

LB 961 - Testimony
Health and Human Services Committee
January 26, 2012

Scot Adams
Interim Director, Division of Children and Family Services

Good afternoon, Senator Campbell and members of the Health and Human Services Committee, my name is Scot Adams (S-C-O-T A-D-A-M-S), Interim Director of the Division of Children and Family Services for the Department of Health and Human Services (DHHS). I am here to provide testimony in opposition to LB 961.

DHHS launched Families Matter to support the safety, permanency and well being of children in their homes and communities through prevention, diversion, treatment and aftercare services. We are working to improve our federal Children and Family Services Reviews. Our recent efforts include an Operations Plan which outlines statewide priorities, process outcomes and compliance standards and we are monitoring performance in six critical areas in order to make adjustments to achieve improvements. All case workers across the state will soon utilize Structured Decision Making, effective proven process used in more than 20 other states since the 1980s, that helps identify children's needs so we can more effectively address them. We are taking advantage of the benefits our private sector partners to bring to the process, such as research resources and flexibility in services, alignment of public and private goals and programs for children's benefit, increased public awareness of children's needs, improvement in the available data to evaluate our system, and lower caseloads.

While I understand the amount of emotion wrapped up in the Department's use of contractors for case management, it is critical to set that aside for the moment and to take the long term view of this aspect of child welfare reform. I don't discount that we have faced a number of significant challenges in our reform efforts. We all wish that some things would have played out differently but we are in the middle of managing a dramatic shift in how we serve children and families. This requires the kind of leadership that holds to the vision of a greater good while managing the difficulties along the way. Changing course on this crucial element at this time would be a mistake because it would bring more disruption to the lives of children and their families and would restrict the advantages and assets the lead agencies bring to Nebraska.

A number of States which have contracted for case management have shown and continue to show improved outcomes for children and families. Attached to my testimony is a handout showing State performance on the Federal Children and family Services Review, a review that assesses seven specific outcomes related to child safety, permanence, and well being and seven systemic factors. I call your attention to the performance of Florida and Kansas in particular. States that have privatized, in particular Florida and Kansas, also have had their share of challenges, many similar to what Nebraska has experienced. But they persevered. And it paid off.

I also want to share with you information from a study of Florida and Kansas privatization conducted by Casey Family Programs, a private national organization which supports numerous child welfare activities across the country (“An Analysis of the Kansas and Florida Privatization Initiatives,” April, 2010): “Commitment to change is essential. The most consistent message echoed throughout the interviews was that the first few years of the transition were extremely difficult and that a strong level of resistance from all sides to such a massive systems overhaul should be expected. According to those interviewed, many staff members in Kansas and Florida felt personally invested in the system at that time and had tremendous difficulty adjusting to the change. It took time to earn trust and build a strong cooperative partnership between state workers and the private providers. However, it was also emphasized that, over time and with consistent efforts, the system would stabilize, a strong public-private partnership would be developed, and capacity for services would expand. Informants reported that once that occurred, the system as a whole began to see improvements. They commented that the appropriate amount of transition time varied regionally, but that any state should expect the full transition to take at least three years.”

As a practical matter, the requirement in LB 961 to return case management to the Department by September of this year would result in additional instability now. I am concerned that passage of the bill could result in an early or even immediate termination of those contracts by KVC and NFC. This would cause immediate difficulties in managing a transition that would negatively impact children and families.

In another area and on a technical note, LB 961 provides for a continuation of the KVC and NFC contracts until July 2013. The current contracts terminate in July 2014. Legislative action to terminate a contract prematurely in this fashion raises constitutional questions that would need to be carefully considered. There are additional technical issues with LB 961. I have offered comment on those on the second attachment provided with my testimony.

Regarding the provision within LB 961 requiring the Department to reduce caseloads by 10% each year until the caseload is within the standards set by the Child Welfare League of America or CWLA, I would call your attention to the Department’s 2010 caseload report provided to the Legislature this past October. As you’ll note in that study, the CWLA standards are specific to types of caseloads. The report shows that, for in-home cases, the Department caseload average was 1/23.72 families; the CWLA standard is 1:17 families. For out-of-home cases when the case plan is reunification, the Department’s average caseload was 1:20 families; the CWLA standard is 1:12 families. And, for out-of-home with long term or independent living as a plan, the Department’s average caseload is 1:23 children. For this last category, the CWLA standard is about children rather than families and that standard is 1:12 to 15 children. The caseload report provides an analysis of the Department staffing in comparison to CWLA standards.

We are happy to continue to share information about our progress in reforming Nebraska’s child welfare system. I believe changing our approach would be short sighted and I urge you to oppose LB 961. Thank you for your time. I would be happy to answer any questions you may have.

LB 961

Attachment

Scot Adams, Interim Director, Division of Children and Family Services

- The term “lead agencies,” used in various places in the bill, is not defined within the bill.
- Section 2, p. 2, line 23 “The...case manager shall be responsible for and shall directly oversee...(and provides a list of functions”): the term “directly oversee” is not defined. It would be important to assure that the Department can continue to contract for certain aspects of the work. For example, can the Department contract for electronic monitoring which is used to “directly oversee” a youth’s compliance with court and Department requirements?
- In the same section, one of the functions included is “...decision making regarding...psychiatric services...” While a case manager may consent to treatment, they do not make or have the expertise to make the decision on medical necessity for treatment.
- Section 3, p. 6, line 2-6: The terms "case manager" and "case worker" are both used but not defined within the bill. The use of the terms implies that they are referring to staff with different functions ("The average caseload of each case manager providing child welfare services shall be reduced by ten percent each year until each case manager's and each caseworker's caseload is within the standards..."). I recommend removing the reference to caseworker.
- In addition, requiring each staff person's caseload to be reduced by 10% until "each" case manager and "each" caseworker is at the CWLA standard is problematic. The workload and the workforce are too fluid geographically to manage this method of addressing movement toward the CWLA standard. It's also a method that could be arbitrarily manipulated. I would suggest "The average caseload of case managers providing child welfare services shall be reduced by 10% each year until the case manager average caseloads are within the standards established by the Child Welfare League of America or its successor".
- Section 5(2): this section directs that the Department not extend the lead agency contracts past July 1, 2013. Does this mean that the Department cannot amend those contracts for purposes other than the provision of case management?

Children and Family Services Review Second Round Outcomes
Substantial conformity for a state is based on if an outcome met 95%

State	Safety Outcome 1: <i>Children are Protected</i>	Safety outcome 2: <i>Children are safely maintained whenever possible</i>	Permanency Outcome 1: <i>Children have Permanency and Stability in their living situations</i>	Permanency Outcome 2: <i>Continuity of family and connections are preserved</i>	Well Being 1: <i>Families have enhanced capacity to meet their needs</i>	Well Being 2: <i>Children have appropriate services to meet their educational needs</i>	Well Being 3: <i>Children have adequate services to meet physical and mental health needs</i>
Total Number of Reviews Completed 51 out of 52							
Kansas Ranking	2nd	9th	5th (2 states)	1st	1st	14th	8th
Florida Ranking	32nd	36th (2 states)	33rd	46th	46th	40th	49th
Nebraska Ranking	50th	43rd	45th (3 states)	22nd (4 states)	41st	47th	47th (2 states)
Alabama	90.0%	80.0%	33.0%	60.0%	48.0%	84.0%	85.0%
Alaska	47.1%	38.5%	15.0%	62.5%	23.1%	76.1%	52.5%
Arizona	78.1%	63.1%	42.5%	71.1%	41.5%	77.3%	62.9%
Arkansas	76.9%	58.5%	41.0%	53.9%	27.7%	71.1%	62.3%
California	80.6%	76.9%	41.0%	79.5%	58.5%	88.0%	81.0%
Colorado	73.0%	66.2%	37.5%	75.0%	47.7%	86.0%	82.0%
Connecticut	100.0%	80.0%	32.5%	50.0%	44.6%	95.5%	87.1%
Delaware	65.6%	78.5%	42.9%	65.8%	49.2%	90.5%	82.4%
District of Columbia	80.8%	81.5%	41.0%	71.8%	49.2%	88.0%	87.3%
Florida	70.0%	61.5%	34.1%	47.5%	24.6%	82.5%	61.4%
Georgia	72.0%	67.7%	42.5%	44.0%	35.0%	78.0%	68.0%
Hawaii	87.0%	61.5%	47.5%	75.0%	40.0%	89.2%	65.5%
Idaho	90.0%	68.7%	46.1%	79.5%	57.8%	95.5%	88.1%
Illinois	85.7%	70.8%	12.5%	55.0%	43.1%	91.1%	78.6%
Indiana	54.5%	70.7%	37.5%	62.5%	35.3%	83.8%	75.5%
Iowa Region 7	77.8%	63.1%	37.5%	75.0%	40.4%	93.0%	88.1%
Kansas Region 7	93.8%	75.0%	52.5%	90.0%	65.6%	91.5%	85.5%
Kentucky	90.9%	76.9%	47.5%	67.5%	47.7%	87.2%	83.6%
Louisiana	63.3%	73.8%	42.5%	69.2%	44.6%	83.7%	82.1%
Maine	76.7%	53.8%	52.5%	75.0%	43.1%	94.4%	71.2%
Maryland	69.6%	40.6%	22.5%	46.2%	29.7%	77.1%	71.0%
Massachusetts	70.6%	72.3%	47.5%	75.0%	44.6%	96.0%	75.4%
Michigan	61.5%	64.6%	47.5%	72.5%	46.2%	89.5%	72.4%
Minnesota	57.9%	62.5%	58.0%	72.5%	46.9%	86.0%	77.2%
Mississippi	85.7%	42.2%	25.0%	30.8%	15.6%	73.8%	67.2%
Missouri Region 7	85.7%	67.2%	42.5%	62.5%	45.3%	88.4%	68.3%
Montana	79.3%	71.0%	32.5%	77.5%	48.4%	95.1%	67.9%
Nebraska Region 7	37.5%	52.3%	25.0%	67.5%	32.3%	76.5%	62.3%
Nevada	72.4%	51.6%	30.0%	60.0%	29.0%	95.1%	69.5%
New Hampshire	71.4%	73.8%	70.0%	87.5%	52.3%	91.7%	84.4%
New Jersey	86.0%	69.3%	30.0%	50.0%	44.6%	83.3%	71.7%
New Mexico	87.8%	70.8%	37.5%	75.0%	63.2%	80.8%	81.2%
New York	89.7%	70.3%	40.0%	42.5%	34.4%	88.5%	84.2%
North Carolina	66.7%	73.8%	57.5%	80.0%	63.1%	96.0%	78.7%
North Dakota	89.3%	70.8%	70.0%	82.5%	53.8%	95.3%	86.4%
Ohio	63.2%	75.0%	30.0%	65.0%	65.6%	87.5%	82.8%
Oklahoma	67.6%	67.7%	35.0%	60.0%	48.0%	86.0%	82.0%
Oregon	62.5%	60.0%	46.3%	70.7%	38.5%	76.9%	68.3%
Pennsylvania	57.7%	68.8%	30.8%	48.7%	35.9%	81.6%	68.9%
Puerto Rico	39.1%	36.9%	12.5%	50.0%	23.1%	74.5%	50.9%
Rhode Island	91.3%	47.7%	35.0%	52.5%	20.0%	87.0%	71.9%
South Carolina	83.3%	58.5%	25.0%	38.5%	33.8%	85.7%	74.6%
South Dakota	85.7%	90.8%	52.5%	80.0%	63.1%	97.4%	89.7%
Tennessee	53.3%	50.8%	27.5%	57.5%	34.4%	83.3%	66.1%
Texas	61.3%	63.1%	37.5%	62.5%	38.5%	97.1%	69.6%
Utah	90.0%	80.0%	47.5%	52.5%	46.2%	88.4%	85.2%
Vermont	81.3%	46.9%	30.0%	67.5%	23.4%	87.8%	72.1%
Virginia	53.3%	69.2%	35.0%	66.7%	43.1%	83.0%	86.7%
Washington	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available
West Virginia	33.3%	56.9%	27.5%	77.5%	36.9%	83.3%	68.3%
Wisconsin	65.5%	63.1%	32.5%	55.0%	32.2%	87.8%	72.2%
Wyoming	76.2%	67.7%	45.0%	67.5%	49.3%	97.9%	78.7%