The Nebraska Foster Care Review Office Quarterly Report



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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 [foster] care as defined by statute, as well as to recommend needed changes as required.

The format for this report is somewhat different than recent reports. The report contains baseline data, but also includes key stakeholder updates on recommendations the FCRO made in the June 2017 report regarding the child welfare and juvenile justice systems.

Our State continues to face serious fiscal shortfalls. Stakeholders need to implement targeted solutions with fidelity in order to effectively utilize limited resources so that children's basic needs are met. The primary focus must be on building the capabilities of **ALL** the important adults whom these vulnerable children rely on. There are no easy solutions, but there are impactful solutions.

Section I – Updates to Previous FCRO Recommendations

The Foster Care Review Office makes recommendations to the child welfare and juvenile justice systems in every quarterly and annual report, as required by statute.

This section includes a summary of the FCRO recommendations from the June 2017 Quarterly Report and responses to those recommendations from child welfare and juvenile justice stakeholders. The report separates child welfare and juvenile justice recommendations, presented respectively.

Senior administrators from the Department of Health and Human Services Division of Child and Family Services (hereafter referred to as DHHS/CFS) and Nebraska Family Collaborative (NFC) provided updates to the child welfare system recommendations. The Administrative Office of the Courts & Probation – Juvenile Division (Probation) provided updates to the juvenile justice recommendations.

Also included are further/continuing recommendations made by the FCRO pursuant to its statutory duties regarding system improvement and additional information needed by policy-makers and stakeholders.

FCRO June 2017 Recommendations to the Child Welfare System

1. Reasons for the trend of more children entering the child welfare system than exiting need to determined, including why there are regional variances. In particular there needs to be an analysis of why the Southeast and Western Service areas had entries into foster care at faster rates than other areas when measured in past quarterly reports.

DHHS/CFS updates and response to the FCRO recommendation:

DHHS/CFS data shows that the raw number of calls to the hotline have not increased substantially and data does not show a large increase in investigations. In addition DHHS/CFS recently had an analysis done of fidelity to the Structured Decision Making (SDM) intake tool used to determine appropriate response to calls, and found that there was fidelity to this evidence-based tool.

The child welfare system has an obligation to analyze both the entries and exits and to determine what regional differences exist with respect to entries into out-of-home care and whether the median time in care is a function of more difficult to treat issues, other systemic issues, or a combination of both.

DHHS/CFS will continue to look at median time in care by service area for cases that exit the system as part of the process of identifying differences between service areas. The FCRO will continue monitoring regional and other differences from state norms, as well as statewide performance regarding safety, permanency, and well-being.

In addition to the above, there are some <u>natural expected patterns on entrances and</u> <u>exits from foster care</u>. For example, looking at DHHS/CFS three year data, which matches trends seen by the FCRO:

- There are more abuse reports, and hence removals, from the home when school starts each year.
- There are more exits when the school year is done and judges start to move more children home.

<u>DHHS/CFS business plan</u> discussed the following related to the number in out-of-home care: 1) plans to reduce the percentage of children in out-of-home placements to 55% of DHHS/CFS involved by June 30, 2018, and 2) as now allowed by law, it will expand alternative response (AR) to the remaining 35 counties and work toward having less than 10% of families receiving AR have children removed within six months.

NFC (the DHHS/CFS lead agency serving metro Omaha) response¹ to the FCRO recommendation:

NFC has been looking closely at Eastern Service Area entry and exit data for a number of years. Exit rates from the child welfare system are a function of entry rates. For example, there were fewer entries in 2014 than in previous years, and the data shows the length of stay for a youth in out-of-home care in ESA averages 16-20 months, NFC would expect to see a reduced number of exits in 2015. As entries increase, the system will experience increased exits 16-20 months later. NFC agrees that regional variances in entries should be examined and analyzed.

<u>Next steps</u>. The FCRO and DHHS/CFS will continue to monitor trends regarding the number of children in out-of-home care or trial home visit (both statewide and regional) and the impact of other actions now underway described elsewhere in this report on these numbers. We will continue to explore interventions to safely reduce the number of children in the child welfare system. The emphasis of these interventions will not only be on the numbers, but also on whether the right children and families are receiving the correct services at the right time.

Additional information from the FCRO:

<u>Regarding length of stay</u> – The FCRO agrees with NFC, in that exit patterns are a function of both entry rates and length of stay; patterns in entries from several months back will affect the exits for the current month. Reviewing exits and entries for a single month is helpful in determining changes to the volume of children in care. Reducing the average time children spend in out-of-home care is a critical component of reducing the overall number of children in care.

¹ The full letter from NFC is available in Appendix B.

Case duration is also impacted by issues not directly related to parent deficits, such as caseworker vacancies (both DHHS and NFC), workloads, delays in getting court dates, appellate delays, judicial discretion in decision-making, prosecution differences, waiting lists for treatments or services, and other stakeholder issues.

Acknowledging cycles impacting total populations is important because rather than staffing for averages, the state's **staffing levels need to be sufficient to keep children safe even at the peak periods**. One can imagine the negative impact on caseworker morale and retention if workers know there will be periods throughout the year where they may be unable to fully address the needs of all the children in the system or when there is a constant backlog of critical cases.

2. For those children that truly need out-of-home care due to a safety issue, identify and use the resources that are most impactful in achieving permanency in an expedient way. If safety issues no longer remain, identify and eliminate barriers to timely permanency.

DHHS/CFS updates and response to the FCRO recommendation:

Some specific efforts underway that should help to address this issue include the following:

- DHHS/CFS will strengthen the <u>In-Home Safety Services</u> to ensure it is immediately accessible and able to assist families to identify persons who may be able to help the family with safety, stability, and support.
- <u>System of Care</u> may help by integrating mental health services and supports for children and youth who suffer trauma-related after effects who are not Medicaid eligible.
- Expand <u>alternative response</u> in all 93 counties
- Heritage Health provides coordinated health care services through their care management system to meet the physical, behavioral and pharmaceutical needs of children and parents who are Medicaid eligible.
- DHHS/CFS will continue to partner with its divisional partners to ensure that it maximizes the services available from DHHS to support families in the least restrictive manner possible.

In addition, August 24, 2017, legislation took effect that allows juvenile courts to issue bridge orders to provide for <u>custody redeterminations</u> for children who cannot return to the home of origin but are safely with non-custodial parents in out-of-home care. Since this has just become effective it is too early to see how many children will benefit from this provision; however, on June 30, 2017, there were 401 children in out-of-home care with the non-custodial parent.

<u>Next steps</u>. The FCRO and DHHS/CFS will continue to monitor length of time in care trends (both statewide and regional). We will consider FCRO data on service provision

assess whether children and families are receiving the right services for the right duration to ensure children's safety.

Additional information from the FCRO:

A question that has yet to be resolved is "how much, if any, time and energy needs to be spent to rehabilitate the custodial parent if a suitable non-custodial parent exists that could provide safe care for the children?" This is a question that impacts children, the system as a whole, and the individual rights of the mothers and fathers involved.

3. The length of stay needs to decrease for all state wards in out-of-home

care because the longer a child is in out-of-home care, the more long-lasting damage is being done to the child that often continues into their adult years. Further, the current pattern of having more children in the child welfare system for longer periods of time is stretching finite resources to their limits.

DHHS/CFS updates and response to the FCRO recommendation:

DHHS/CFS is working with the Court Improvement Project (CIP) to increase the number of cases that find permanency within 12 months.

DHHS/CFS has looked at a six month entry cohort that entered 18 months ago with a plan of reunification to see how many have achieved permanency within that timeframe and by location of the court involved with the case. There was a wide variance. Children whose parents are involved in a drug court tend to remain in care longer. Other courts range from 7%-78% that achieve permanency in 18 months (some courts have only a few cases); the statewide average is 34% of the cases close within 18 months.

DHHS/CFS is currently reviewing barriers to permanency for children that have been in an out-of-home placement for longer than 24 months. After conducting this review it is the Department's intent to eliminate the barriers and identify permanent placements for this group of children.

NFC (the DHHS/CFS lead agency serving metro Omaha) response to the FCRO recommendation:

NFC agrees that the long-term effects of trauma are exacerbated the longer a child remains in out-of-home care, and therefore, NFC is committed to placing children in the right setting to meet their needs and engaging with other systems of care, such as the Nebraska Division of Developmental Disabilities and Medicaid, to meet the identified needs of children and families with multi-system involvement.

<u>Next steps</u>. The FCRO and DHHS/CFS will continue to monitor length of time in care trends (both statewide and regional), and will reach out to the Court Improvement Project to positively impact case progression and other court processes.

DHHS will review nationwide trends to obtain child support from both parents when their child(ren) are placed into an out-of-home setting. Parental engagement strategies will be identified and implemented based on promising practices identified nationwide.

Additional information from the FCRO:

There are also court-related issues impacting length of stay. An extremely adversarial atmosphere can exacerbate caseworker retention issues and stifle workers making sound recommendations to the courts. There is no question that caseworker changes can increase the length of time that children spend in out-of-home care. Worker retention and turnover must be prioritized by all system partners.

Other court-related issues include judges **not consistently making the findings required for exception hearings** at 15 of the past 22 months in care.² In addition, there is currently no statutory requirement that courts reconsider exceptions to termination if the case remains open longer than 15 months. This causes cases to languish in the court system with no permanency for the child. In addition, consideration needs to be made of whether legally allowing an exception "due to placement with a relative" defeats the exception hearing's purpose of trying to move cases towards a more timely permanency. The Legal Parties Taskforce of the Children's Commission is working on proposed legislative changes.

4. A collaborative Barriers to Permanency special study needs to occur,

with a multi-prong approach – collect in-depth data on children in out-of-home care over a certain threshold period (such as 18 months), conduct thoughtful analysis of that data, identify and implement recommended practice changes for child welfare stakeholders, and measure the impact. Ideally this would be patterned after a 2014 collaborative study that involved DHHS/CFS and its lead agency, the Office of Inspector General for Child Welfare, the Court Improvement Project, and the Foster Care Review Office.

DHHS/CFS updates and response to the FCRO recommendation:

Due to legislation regarding bridge orders just taking effect, a number of DHHS/CFS initiatives being in the starting stages, and the need to allow time for more collaborative work and development of newly gathered statistics, it was decided that consideration of a new barriers to permanency special study would be temporarily postponed until next spring.

As was previously mentioned, DHHS/CFS is currently reviewing barriers to permanency for children that have been in an out-of-home placement for longer than 24 months. After conducting this review it is the Department's intent to eliminate the barriers and identify permanent placements for this group of children. DHHS/CFS is also researching other

 $^{^{2}}$ At the exception hearing the court is to rule on whether there is a legally allowed exception to the filing of termination of parental rights against parents when children have been out-of-home for 15 of the past 22 months. In best practice some courts set the date of the exception hearing at the adjudication or the disposition hearing, putting parents on notice that they have a short time in which to resolve the issues that led to their children's removal from the home.

states who upon removal place with a noncustodial parent to see if other states obtain a bridge order and dismiss.

<u>Next steps</u>. The FCRO and DHHS/CFS will meet in the spring of 2018 to discuss the possibilities for this project. DHHS/CFS will focus on engaging former foster children who have aged out of the system to gain the child's perspective on the systematic issues they faced.

5. DHHS/CFS and its contractor NFC should continue to focus on caseworker recruitment and retention, thereby increasing stability in the lives of youth in foster care. Caseworker changes, which are controlled by the system, have a serious impact on case progression and length of stay.

DHHS/CFS updates and response to the FCRO recommendation:

DHHS/CFS has implemented a variety of statewide strategies designed to improve retention of child welfare case managers. Through the collaborative efforts of NFC, the University of Nebraska-Omaha (UNO), the Omaha-based Child Advocacy Center Project Harmony, and DHHS/CFS, a statewide <u>Master's Degree Cohort Program</u> was implemented in the fall of 2016. Through the use of Title IV-E education stipend, eight students currently receive 100% of tuition costs for employees working toward a Master's Degree in social work.

In the summer of 2016, DHHS/CFS launched a <u>Realistic Job Preview</u> video as a strategy to educate potential applicants on the realistic aspects of child welfare case management as an attempt to "hire right."

In 2016, DHHS/CFS hired a consultant to conduct a <u>comprehensive review of the pre-</u> <u>service training</u> offered to new case managers. Recommendations made by the training consultant were implemented May 15,[,] 2017, and included increasing the number of trainings offered in the local offices through the use of technology; decreasing the number of classroom trainings involving travel; creating additional shadowing experiences for trainees when they are not in the classroom; and decreasing the number of families assigned to new workers during their training experience.

Beginning in February 2017, supervisors attend one hour training sessions over a six month period in order to focus on building skill sets that are directly related to improving the retention of case managers.

In July 2017, DHHS/CFS implemented a <u>continuous hiring process</u> that allows for DHHS/CFS case manager vacant positions to be continually posted on the NE State Jobs website where turnover is most prevalent. Having positions continually posted will expedite the hiring process and decrease the amount of time a position is vacant.

NFC (the DHHS/CFS lead agency serving metro Omaha) response to the FCRO recommendation:

NFC's Board of Directors has established workforce recruitment and retention as one of its highest priorities and it is part of the NFC strategic plan. NFC has implemented a

number of innovative strategies to recruit high-quality talent, and also to retain its trained and experienced workforce. For example, NFC has implemented a career ladder for Family Permanency Specialists (FPSs) and a new on-call system that reduces on-call obligations for FPSs which has alleviated related workplace stress. In collaboration with the University of Nebraska Omaha, DHHS, and Project Harmony, NFC has obtained private funding for five NFC employees to obtain their MSWs. In addition, NFC has developed a close working relationship with schools of social work across the region, and we currently have six social work student interns for the fall semester. Systemic barriers continue to challenge NFC, such as an overall shortage of qualified applicants in the field, and experienced case management professionals leaving to pursue other career options. Despite these challenges, NFC was within 96% of state mandated caseload ratios on August 23, 2017.

<u>Next steps</u>. DHHS/CFS will continue to explore innovative ways to improve recruitment and retention of caseworkers.

Additional information from the FCRO:

<u>Caseloads are just one component of workloads</u>. Historically, Nebraska has utilized a caseload approach based on the CWLA framework to measure the caseloads of DHHS case managers. This process is essentially a simple combination sum of the number of cases assigned to each case manager. This count includes all the work types across Nebraska, including Initial Assessment, Non-Court families, In-home and Out-of-home Court youth, as well as Alternative Response families.

The amount of actual work per youth or family varies significantly depending on the type of work, the case characteristics, or the time the case has been open, among many other factors. Additionally, staff in training are typically allowed four families for perhaps up to six months rather than a full load. Accordingly, there are numerous deficiencies in terms of the CWLA model accurately determining workload for each of the Case Managers.

The FCRO recommends that a time study be completed for case managers across the state. This time study will assist in determining three areas: technological improvements that can be implemented to assist in completing needed tasks; type of personnel needs that could assist in enhancing job performance; and creation and implementation of weighted caseload standards based upon the needs of the children and families being served. Worker recruitment and retention are directly impacted by the amount of work required and the ability for case managers to be able to effectively practice social work.

6. The number of moves between foster placements for children in outof-home care needs to be minimized as there is abundant evidence that placement disruptions are a source of stress and negative outcome for children. DHHS/CFS needs to examine why children are moved between placements and develop reasonable plans to increase placement stability, including provision of adequate supports. Intervention strategies should be developed if a child moves placements more than two times to prevent further disruptions, and specialized placements and services for youth with mental health and disability diagnoses may encourage faster time to permanency.

DHHS/CFS updates and response to the FCRO recommendation:

DHHS/CFS has created a <u>Provider Performance Improvement (PPI) information</u> <u>exchange</u> and collaboration group. This group will address placements from qualitative reviews, provider measures, DHHS/CFS statistics, and discuss performance concerns and referrals. The plan is to convert the PPI data into actionable information.

DHHS/CFS has prioritized providing supports for relatives and kin. The Department will be hiring 14 staff to support 500 children in placement of relative/kinship homes. There will be some relative/kinship placements that will continue to be supported by a Child Placing Agency. It will be the responsibility of each CFSS [DHHS staff specializing in placement support] to place children with noncustodial parents, grandparents, and other family members. The additional staff positions will be utilized to ensure that there is access 24/7 to any CFSS staff or law enforcement official to check the DHHS system to identify non-custodial parents, run central registry check, etc. Development of these supports are underway.

<u>On August 1, 2017, DHHS/CFS implemented a process to review placement changes in</u> the event a youth's placement is disrupted in a manner that is believed by the Case Manager to be contrary to the youth's best interest. The goal is to reduce placement disruptions for youth in foster care. This applies only to areas of the state not covered by the NFC contract.

Following the disruption, the Contract Monitor will review supporting information in order to objectively determine if the placement change was contrary to the youth's best interest, and if so, the foster parent will be placed on a 30-day hold. Youth that are at either the enhanced or intensive level of foster care as indicated by the Nebraska Caregiver Responsibility score will receive additional considerations given the additional challenges that may be present. During the hold process, the intention is that the Contract Agency will work with DHHS/CFS and the foster parent to identify process changes that can be made to prevent future disruptions.

If well implemented, this could provide a wealth of information about placement training and preparedness, if appropriate information on children's needs and behaviors is being shared, and gaps in supports for children's caregivers.

NFC (the DHHS/CFS lead agency serving metro Omaha) response to the FCRO recommendation:

Placement stability has steadily improved since 2013 and dramatically improved and maintained since 2015, as DHHS and NFC have been successful as a system in placing more children with relatives and people known to them. In addition, NFC has collaborated with its network providers to focus on preventing placement disruptions. The Eastern Service Area, as well as the rest of the state, outperforms the national average for placement stability based on current CFSR measures.

<u>Next steps</u>. The FCRO and DHHS/CFS will continue to explore ways to ensure the safety and appropriateness of children's placements, and to reduce preventable lateral placements for children and youth.

Additional information from the FCRO:

Federal measures are arguably a good starting point but are not inclusive of all that must be considered for the total population of children in out-of-home care. There are children being moved between placements that would benefit from a more intensive look at placement disruptions.

Big questions remain: Does the system have the **right homes with the right skill levels** and desire to work with some of the tougher children? Are foster homes being given the **right supports**? Is **appropriate information being shared** before a child is placed so the placement can be prepared for individual children's needs? Does the system have **the right level of urgency** regarding placement disruptions or does it figuratively shrug its shoulders and go "well that's to be expected"?

It is far too easy to blame disruptions on children with high levels of behaviors due to past and present traumas – however, **children and youth don't disrupt placements**, **it's adults who create placement disruptions**.

There may be sufficient foster care beds if you look only at the numbers, but they are not always the right placements in the right locations for the children who need them. Recruitment needs to include placements for children with more complicated issues, or older children, as well as the infants. There continues to be a need for professional foster care and/or treatment foster care which includes braided funding with Medicaid services. Probation is currently in the process of working with providers to create this type of specialized foster home. This effort needs to continue, including cross-system discussions on creation and implementation of this type of placement.

7. Prevention and early intervention service availability needs to match the needs of children and families that come to the attention of the child welfare system.

DHHS/CFS updates and response to the FCRO recommendation:

DHHS/CFS launched CarePortal in Kearney on July 25th, with plans to expand the program to serve more children and families in other Nebraska counties by the end of the year. CarePortal, already implemented in 12 other states, creates a solution for both the church and state to work together. DHHS/CFS workers submit requests for families, which are sent to participating churches. Church members able to meet the need respond through their church, and DHHS/CFS workers connect the family with the church. These needs can be preventative and are used to enable reunification. In other parts of the country typical requests are children's clothing, school supplies, vehicle repairs, transportation to doctor appointments, car seats, strollers, beds/furniture, or food. It is likely that Nebraska's experience will be similar.

DHHS/CFS is partnering with First Lady Susanne Shore and other state partners to promote Bring Up Nebraska. Bring Up Nebraska is a statewide prevention initiate that promotes local community partnerships to keep children safe, support strong parents

and help families address life's challenges before they become a crisis. The initiative will be launched on September 25, 2017.

DHHS/CFS will continue to work with its divisional partners to ensure that it is screening children and families for other less intrusive services to meet their needs including applications for public assistance programs, connections with their care/service coordinators if one exists, etc.

Next steps. As previously discussed, DHHS/CFS and the FCRO intend to delve more deeply into reasons that children are removed from the home. In addition to identifying the types of services parents of removed children need, that study may also indicate some issues that could be addressed prior to a crisis that requires a safety intervention or removal.

8. Develop a reasonable plan for actions to address why one in four children currently in the system experienced a re-entry into the foster care system in collaboration with advocates and stakeholders in an atmosphere that encourages frank discussions.

DHHS/CFS updates and response to the FCRO recommendation:

In collaborative discussions the FCRO held with DHHS/CFS, it was determined that information needs to be collectively considered to answer a number of important questions related to children who return to out-of-home care.

NFC (the DHHS/CFS lead agency serving metro Omaha) response to the FCRO recommendation:

NFC remains committed to working with all system stakeholders in removing systemic barriers to permanency and well-being for all children and families in Nebraska. Improved outcomes should occur when there is greater system alignment on shared values, resources, and goals related to child permanency. Engaging with families to find solutions will result in better, more efficient allocation of resources to address the reasons families come to the attention of the child protection system. By evolving our child welfare system to become more compassionate, rehabilitative and restorative, we will achieve increased child and family strength, resilience, and well-being for the long-term. Such a paradigm shift will necessarily involve the commitment of all three branches of government, stakeholders, and the community working collaboratively toward a common vision where all Nebraska's children and families are safe, healthy and thriving. We look forward to continuing to work closely with the Foster Care Review Office and the local Foster Care Review Boards in our mutual efforts to improve Nebraska's foster care system.

Next steps. As was previously mentioned, DHHS/CFS is currently reviewing barriers to permanency for children that have been in an out-of-home placement for longer than 24 months. After conducting this review it is the Department's intent to eliminate the barriers and identify permanent placements for this group of children.

9. In addition to the use of goal-driven targeted services with service providers, the judicial system needs to become more involved in developing effective solutions to the issue of achieving timely permanency. For example, extended time to adjudication was found significant in increasing the length of time children spent in out-of-home care.

DHHS/CFS response to the FCRO recommendation:

The FCRO and DHHS/CFS discussed how best to help judges understand the need to more fully utilize the Supreme Court's case progression standards and other court-related issues and strategies. Some ideas were put forward, but a full strategy has not yet been developed.

Additional information from the FCRO:

Legislation may be needed to require courts to hold case reviews during the period when termination of parental rights actions are awaiting appeals, which can be many months to over a year. Although some judges are of the opinion these are permitted under current statute, others are not. And, those that view it as permitted do not always see it as mandatory. Federal officials expect periodic court reviews to continue at minimum once every six months until the court closes the case regardless of whether there is an appeal pending. Exception hearings also need to be consistently held on the record and in a timely manner.

The FCRO will also discuss with the Court Improvement Project the need to develop alerts for judges on JUSTICE (the court's computer system) so that cases can be better scheduled to meet important timeframes. Sharing data will also be on that agenda.

FCRO June 2017 Recommendations to the Juvenile Justice System, with response from Probation

- 1. Many juvenile justice youth are in out-of-home placements, a number greatly exceeding original estimates when the Legislature moved their services to the Office of Probation in 2013. The Office of Probation and Court Improvement Project needs to examine why so many of the youth served by Probation are placed out-of-home, often in non-treatment placements. Specifically, identify issues that are preventing in-home services, and determine how those can be effectively mitigated.
 - a. Continue efforts towards the Juvenile Justice Home-Based Initiative. It is important that these or similar in-home services are available for youth in every geographic area of the state.
- 2. The number of youth missing from supervision needs to be examined and reduced.

Probation Response to the two FCRO recommendations above³:

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. In addition, report recommendations are 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.

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

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.

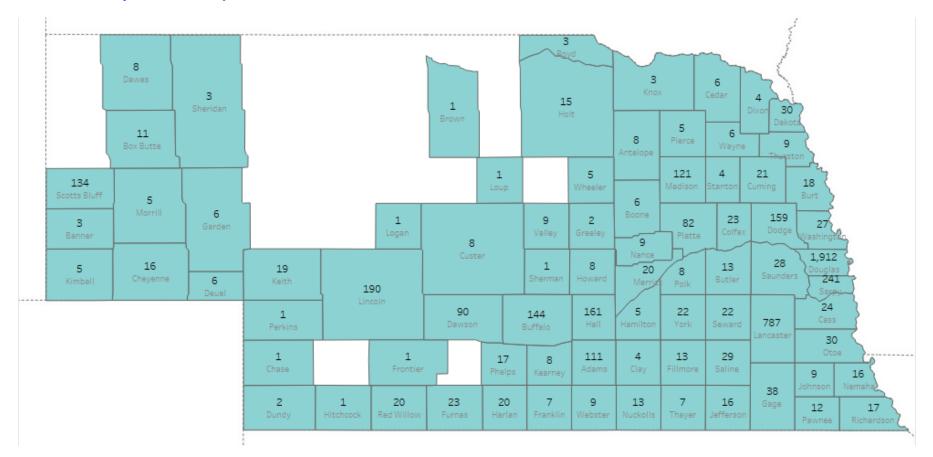
<u>Next steps</u>: The FCRO will continue to work with Probation on identified issues.

³ The letter from Probation can be found in Appendix C.

September 2017 Quarterly Report

Nebraska Children in Out-of-Home Care June 30, 2017 n=4,903

Includes children and youth involved with one or more of the following: Dept. of Health and Human Services Children and Family Services, Dept. of Health and Human Services Office of Juvenile Services, Office of Juvenile Probation



Section II –

All Children in Out-of-Home Care

In this section of the report the FCRO will examine both patterns in out-of-home care over time and provide in-depth information on children out-of-home on a single day, June 30, 2017.

On that date, the **4,903 children** could be divided into the following groups:

- **3,915 children** that were DHHS/CFS⁴ wards in out-of-home care or trial home visits that had no involvement with Probation⁵.
- **731 youth** that were in out-of-home care while served by Probation but not involved with DHHS/CFS or at the YRTCs.
- **135 youth** in out-of-home care or trial home visits that were involved with DHHS/CFS and Probation simultaneously.
- **120 youth** in out-of-home care that were involved with both DHHS/OJS⁶ and Probation, including 114 at the YRTCs and 6 in other placements.
- 2 children in out-of-home care that were served by DHHS/OJS only.

A. DHHS/CFS Wards

All DHHS/CFS Involved Children Over Time

Average Daily Population

Figure 1.1 shows how the average daily population (ADP) per month of all DHHS/CFS involved children in out-of-home or trial home visit placements for the last 9 months. Please note that ADP data includes any child who is in an out-of-home or trial home visit placement and has an active child welfare case, therefore the data in **Figure 1.1** include youth who are dually involved with DHHS/CFS and Probation and youth at the YRTCs who have an active child welfare case.

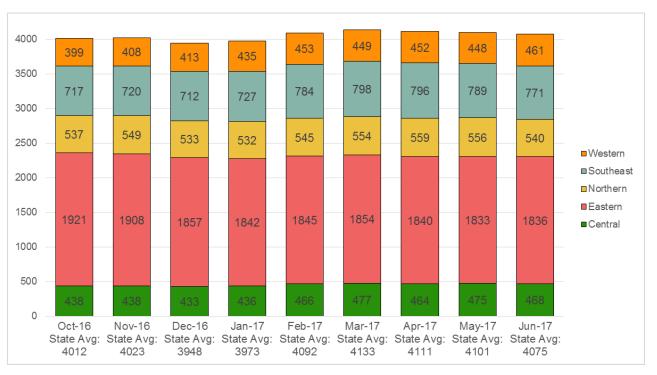
Using ADP data, as opposed to single day snapshot information, allows for a more complete understanding of patterns over time without the risk of presenting outlier information by inadvertently selecting a day with a much higher or much lower than normal number of children in out-of-home care. **Figure 1.1** includes the ADP for each of the 5 DHHS/CFS service areas and for the state.

⁴ CFS is the Department of Health and Human Services (DHHS) Division of Children and Family Services.

⁵ Probation is the Office of Juvenile Probation.

⁶ OJS is the Department of Health and Human Services (DHHS) Office of Juvenile Services that oversees the state's Rehabilitation and Treatment Centers at Geneva (girls) and Kearney (boys).

Figure 1.1: 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)

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 report will not exactly match that of previous reports.

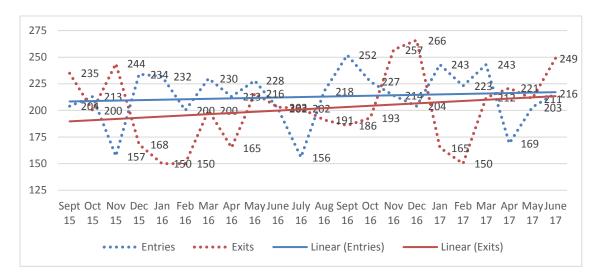
Some expected cycles that impact the numbers of children in foster care include:

- When school starts in the fall more children are seen by adults outside the home. Reports of abuse and neglect tend to go up and so does the population in out-ofhome care.
- Near the winter holidays many children are returned home or adopted, so the number in out-of-home care typically falls.
- As school starts again in January, and winter adds to the impact of poverty (such as a lack of heat or lack of winter clothing), the number typically goes up again.
- Many children are returned home at the end of the school term, so numbers tend to fall.

Figure 1.2 shows monthly variations in entries and exits of children with DHHS/CFS involvement. In the past three months, statewide exits have outpaced entries, however over a longer perspective, entries and exits are coming closer together, with entrances still slightly ahead of exits.⁷

⁷ This data can be isolated by DHHS/CFS service area, and is available on request. See the last page for contact information.





Another way to view monthly differences is found in **Figure 1.3**, with positive values indicating more exits than entrances, and negative values indicating more children coming into the system than leaving. In 13 of the past 22 months (59%) there were more children entering care than leaving care.



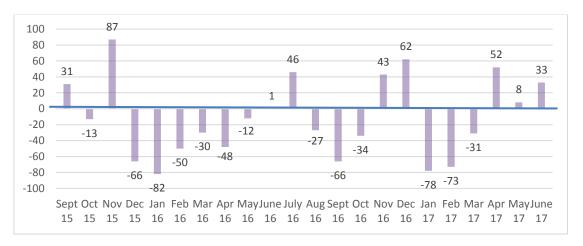


Figure 1.4 is an overview of Entries and Exits, illustrating how each service area impacted the statewide totals. The Eastern and Southeast areas, as the most populous, have the most impact on statewide totals. As shown in the figure, monthly changes in exits and entries are not isolated to a single service area; all service areas follow very similar patterns.

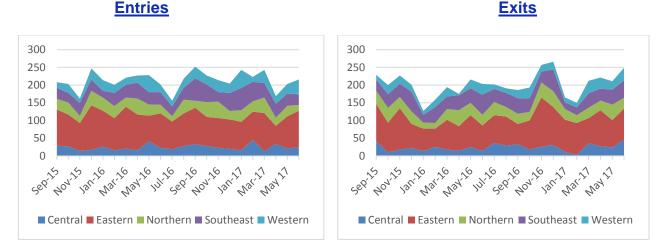


Figure 1.4: A Comparison of Entries and Exits

Children Out-of-Home Solely Involved with DHHS/CFS on a Single Day

Single day data on DHHS/CFS wards includes only those children whose involvement is solely with DHHS/CFS. Youth who are involved with DHHS/CFS and Probation simultaneously are discussed in Section D of this report, and if a youth is involved with DHHS/CFS and is currently placed at a YRTC, they are included in the data in Section B of this report.

Single Day Population Comparison - Quarterly

DHHS/CFS wards (children), as reported to and tracked by the FCRO, can either be in an out-of-home placement or in a trial home visit. By statute a trial home visit is a temporary placement with the parent from which the child was originally removed and during which the Court and DHHS/CFS remain involved. **Table 1.1** compares the number of children in out-of-home placement and trial home visit on the last day of the two previous fiscal quarters.

Type of Placement	March 30, 2017	June 30, 2017
Out-of-home care (OOH)	3,576* children	3,769* children
Trial home visit (THV)	<u>397* children</u>	146* children
Total DHHS/CFS Wards	3,973 children	3,915 children

Table 1.1: DHHS/CFS Wards Quarterly Population Comparison

*Important clarification on OOH and THV fluctuations above. In April and May 2017 both DHHS/CFS and the FCRO made corrections to the records of children that were originally reported as being in a trial home visit but that were actually out-of-home placements with a parent other than was in the home when the child was removed. Until custody issues are resolved, those children are considered in out-of-home care. That one-time joint corrective action accounts for the OOH and THV differences shown in the chart above.

Single Day Population Comparisons - Annual

There are natural ebbs and flows in the number of children in out-of-home care throughout the year, so it can be helpful to look at point in time data from the same time of the year as another perspective on trends. **Table 1.2** compares the out-of-home population on the last day of the state fiscal year for the previous three years. Only children in out-of-home care are included, as the FCRO did not receive legal authority to track trial home visit cases until after June of 2015.

Table 1.2: DHHS/CFS Wards Annual Population Comparison

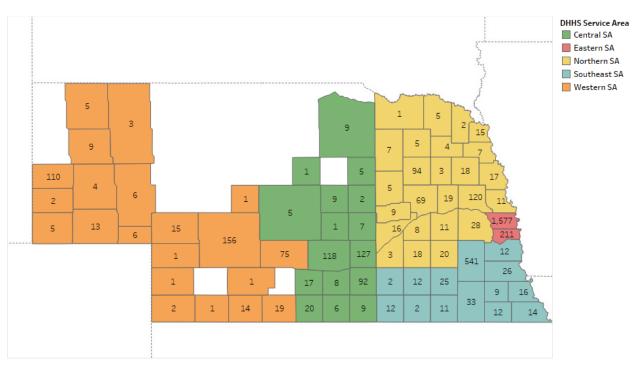
Placement Type and Date	Number of Children
Out-of-home - June 30, 2017	3,769 children
Out-of-home - June 30, 2016	3,369 children
Out-of-home - June 30, 2015	3,145 children

Compared to two years ago, there are 624 more DHHS/CFS involved children placed outof-home. Compared to one year ago there are 400 more DHHS/CFS involved children placed out-of-home.

Children's geographic location of origin

DHHS/CFS wards in out-of-home care or trial home visit come from every geographic area, from Omaha to Scottsbluff, Falls City to Chadron, and Sioux City to McCook. **Figure 1.5** shows the 3,915 DHHS/CFS wards by county.

Figure 1.5: DHHS/CFS Wards in Out-of-Home or Trial Home Visit Placement on 6/30/2017 by DHHS Service Area, n=3,915



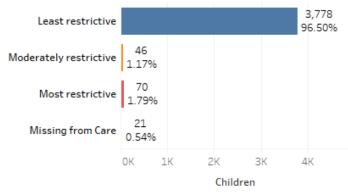
Other demographics

The proportions by age group, gender, or race did not change from the June 2017 Quarterly Report. [See page 22 of the <u>FCRO June 2017 Quarterly Report</u> for those charts.]

Restrictiveness level of children's placements

Figure 1.6 shows that most (3,778 or 96.5%) of the 3,915 DHHS/CFS Wards in out-of-home or trial home visit placements were placed in a family-like, least restrictive setting.

Figure 1.6: Placement Restrictiveness for DHHS/CFS Wards in Placements on 6/30/2017, n=3,915



* No matter the volume, children missing from care must always be a top priority as their safety cannot be assured.

The proportion of children in the least restrictive settings continues to increase. On June 30, 2016, 92.8% of children out-of-home were in the least restrictive placements, compared to 96.5% on June 30, 2017.

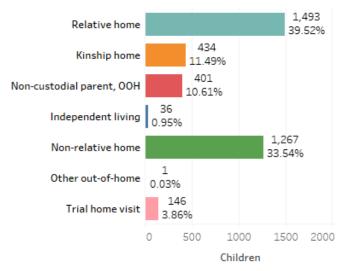
The FCRO commends all stakeholders who work to ensure children are in the least restrictive placement possible given the child's individual needs.

Relative or kinship placements

Figure 1.7 shows that the majority (51.0%) of the children in a foster home are placed with non-parent relatives or kin. "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 children.⁸

⁸ 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." Neb. Rev. Stat. 71-1901(9) defines "relative" as having a blood, marriage, or adoption relationship, and for Indian children they may also be an extended family member per ICWA.

Figure 1.7: DHHS/CFS Wards in Least Restrictive Placements on 6/30/2017, with Placement Types, n=3,778



* "Relative" refers to a relationship by blood or marriage. "Kin" in Nebraska is defined as fictive relatives, such as a coach or teacher. "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.

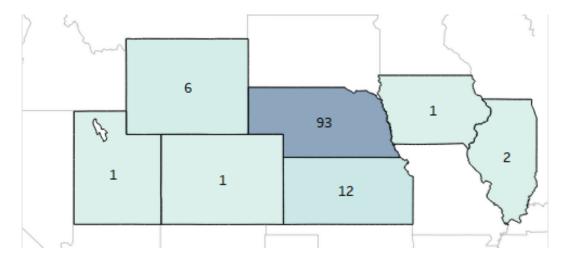
The FCRO has previously described the benefits to the proper use of relative or kinship placements. [See page 25 of the FCRO June 2017 Quarterly Report]

State where children are placed

Figure 1.8 shows states where the 116 DHHS/CFS wards in congregate (group) facilities are placed. Most (80.3%) are in Nebraska. The majority of those in other states are in bordering states.

Congregate (group) care can involve higher level treatment facilities (such as PRTF-Psychiatric Residential Treatment Facility or IMD – Institute for Mental Disease), boarding or other non-treatment group homes, emergency shelters, detention or other juvenile justice related facilities, or other specialized facilities. Further detail is available upon request.

Figure 1.8: State of Placement for DHHS/CFS Wards in Congregate Care on 6/30/2017, n=116



Multiple placement moves

After children are removed from the family home, many are moved between out-of-home placements multiple times.⁹ Moves might be a positive thing in the case of a child who needed a high level of care when he/she first entered care and is now progressing toward less restrictive, more family like care. But even a positive move can be traumatic for the children, decreasing their sense of stability. Often placement moves are due to system issues rather than the needs of the child.

Further, national researchers have found that children who experience four or more moves between foster caregivers over their lifetime are significantly more likely to suffer consequences of that instability far into adult life.¹⁰

Evidence shows that placement instability is associated with attachment disorders, poor educational outcomes, mental health and behavior problems, poor preparation for independent living as children become older, and negative adult outcomes. Many such children lose contact with their siblings and relatives, leaving them without a natural support system once they are no longer in the care of the child welfare system.¹¹

⁹ Moves, by definition, do not include respite care or short-stay hospitalizations.

¹⁰ Some examples include: Hartnett, Falconnier, Leathers & Tests, 1999; Webster, Barth & Needell, 2000; the American Academy of Pediatrics, 2000; Noonan, Kathleen, Rubin, David, Mekonnen, Robin, Zlotnik, Sarah, and O'Reilly, Amanda. Dr. Peter Pecora, Senior Director of Research Services with Casey Family Programs and Professor at the School of Social Work at the University of Washington, in <u>The Foster Care Alumni Studies</u> <u>– Why Should the Child Welfare Field Focus on Minimizing Placement Change</u> (2007); and <u>Securing Child</u> <u>Safety, Well-being, and Permanency Through Placement Stability in Foster Care</u>. Children's Hospital of Philadelphia Research Institute Policy Lab, <u>Evidence to Action</u>, Fall 2009.

¹¹ "Supporting Reunification and Preventing Reentry Into Out-of-Home Care," Child Welfare Information Gateway, a service of the Children's Bureau, February 2012.

Therefore, it is significant that 355 (16.7%) of Nebraska's DHHS/CFS wards experienced four or more placement moves over their lifetime (**Figure 1.9**). This does not include placements with parents, respite short-term placements (such as for foster parents to attend a training), or episodes of missing from care.

The chart also shows that even some very young children have experienced a high level of placement change.

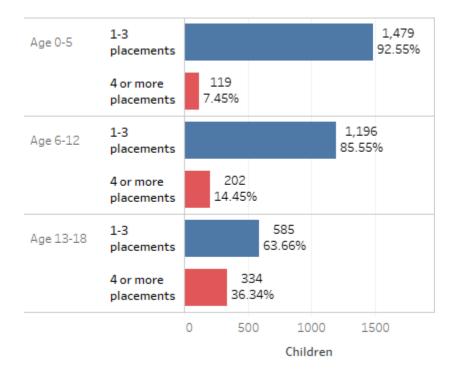


Figure 1.9: Placement Moves over Lifetime for DHHS/CFS Wards in Out-of-Home or Trial Home Visit on 6/30/2017, n=3,915

Lifetime removals from the home

Figure 1.10 shows that almost one in four, or 926 (23.7%), of the DHHS/CFS wards in care on 6/30/2017 had experienced more than one removal from the parental home. Each removal can be traumatic and increases the likelihood of additional moves between placements.

The agencies and groups that make up the child welfare system need to collaboratively meet for frank discussions that lead to the development of a reasonable plan for actions to address why one in four children currently in the system had a prior removal. As a State we can and must do better.

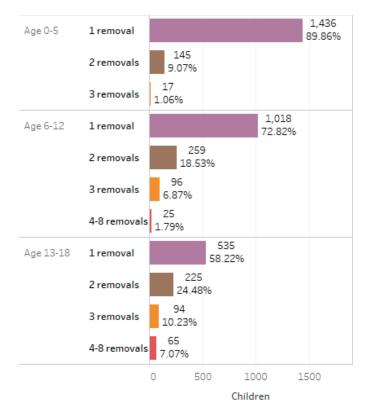


Figure 1.10: Lifetime Removals for DHHS/CFS Wards in Outof-Home or Trial Home Visit Placements on 6/31/2017, n=3,915

Lifetime numbers of workers

Table 1.3 below shows the lifetime number of workers for DHHS/CFS wards on June 30, 2017 as reported by DHHS/CFS. More than four workers is considered an unacceptable number of worker transfers that likely significantly delays permanency.¹²

Table 1.3: Lifetime Number of Workers for DHHS/CFS Wards 6/30/2017, n=3,915 [Workers = NFC Family Permanency Specialists in the Eastern Service Area, DHHS/CFS case managers elsewhere]

	Central (CFS)	Eastern (NFC)	Northern (CFS)	Southeast (CFS)	Western (CFS)
1-4 workers	369 (84.6%)	1,279 (71.5%)	351 (68.2%)	526 (72.4%)	332 (73.9%)
5 or more workers	67 (15.4%)	509 (28.4%)	164 (31.8%)	201 (27.6%)	117 (26.1%)
Total	436	1,788	515	727	449

Over 25% of the children in the Eastern, Northern, Southeast, and Western Service Areas have had more than 4 workers throughout their young lives.

¹² <u>Review of Turnover in Milwaukee County Private Agency Child Welfare Ongoing Case Management Staff,</u> January 2005.

B. <u>DHHS/ OJS Wards at a Youth Rehabilitation and Treatment</u> <u>Center (YRTC)</u>

Average daily population at the YRTCs

Figure 2.1 shows the average daily number of OJS wards at each of the YRTCs for the last several months.

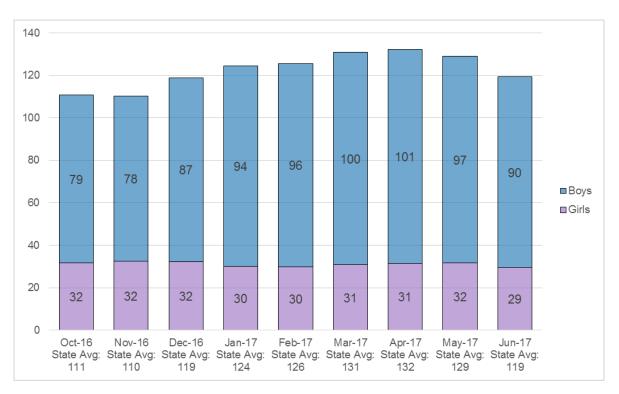


Figure 2.1. Average daily number of OJS Wards placed at a Youth Rehabilitation and Treatment Center

On 6/30/2017 there were 114 wards at the Youth Rehabilitation and Treatment Centers (YRTCs). The DHHS Office of Juvenile Services – OJS - is responsible for the YRTCs at Kearney where 88 boys are placed and Geneva where 26 girls are placed. Placement at a rehabilitation and treatment center is the most restrictive type of placement.

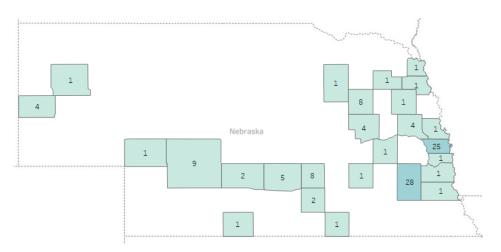
There are currently more than four times as many boys as girls committed to youth rehabilitation facilities. This is consistent with national trends.¹³

¹³ OJJDP "Girls in the Juvenile Justice System."

County of origin for youth at the YRTCs

Youth at the YRTCs come from every region of the state, as illustrated in **Figure 2.2**, with most coming from the more populous regions as would be expected.

Figure 2.2: Youth Placed by Juvenile Court at a Youth Rehabilitation and Treatment Center under DHHS/OJS on 6/30/2017, n=114



Ages of youth at the YRTCs

Per Neb. Rev. Stat. §43-251.01(4), youth committed to a youth rehabilitation and treatment center (and thus under OJS) must be at least 14 years of age. See **Figure 2.3** for more details.

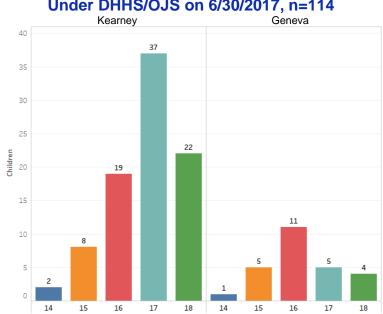


Figure 2.3: Ages of Youth Placed at a Youth Rehabilitation and Treatment Center Under DHHS/OJS on 6/30/2017, n=114

At this time it is unclear if the difference in average age at each facility (16.8 for boys and 16.2 for girls, nearly a half year younger), is due to the low numbers or to some other causal factor.

C. <u>Probation Supervised Youth</u>

All Probation Involved Youth Over Time

Average Daily Population

Figure 3.1 shows the average daily population (ADP) per month of all Probation-involved youth in out-of-home placement for the last 9 months. Please note that ADP data includes any youth who is in out-of-home placement and has an active Probation case, therefore the data in **Figure 3.1** include youth who are dually involved with Probation and DHHS/CFS.

Using ADP data, as opposed to single day snapshot information, allows for a more complete understanding of patterns over time without the risk of presenting outlier information by inadvertently selecting a day with a much higher or much lower than normal number of youth in out-of-home placements.

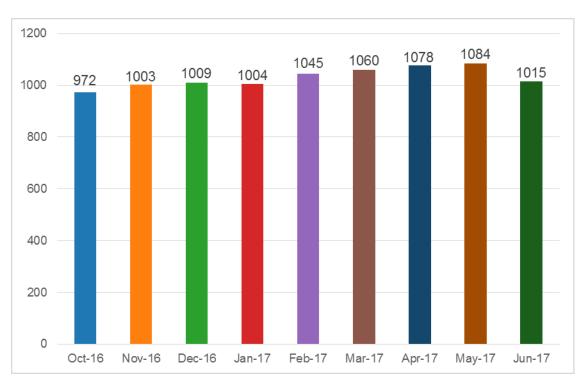


Figure 3.1: Average Daily Population of Youth in Out-of-home Care Served by Probation

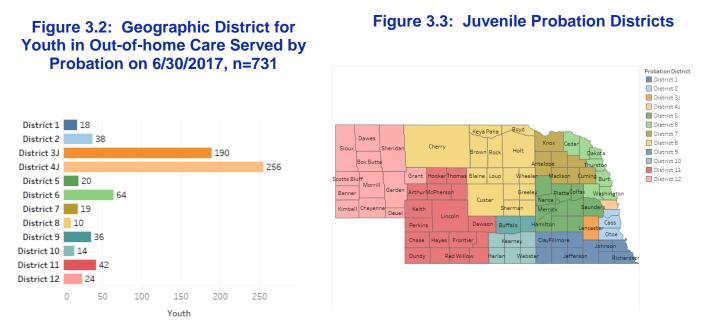
The juvenile justice population is different from the child welfare population in several key ways. One, as demonstrated in the figure above, is that the seasonal patterns are different. We do not see, nor should we expect to see, significant drops in the number of youth placed out-of-home during November and December.

Children Out-of-Home Solely Involved with Probation on a Single Day

Single day data on Probation involved youth includes only those youth whose involvement is solely with Probation. Youth who are involved with DHHS/CFS and Probation simultaneously are discussed in Section D of the report, and Probation youth currently placed at a YRTC are included in the data in Section B of this report.

Youth's geographic location of origin

Figure 3.2 shows the Probation district, based on the county of court, for the **731** Probation youth in out-of-home care that were not involved with either DHHS/CFS or DHHS/OJS as of June 30, 2017. **Figure 3.3** shows the Juvenile Probation Districts.



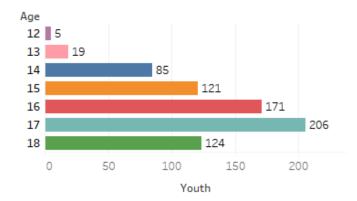
It is important to note that while Douglas County (4J) has the highest number of youth outof-home, Lancaster County (3J) has a higher proportion of juvenile justice youth placed outof-home. **26%** of Probation youth placed out-of-home are from Lancaster County, but U.S. Census data indicates that only **16%** of Nebraska's young people live there. Comparatively, **35%** of Probation youth placed out-of-home are from Douglas County, which is where **29%** of Nebraska's young people reside.

<u>Ages</u>

Figure 3.4 shows the ages of Probation youth in out-of-home care on 6/30/2017. It is important to note that 230 (**31.5%**) are under age 16. In comparison, on March 31, 2017, **28.6%** of the youth in out-of-home care under the supervision of Probation were under age 16, and on June 30, 2016, **25.1%** were under age 16. Thus the proportion of younger youth appears to be increasing.

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.¹⁴





<u>Gender</u>

There are over twice as many boys (68.3%) in out-of-home care served by Probation that are in out-of-home care as there are girls (31.5%). Current percentages are similar to the March 2017 numbers.

Treatment or non-treatment placements

Figure 3.5 shows that over half (51.0%) of Probation youth in out-of-home care are in non-treatment placements, 38.2% are in treatment placements, and 10.8% are missing from supervision.

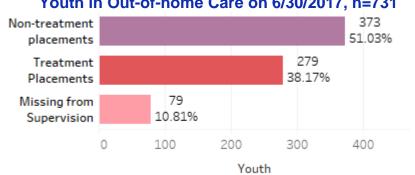


Figure 3.5: Treatment or Non-Treatment Placements of Probation Youth in Out-of-home Care on 6/30/2017, n=731

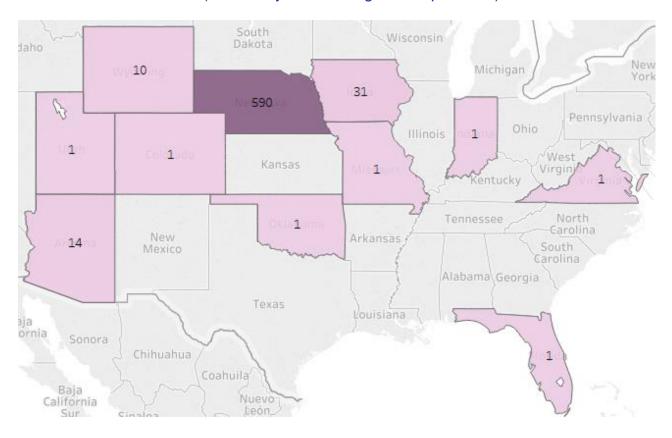
* No matter the volume, youth missing from care must always be a top priority as their safety cannot be assured.

¹⁴ Dixon et al "Psychopathology in Female Juvenile Offenders", Journal of Child Psychology and Psychiatry; 2004; Martin et al "Profile of Incarcerated Juveniles: Comparison of Male and Female Offenders, Adolescence, 2008; National Child Traumatic Stress Network "Victimization and Juvenile Offending" 2016, among many others.

State where youth are placed

Per **Figure 3.6**, for those **652 youth**, **90.5%** were placed in Nebraska, **4.8%** were in Iowa, **2.1%** were in Arizona, **1.5%** were in Wyoming, and the rest were in other states. The percent placed in Nebraska is nearly identical to that on March 31, 2017.

Figure 3.6: State Where Youth in Out-of-home Care Served by Probation Were Placed on 6/30/2017, n=652 (excludes youth missing from supervision)



D. Youth with Both DHHS/CFS and Probation Involvement

On 6/30/2017 there were **135** youth involved with both DHHS/CFS and the Office of Juvenile Probation. In comparison there were 145 dual-involved youth on 3/31/2017. The percent of youth dually involved in DHHS/CFS and Probation has consistently remained around 2.9% of the total out-of-home population.

Youths' geographic location of origin

Dually-involved youth come from all parts of the state, as illustrated in **Figure 4.1** below, with the majority from the most populous areas (Lancaster and Douglas counties).

Figure 4.1: Youth in Out-of-home Care Served by Both DHHS/CFS and Probation on 6/30/2017 by DHHS/CFS Service Area, n=135

DHHS Service Area	Probation Distric	t
Central SA	District 8	4
	District 9	8
	District 10	4
Eastern SA	District 2	4
	District 4J	53
Northern SA	District 5	6
	District 6	5
	District 7	4
Southeast SA	District 1	7
	District 2	1
	District 3J	27
Western SA	District 11	8
	District 12	4
		0 20 40 60
		Youth

<u>Ages</u>

Figure 4.2 indicates that most dual-agency youth are teenagers, although 3 are younger.

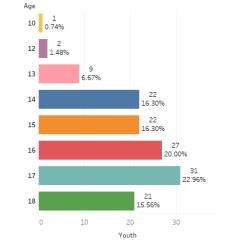


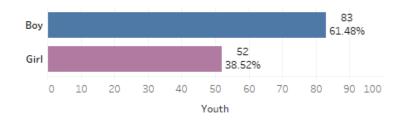
Figure 4.2. Ages of Youth in Out-of-home Care Served by Both DHHS/CFS and Probation on 6/30/2017, n=135

The percentage under age 16 is currently 41.4%, compared to 35.8% on March 31, 2017. Some of the youth from the March report are still in care and between then and now have had a birthday, thus the 9 year old from that report may be the 10 year old on this report.

<u>Gender</u>

Figure 4.3 shows that, as is true with other juvenile justice populations, there are more boys in this group than girls.

Figure 4.3: Gender of Youth in Out-of-home Care Served by Both DHHS/CFS and Probation on 6/30/2017, n=135

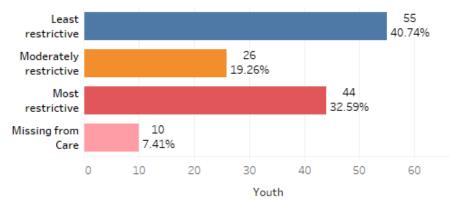


The percentage of boys is currently 61.5%, compared to 67.6% on March 31, 2017.

Restrictiveness level of children's placements

Figure 4.4 shows that compared to March 2017 slightly more youth are in least restrictive placement types (40.7% now, 31.0% then) than in most restrictive, based on definitions used for non-Probation involved state wards.

Figure 4.4: Placement Restrictiveness for Youth in Out-of-home Care Served by both DHHS/CFS and Probation on 6/30/2017, n=135



* No matter the volume, youth missing from care must always be a top priority as their safety cannot be assured.

APPENDIX A - FCRO Background

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.

<u>Vision</u>

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

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 as well as data about children's needs and trends in foster care, including data collected as part of the review process, and for internal processes.

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.

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, NFC, Courts, the Office of Probation, or any other entity.

About this Report

Data quoted within this Report are from the FCRO's independent data tracking system and 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.<u>www.fcro.nebraska.gov</u>) for past annual and quarterly reports and other topics of interest.

APPENDIX B – Letter from NFC



August 24, 2017

Kim B. Hawekotte, Executive Director Foster Care Review Office 521 S. 14th St., Suite 401 Lincoln, NE 68508-2707

RE: Response to FRCO recommendations

Dear Kim:

Thank you for the opportunity to respond to the FCRO's recommendations regarding foster care policy in Nebraska. In its second quarter 2017 report, the FCRO made eight recommendations "to the Child Welfare System," which are summarized below:

- 1. Reasons for the trend of more children entering the child welfare system than exiting need to determined, including why there are regional variances.
- 2. The length of stay needs to decrease for all state wards in out-of-home care.
- 3. DHHS and NFC should focus on caseworker recruitment and retention.
- 4. The number of moves between foster placements for children in out-of-home care needs to be minimized.
- 5. Identify and use the resources that are most impactful.
- Resource availability needs to match the reasons that children come to the attention of the child welfare system.
- 7. Develop a reasonable plan for actions to address why one in four children currently in the system experienced unsuccessful reunification attempts.
- In addition to the use of goal-driven targeted services with service providers, the judicial system needs to become more involved.

In addition, the FCRO made two recommendations "to the Juvenile Justice System" as follows:

- Many juvenile justice youth are in out-of-home placements, a number greatly exceeding original estimates.
- 2. The number of youth missing from supervision needs to be examined and reduced.

Nebraska Families Collaborative is committed to improving outcomes for children and families served in the child welfare system in Nebraska, and especially in Douglas and Sarpy Counties. Systemic change takes time and effort by all components of the system. Nebraska Families

Collaborative takes seriously its mission to build on child, family, and community strengths so that all children and families are safe, healthy, and thriving. NFC works with the children and families that we serve as well as various stakeholder groups within the community and across the state to address the issues that arise in child welfare such as those articulated by the FCRO.

NFC has been looking closely at Eastern Service Area entry and exit data for a number of years. Exit rates from the child welfare system are a function of entry rates. For example, since there were fewer entries in 2014 than in previous years, and the length of stay for a youth in out of home care averages 16-20 months, we would expect to see a reduced number of exits in 2015. As entries increase, the system will experience increased exits 16-20 months later. NFC agrees that regional variances in entries should be examined and analyzed.

NFC agrees that the long-term effects of trauma are exacerbated the longer a child remains in out of home care, and therefore, NFC is committed to placing children in the right setting to meet their needs and engaging with other systems of care, such as the Nebraska Division of Developmental Disabilities and Medicaid, to meet the identified needs of children and families with multi-system involvement.

NFC's Board of Directors has established workforce recruitment and retention as one of its highest priorities and it is part of the NFC strategic plan. NFC has implemented a number of innovative strategies to recruit high-quality talent, and also to retain its trained and experienced workforce. For example, NFC has implemented a career ladder for Family Permanency Specialists (FPSs) and a new on-call system that reduces on-call obligations for FPSs which has alleviated related workplace stress. In collaboration with the University of Nebraska Omaha, DHHS, and Project Harmony, NFC has obtained private funding for five NFC employees to obtain their MSWs. In addition, NFC has developed a close working relationship with schools of social work across the region, and we currently have six social work student interns for the fall semester. Systemic barriers continue to challenge NFC, such as an overall shortage of qualified applicants in the field, and experienced case management professionals leaving to pursue other career options. Despite these challenges, NFC was within 96% of state mandated caseload ratios on August 23, 2017.

Placement stability has steadily improved since 2013 and dramatically improved and maintained since 2015, as DHHS and NFC have been successful as a system in placing more children with relatives and people known to them. In addition, NFC has collaborated with its network providers to focus on preventing placement disruptions. The Eastern Service Area, as well as the rest of the state, outperforms the national average for placement stability based on current CFSR measures.

NFC remains committed to working with all system stakeholders in removing systemic barriers to permanency and well-being for all children and families in Nebraska. Improved outcomes should occur when there is greater system alignment on shared values, resources, and goals related to child permanency. Engaging with families to find solutions will result in better, more efficient allocation of resources to address the reasons families come to the attention of the child protection system. By evolving our child welfare system to become more compassionate, rehabilitative and restorative, we will achieve increased child and family strength, resilience, and well-being for the long-term. Such a paradigm shift will necessarily involve the commitment of all three branches of government, stakeholders, and the community working collaboratively toward a common vision where all Nebraska's children and families are safe, healthy and thriving.

We look forward to continuing to work closely with the Foster Care Review Office and the local Foster Care Review Boards in our mutual efforts to improve Nebraska's foster care system.

Sincerely,

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David P Newell, CSW, ACSW President & CEO

cc: Matt Wallen, CFS Director

APPENDIX C – Letter from Probation

Corey R. Steel State Court Administrator

Ellen Fabian Brokofsky State Probation Administrator

August 24, 2017

Kim Hawekotte, Executive Director Foster Care Review Office 521 S. 14th, Suite 401 Lincoln, NE 68508-2707

Re: Response to Foster Care Review Office Quarterly Report, dated June 1, 2017

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. In addition, report recommendations are 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 juvenilejustice 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.

- Juvenile Services Division at: https://supremecourt.nebraska.gov/probation/juvenile
- Annual Statistical Report of Juvenile Justice System, 2016 at: <u>https://supremecourt.nebraska.gov/probation/juvenile</u> (click on Resources/Detailed Analysis)
- Specific Reports on Probation's Juvenile Justice Reform (including statistical charts): <u>https://supremecourt.nebraska.gov/probation/juvenile</u> (click on *Reform Efforts)*
- 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. Blancher

Jeanne K. Brandner Deputy Administrator, Juvenile Services Division

> 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

The Foster Care Review Office can currently be reached at:

Foster Care Review Office 521 S. 14th, Suite 401 Lincoln NE 68508 402.471.4420

email: fcro.contact@nebraska.gov

www.fcro.nebraska.gov

← The FCRO is tentatively scheduled to relocate its main offices later in 2017.

See our website for announcements about this as we get nearer to finalizing arrangements.

The phone, email, and web addresses will remain the same.