the Indian Child Welfare Act).
- Per Neb. Rev. Stat. 71-1901(7) “**kinship home**” means a home where a child or children receive foster care and at least one of the primary caretakers has previously lived with or is a trusted adult that has a preexisting, significant relationship with the child or children or a sibling of such child or children pursuant to section 43-1311.02.

APPENDIX B: Background on the FCRO

Role

The FCRO's role under the Foster Care Review Act is to: 1) independently track children in out-of-home care, 2) review those children's cases, 3) collect and analyze data related to the children, 4) identify conditions and outcomes for Nebraska's children in out-of-home care, 5) make recommendations to the child welfare and juvenile justice systems on needed corrective actions, and 6) inform policy makers and the public on issues related to out-of-home care.

The FCRO is an independent state agency not affiliated with DHHS/CFS, DHHS/OJS, PromiseShip or other contractors, Courts, the Office of Probation, or any other entity.

Mission

The FCRO's mission is to provide oversight of the child welfare and juvenile justice systems by tracking and reviewing children in out-of-home care, reporting on aggregate outcomes, and advocating on individual and systemic levels to ensure that children's best interests and safety needs are met.

Vision

Every child involved in the child welfare or juvenile justice system becomes resilient, safe, healthy, and economically secure.

Purpose of FCRO Reviews

The FCRO was established as an independent agency to review case plans of children in foster care. The purpose of reviews is to assure that appropriate goals have been set for the child, that realistic time limits have been set for the accomplishment of these goals, that efforts are being made by all parties to achieve these goals, that appropriate services are being delivered to the child and/or his or her family, and that long range planning has been done to ensure timely and appropriate permanency for the child, whether through a return to a home where conditions have changed, adoption, guardianship, or another plan.

Purpose for the FCRO Tracking/Data System

The FCRO is mandated to maintain an independent tracking/data system of all children in out-of-home placement in the State. The tracking system is used to provide information about numbers of children entering and leaving care, children's needs, outcomes, and trends in foster care, including data collected as part of the review process, and for internal processes.

About this Report

Data quoted within this Report are from the FCRO's independent data tracking system and FCRO completed case file reviews unless otherwise noted.

Neb. Rev. Statute §43-1303 requires DHHS/CFS (whether by direct staff or contractors), courts, the Office of Probation, and child-placing agencies to report to the FCRO any child's out-of-home placement, as well as changes in the child's status (e.g., placement changes and worker changes). By comparing information from multiple sources the FCRO is able to identify discrepancies. When case files of children are reviewed, previously received information is verified, updated, and additional information is gathered. Prior to individual case review reports being issued, additional quality control steps are taken.

Please feel free to contact us if there is a specific topic on which you would like more information, or check our website ([www.fcro.www.fcro.nebraska.gov](http://www.fcro.nebraska.gov)) for past annual and quarterly reports and other topics of interest.

Appendix C: Response from the Department of Health and Human Services

NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

November 9, 2018

Kim B. Hawekotte, Executive Director
Foster Care Review Office
1225 L Street, Suite 401
Lincoln, NE 68508

Dear Director Hawekotte:

Thank you for the opportunity to respond to the recommendations made in the 9/1/2018 FCRO Annual Report as you prepare your upcoming quarterly report. The Division of Children and Family Services has attached our responses to those recommendations.

Thank you for the collaboration.

Sincerely,

A handwritten signature in blue ink, appearing to read "Matthew T. Wallen".

Matthew T. Wallen, Director
Children and Family Services
Department of Health and Human Services

Helping People Live Better Lives

To DHHS:

1. Establish an effective, evidence-supported, goal driven, out-come based service array throughout the State to meet the needs of children and families involved in the child welfare system to include the following:

- a. Preventative services for neglect and substance use in collaboration with DHHS Behavioral Health;

Both CFS and DBH have been meeting with the therapeutic community providers in the state who provide substance abuse treatment with models where the mothers and children can live together and not be separated due to a mother's treatment. These meetings have focused on establishing performance goals for these providers to show the great work that is going on and how the service is potentially preventing entry into the child welfare system. Additionally, through the passage of the federal Family First Prevention Services Act (FFPSA), these meetings have turned to look at how child welfare federal IV-E dollars can assist with the costs of caring for the children who are living with their mothers in therapeutic communities. CFS also worked with The Bridge in Hastings (therapeutic community) to expand capacity for rural families so they didn't have to travel to Lincoln or Omaha to receive treatment.

In addition we continue to partner with the Nebraska Children and Families Foundation, community collaborative and state and national partners on a statewide prevention initiative called Bring Up Nebraska. Bring Up Nebraska believes local communities are best situated and most motivated to understand their own needs and strengths as they relate to (1) reducing entry into the child welfare system and other higher system of care and (2) increasing informal and formal community supports for children and families.

- b. Out-of-home services such a family support and parenting time services that have the least traumatic impact on children.

In compliance with FFPSA we are moving towards evidenced based practices for all in home parenting services. Through the past year, we have been increasingly using Circle of Security classes for parenting education. This is an evidence based program that allows parents to reflect on how they were parented and how that affects their parenting for their children. This fall we entered into a contract with the Nebraska Association for the Education of Young Children to coordinate and enroll referred families into the class that works best for them building on family voice and choice.

- c. Stabilization of placements and recruitment of foster parents based upon the needs of the child/children in collaboration with foster care providers;

Contracted agency supported foster care providers are funded to recruit foster homes to meet the needs of the children in need of a foster care placement. These discussions occur in family team meetings as well as local and statewide provider

meetings. CFS will continue to identify relative and kinship homes to support children they have a significant relationship with who may provide permanency if family preservation and/or reunification services are not successful.

- d. Creation of treatment foster care services which actively engage families and would meet the needs of older children;

In this past year, meetings have occurred within the foster care system to develop a therapeutic foster care service definition to meet the needs of this population based on the input of various stakeholders.

During these meetings with stakeholders there was also discussion exploring the possibility of implementing this service to meet the needs of children and families. Meetings will continue to explore opportunities to implement therapeutic foster care services.

- e. In-home supports for foster parents especially relative/kin placements;

Contracted agency supported foster care providers are funded to provide in home supports to all their foster parents to ensure placement stability. Resource Development staff within CFS provide monthly contact and support to relative and kinship foster parents who are not supported by a contracted agency. In addition, CFSS may approve additional wraparound services to ensure placement stability in non-agency contracted homes.

- f. Mental and behavioral services for children in collaborations with DHHS Behavioral Health;

CFS has been an active participant in the Children's System of Care efforts on a statewide level as well as the local team meetings. Children's System of Care work is led by the Division of Behavioral Health (DBH) and is about stakeholders partnering to ensure families have access to the services they need so that a child does not have to be a part of one "system" to receive those services. Through Children's System of Care, Mobile Crisis Response for children is available in all jurisdictions of the state. Through this past year Therapeutic Consultation for school systems was also implemented in several rural schools who may not have the resources they need to address the behavioral health needs of children. Through System of Care, CFS also partnered with Region 2 behavioral health services and the North Platte Community Collaborative to pilot Family Centered Treatment (an evidence based model of intensive in-home service) for the North Platte, McCook, and Lexington communities. The first families will be served in November 2018 and do not have to be involved with child welfare to have access as there are several sources of funding blended to provide service sustainability.

- g. Developmental disability services for children in collaboration with DHHS Developmental Disabilities; and

CFS and DDD continue to meet on a regular basis to understand the eligibility criteria for the waiver program and what DDD needs from families or CFS to make an accurate eligibility determination.

- h. Enhanced services and case management for older children.

Nebraska offers extended foster care services to individuals who select to participate in them under the Bridge to Independence Program.

Effective October 1st, CFS and the Administrative Office of Probation began practicing the Crossover Children Model statewide. The Crossover Children Model is an evidence based model of case management for children that are dually involved in both child welfare and probation cases. The crux of the model is clear and consistent communication between both the probation officer and the child welfare worker. It allows for joint family team meetings as well as joint court dates. While the number of children that crossover both systems is relatively small, CFS and probation also recognize that these children tend to utilize the most intensive services. By better coordination of the systems for these high risk children, taxpayer dollars are utilized more efficiently and most importantly, the families and children receive more effective support from state systems.

Even though DHHS retains case management for children, DHHS believes that ultimately, providing services for older children and young adults needs to come from the community in which they live, as this will strengthen the connectedness between the children and the community. DHHS has worked closely with previous participants in the child welfare system to enhance services for older children by working collaboratively on the newly awarded grants around children homelessness and services for pregnant and parenting children. Additionally, DHHS has provided specific outcomes for services funded by Chafee funds focusing around informal connections, stable housing and transportation.

- 2. Establish clear and concise policy and procedures with regard to effective safety planning to include clear expectations for the families and mechanisms to ensure compliance with the safety plan. This is true whether the safety plan involves a court-involved case or non-court case or out-of-home placement.

To assist case managers in their safety planning with families, CFS developed a tool for case managers to use in their conversations with families about possible interventions or services that can be utilized with specific safety threats that are identified through the SDM Safety Assessment. The tool does not take the place of the safety plan nor does it replace the important conversation that has to be had with families. It simply helps the case manager, in the moments of when they may be under a lot of stress, to think clearly about what is available in the community

as well as what is available within the family's network to provide safety for the child(ren) involved.

CFS is implementing Safety Organized Practice (SOP). The tools and practices included in SOP will add concepts and practices for CFS staff to enhance engagement with children and families to create a shared focus among all the stakeholders; to help stakeholders consider complicated and ambiguous case information together and sorting it into meaningful categories; and clearing the way for stakeholders to engage in rigorous, sustainable, consistent on the ground child safety efforts.

SOP provides additional structure that will help guide workers, families and network supports in developing well-formed goals and building strong safety networks. SOP pushes all of us to work with the families' network of supports in safety planning, as well as formal services, to build a safety plan and to teach parents how to provide a protective environment within their existing network to keep their children safe. SOP and current practice require safety planning for both court and non-court involved cases when an active safety threat exists.

To Multi-System Stakeholders:

1. Complete a collaborative study on how children move from the child welfare system to the juvenile justice system to the adult correctional system.
2. Complete a collaborative study regarding creation of a systemic response when a child or family is in crisis. This must be based on the needs of the child and not just on the fastest or easiest way to access services. Too often, the child welfare system is the quickest way to access services but not always the most appropriate and even sometimes can do the most harm to the child. This study should include ways to break down silos within DHHS to ensure that the most appropriate DHHS division is meeting the short-term and long-term needs of the child and family. This study must also include an evaluation of the various State and federal funding sources for each of these divisions and re-appropriation of funds between DHHS divisions as needed.

Appendix D: Response from the Office of Probation Administration

Corey R. Steel
State Court Administrator



Ellen Fabian Brokofsky
State Probation Administrator

October 26, 2018

Kim Hawekotte, Executive Director
Foster Care Review Office
1225 L Street, Suite 401
Lincoln, NE 68508-2139

Re: Response to Foster Care Review Office Annual Report, dated September 1, 2018

Ms. Hawekotte:

As outlined in statute, the Probation Administrator establishes and maintains policies, standards and procedures for the system with the concurrence of the Supreme Court. Additionally, as further outlined, the Administrative Office of the Courts & Probation cooperates with all agencies which are concerned with treatment or welfare of persons on probation. As such, the reports, findings, and recommendations of the Foster Care Review Office are taken seriously. The recommendations from each report are thoroughly reviewed and are included as considerations within Probation's ongoing evaluation of its evidence-based practices and policies. We appreciate the recognition of our partnership with the Robert F. Kennedy National Resource Center for Juvenile Justice to conduct a Probation System Review in Lancaster County. This work was graciously funded through grant dollars from State Justice Institute. FCRO report recommendations are also beneficial in evaluating judicial branch education and training targeted to Probation system employees. Probation's ongoing evaluation of its evidence-based practices and juvenile justice reform efforts are addressed, in part, on the Supreme Court's website, with several web links which will provide insight into some of the Juvenile Services Division initiatives and projects aimed at improving the provision of services within the juvenile justice system. For example, the following web addresses may be of value in gauging the efficacy of Probation's programs and services aimed at Nebraska youth.

Administrative Office of the Courts & Probation
P. O. Box 98910, Lincoln, Nebraska 68509-8910
www.supremecourt.nebraska.gov
Phone (402) 471-3730
Fax (402) 471-2197

- Juvenile Services Division at: <https://supremecourt.nebraska.gov/probation/juvenile>
- Annual Statistical Report of Juvenile Justice System, 2016 and 2017 at: <https://supremecourt.nebraska.gov/probation/juvenile> (Detailed Analyses)
- Specific Reports on Probation's Juvenile Justice Reform (including statistical charts): <https://supremecourt.nebraska.gov/probation/juvenile> (see Juvenile Justice Reform Efforts after clicking on Resources/Publications)
- Biannual Supreme Court Strategic Agenda: <https://supremecourt.nebraska.gov/sites/default/files/2017-2019-strategic-agenda.pdf>

All of this information cited above reflects Probation's commitment to improving the lives of Nebraska juveniles which are placed under our supervision by the courts, highlights the progress we have made, and our commitment to future improvements within the Probation system.

Sincerely,



Jeanne K. Brandner
Deputy Administrator, Juvenile Services Division

cc: Ellen Brokofsky, State Probation Administrator
Corey Steel, State Court Administrator
Kari Rumbaugh, Assistant Deputy Administrator, Juvenile Services Division

Appendix E: Recommendations from Sept. 2018 Annual Report

Based on factors described throughout the Annual Report, the FCRO made the following recommendations.

Legislative:

1. Conduct a legislative study examining changes needed to the juvenile court jurisdiction statute found at Neb. Rev. Stat. §43-247 and ways to improve the prosecutorial model used in Nebraska to effectively address the needs of children and families. This study must include the following: a) the scope of the legal ability of the court in delinquency actions to require parents to participate in services; b) the legal definitions regarding a no-fault abuse/neglect filing and a status offender filing; c) the legal definitions regarding a juvenile mental health commitment filing; and d) ways to achieve consistency in the filing of juvenile court actions.
2. Conduct a legislative study to assist in developing an external oversight system for non-court child welfare families, which would include compliance with DHHS-CFS policy and Nebraska statutes and the need and availability of services statewide to ensure children remain safe and their best interests remain at the forefront.
3. Enact legislation requiring that all children/youth involved in the child welfare and juvenile justice system must attend every court hearing after adjudication unless the court waives their presence after a court hearing. By keeping the child/youth at the forefront, this requires all parties to be trauma-informed and sensitive to their needs.
4. Enact legislation requiring that all relative and kinship placements must obtain a child-specific foster care license within 120 days of placement. This legislation must include the requirement that DHHS, through its regulations, create the process for obtaining a child-specific foster care license.
5. Enact legislation ensuring that all youth involved in the juvenile justice system have access to court-appointed legal counsel unless waived by the youth.
6. Enact legislation amending the Nebraska statutes regarding the legal basis for the termination of parental rights and the process for the filing of these legal actions.

Judicial System:

1. Require that all guardians ad litem must receive a copy of the home study prior to placement of a child in a home or within 60 days if the placement is the first placement of a child.
2. Ensure compliance with the Supreme Courts' Progression Standards for juvenile court.
3. Explore the feasibility and impact of court review hearings held every three months instead of every six months to increase accountability across the system.
4. Ensure that the child/youth's voice is integrated into all legal proceedings including appearance at court hearings and involvement in all aspects of case planning.

DHHS:

1. Establish an effective, evidence-supported, goal-driven, outcome based service array throughout the State to meet the needs of children and families involved in the child welfare system to include the following:
 - Preventative services for neglect and substance use in collaboration with DHHS Behavioral Health;
 - Out-of-home services such a family support and parenting time services that have the least traumatic impact on children.
 - Stabilization of placements and recruitment of foster parents based upon the needs of the child/youth in collaboration with foster care providers;
 - Creation of treatment foster care services which actively engage families and would meet the needs of older youth;
 - In-home supports for foster parents especially relative/kin placements;
 - Mental and behavioral services for children/youth in collaboration with DHHS Behavioral Health;
 - Developmental disability services for children/youth in collaboration with DHHS Developmental Disabilities; and
 - Enhanced services and case management for older youth.
2. Establish clear and concise policy and procedures with regard to effective safety planning to include clear expectations for the families and mechanisms to ensure compliance with the safety plan. This is true whether the safety plan involves a court-involved case or non-court case or out-of-home placement.

Juvenile Probation:

1. Determine the feasibility of replicating the Robert F Kennedy National Resource Center for Juvenile Justice System's Assessment in District 4J (Douglas County).
2. Establish an effective, evidence-supported, goal driven, out-come based service array throughout the State to meet the needs of youth involved in the juvenile justice system to include the following:
 - a. Community based services prior to being placed out-of-home;
 - b. Recruitment and retention of foster homes to meet the needs of probation youth;
 - c. Creation of services for parents to assist in managing the behaviors of their youth;
3. Creation of concrete action steps when parents' issues prevent a youth from returning home in collaboration with all juvenile justice stakeholders.

Multi-System Stakeholders:

1. Complete a collaborative study on how children move from the child welfare system to the juvenile justice system to the adult correctional system.
2. Complete a collaborative study regarding creation of a systemic response when a child or family is in crisis. This must be based on the needs of the child and not just on the fastest or easiest way to access services. Too often, the child welfare system is the quickest way to access services but not always the most appropriate and even sometimes can do the most harm to the child. This study should include ways to break down silos within DHHS to ensure that the most appropriate DHHS division is meeting the short-term and long-term needs of the child and family. This study must also include an evaluation of the various State and federal funding sources for each of these divisions and re-appropriation of funds between DHHS divisions as needed.

The FCRO encourages everyone involved in the child welfare system to consider all policies and practices to ensure that each child is better off when he or she leaves out-of-home care than they were when they entered.

Similarly, the FCRO encourages all involved with youth in juvenile justice who are placed out-of-home to consider policies and practices to safely reduce risk while maintaining more youth in the familial home.

Contact Information

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