DHHS
Nebraska Department of Health and Human Services

Division of Children and Family Services

State of Nebraska
Dave Heineman, Governor

September 30, 2011

Commission for the Protection of Children
Nebraska Citizen Review Panel
Nebraska Children and Families Foundation
215 Centennial Mall South, Suite 200
Lincoln, NE 68508

RE: 2010 Annual Report

Dear Citizen Review Panel Members,

The Division of Children and Family Services would like to take this opportunity to thank you for all the hard work the Citizen Review Panel has done in the last year. We have reviewed the 2010 Annual Report and we look forward to working with the Citizen Review Panel on completing the next steps identified in the report.

Attached you will find the Division of Children and Family Services response to the Annual Report. The attachment provides a brief update of actions that CFS has taken and plans to continue to implement related to improving the Centralized Intake process.

We look forward to working with the Citizen Review Panel again this year.

Thank you.

Sincerely,

Christine M. Hanus
Child Welfare Administrator

DHHS Response to the Citizen Review Panel Annual Report 2010

Introduction:

The Nebraska Citizen Review Panel for Child Protective Services provided their annual report for 2010 to the Department in June 2010. The Panel addressed two issues in 2010; their continued interest in improvements to the receipt and screening of child abuse and neglect intakes and the sharing of information between the Department of Health and Human Services and local law enforcement agencies. Meeting with representatives from various law enforcement agencies, the Panel determined that the sharing of reports from law enforcement to the Department is generally consistent in the urban and suburban areas, but may be less so in the rural area. The Panel planned to continue focus on this issue by getting more input from rural law enforcement agencies about their practices and barriers in sharing reports. They also plan to collaborate with the Nebraska Alliance of Child Advocacy Centers and the Child Abuse and Neglect Investigation and Treatment Teams to gather more information about policies, practices, and timelines of sharing reports between CPS and law enforcement agencies. The Panel also requested a more detailed presentation on improvements to the Hotline. This was provided in September 2010.

The Citizen Review Panel (CRP) made no specific recommendations to the Department as a result of their work for the 2008-2009 period. We appreciate the next steps identified by the CRP and look forward to their continued work and recommendations. This response will focus on continued efforts of the Department to improve Intake and screening practice.

Efforts and Accomplishments:

As requested, a presentation was made to the Governor's Commission for the Protection of Children of which the Citizen's Review Panel is a subcommittee. Information was provided about changes to Hotline practices, training provided to Hotline staff, and additional improvements planned for the future. (See attached power point presentation.) Data was provided about call volume which was experiencing a significant increase. Child Advocacy Center staff, the Hotline administrator, and Central Office program staff had been providing mandatory reporter training to various community organizations which may have impacted the number of calls received.

Centralized Intake: In January 2010 centralized intake was fully realized by completion of the move of Service Area intake responsibility to the Hotline in Omaha at Project Harmony. Centralization resulted in the creation of a Hotline that responds to abuse and neglect reports from birth to death, by adding full responsibility for receipt and screening of Adult Protective Services reports also. This move was designed to provide greater consistency to screening decisions by locating all Intake Specialists under one administrative unit. Four supervisors provide close oversight to the staff. Better communication and more consistent training is possible now, resulting in more uniform and equitable screening decision making. CFS is making better use of available data about calls gathered by the phone system, and have begun having supervisors listen to intake calls received on a random basis by all specialists. CFS is also exploring the feasibility of recording all intake calls for complaint resolution. The Hotline was relocated to its new facility early in December 2010.

In addition to listening to phone calls as part of quality assurance, CFS has developed a QA review process for written intakes to address concerns about quality of information gathered and accuracy of priority setting. Random intakes from the period October 1 through December 31, 2010 will be reviewed by the end of June 2011. Children and Family Services Specialists are meeting with Intake supervisors and the administrator at least monthly to resolve case specific issues that arise. CFS also has monthly

Intake Advisory Team phone calls with supervisors from each area to obtain all Service Areas input and discussion about what is working well and not so well with the centralized process.

Systematic Analysis of Present Intake Process: In 2009 the Department conducted a systematic analysis of the intake process with the assistance of Emily Hutchinson from the National Resource Center for Child Protective Services (NRC for CPS). This analysis was designed to identify the strengths and weakness of the present intake system. Once the analysis was completed, we worked with the NRC for CPS and representatives from the Service Areas to develop definitions for both child and adult protective services that are more easily understood by Intake staff. Focus was on those definitions identified as most confusing. These included issues of neglect such as failure to provide necessary food, shelter, hygiene, and supervision, among others. Revised definitions were approved and sent out to staff by Administrative Memo #1-2011 (attached) on February 4, 2011. The Intake Desk Book, used by intake staff in both the screening and priority setting decision making process, is being updated to be consistent with the Nebraska Safety Intervention System (NSIS) and the revised definitions. Focus continues to be placed on Intakes that are not accepted for assessment, also known as "screened out" intakes, to assure that no reports of serious alleged maltreatment are screened out. Staff are expected to document why the criteria to accept for assessment was not met. Reports not accepted for assessment continue to be reviewed by a CFS Intake Supervisor within three work days to assure that concerns of abuse or neglect are not screened out inappropriately.

CFS continues to respond to requests from community groups who are interested in presentations to learn more about the reporting law, specific information needed by the Intake Specialist at the time of a report to the Hotline, and to provide an understanding of how DHHS responds to reports of alleged abuse/neglect.

Summary:

The Department appreciates the review of its work and input from CRP members to improve practice standards and better meet the needs of children and families we serve. We agree that the collaboration is working to improve practice for Nebraska families.