



DEPT. OF HEALTH AND HUMAN SERVICES

DISASTER PLAN 2025-2029

Nebraska Department of Health and Human Services Division of Children and Family Services Disaster Plan

As outlined in section 422(b)(16)(A)-(E) of the Act, the Disaster Plan should describe how a State would:

• Identify, locate, and continue availability of services for children under State care or supervision who are displaced or adversely affected by a disaster;

CFS requires the contracted child placing agencies (CPA) to provide their written disaster plans annually. Agencies' disaster plans contain information about how children, youth, and families should respond to different regional disasters, storms, outbreaks of disease, or other emergencies. Agencies partner with CFS staff to ensure foster family homes they support maintain home emergency plans, which include a fire escape and a safe meeting place. CFS staff ensures all DHHS supported foster homes have a home emergency plan and also maintain an updated foster home emergency contact list by Service Area to ensure communication and the ability to provide resources and services for families that are adversely affected by a disaster.

• Respond, as appropriate, to new child welfare cases in areas adversely affected by a disaster, and provide services in those cases;

CFS responds to new child welfare cases throughout Nebraska when areas are impacted by emergencies or disasters and provides services as needed. The DHHS website and the DHHS hotline are important information hubs to help direct and engage those affected by adverse conditions or disasters. The hotline is available 24/7 Statewide and staffed with case managers who can assist in emergency situations. During and after disasters, CFS staff respond to new and ongoing cases and provide resources and supportive services to all children, youth, and families working with CFS.

• Remain in communication with caseworkers and other essential child welfare personnel who are displaced because of a disaster;

CFS has five Service Areas overseen by a Service Area Administrator who maintains a written and electronic calling tree for all staff in their assigned area. Administrators contact supervisors, and supervisors contact their staff when disasters are predicted or have occurred. Pre- and post-emergency or disaster communication helps to determine staff well-being and safety and their ability to perform job functions. CFS case management staff have work-issued cell phones and laptops that assist with important communication.

• Preserve essential program records; and

The Office of the Chief Information Officer (OCIO) is responsible for securing and preserving all DHHS essential electronic program records. Protection and backup of electronic records are completed per OCIO policies including regular backup, alternate servers, and storage of electronic documents. All CFS records are stored on OCIO State servers and can be accessible by CFS staff via virtual private network (VPN) with multi-factor authentication (MFA) during normal operations and in the event of a disaster. This allows CFS staff to have the appropriate

tools to continue to serve children, youth, and families across Nebraska at any time and from any location.

• Coordinate services and share information with other States.

Nebraska can coordinate services and share information with other States through collaboration and communication with other State's Foster Care and Adoption Managers and the ICPC State Deputy Compact Administrators. State's Foster and Adoption Managers and ICPC Administrators use email and regularly scheduled meetings to communicate and assist with other States' needs when affected by emergencies or disasters.

• A Disaster Plan must be submitted as part of the 2025-2029 CFSP. In developing the 2025-2029 Disaster Plan, States should review the 2020-2024 Disaster Plan, and reflect on how the plan was used in any emergency or disaster situations in the past five years to determine if changes are needed.

CFS utilized its Disaster Plan during the COVID-19 health emergency and pandemic. The Disaster Plan was used to ensure communication between CFS, CPAs, and foster and biological families about COVID and related responses to the health emergency. The Disaster Plan was effective in ensuring the safety and well-being of staff and families while providing needed services and resources virtually. The Disaster Plan continues to be a living plan that keeps updated information on CFS staff and has improved computer system access capabilities with multi-factor security for staff to perform job functions from any location in Nebraska.

• CB also strongly encourages States to engage community partners to ensure that equity is embedded into the State's plan and emergency response services. In August 2023, CB released "Using Your Disaster Plan to Advance Equity in Disaster Response," a letter with information and resources underlining the importance of equity and outlining practices to strengthen the State's emergency response planning. Prior to developing the updated Disaster Plan, CB encourages all States to review this letter and the resources highlighted in it.

CFS continues to partner Statewide with the DHHS Safety/Emergency Preparedness & Response Coordinator, Nebraska Emergency Management Agency (NEMA), and Agency providers to ensure local community collaboration and feedback exist in Disaster Planning for emergency response. CFS participates in a multi-faceted response from all DHHS Divisions for appropriate and timely services to all Nebraskans.

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I. PLAN SUMMARY

A. INTRODUCTION

The Division of Children and Family Services (CFS) performs essential functions and services that may be adversely impacted in the event of a disaster caused by a natural catastrophe, technological accident, or human-caused event that has resulted in severe property damage, death, and/or multiple injuries. This plan provides guidance to CFS and serves as the Division's plan for maintaining essential functions and services during a disaster. Natural or human-caused disasters such as floods, tornadoes, fires, and chemical spills can occur at any time and any place. Disasters may occur on a local scale or be widespread and affect multiple counties and/or States. Pandemics, epidemics, and infectious diseases are health emergencies that could dramatically impact the delivery of services.

The Nebraska Department of Health and Human Services (DHHS) is a multiservice agency that applies system of care principles in its service delivery and advocacy for Nebraska's children and families. DHHS is led by a Chief Executive Officer (CEO) appointed by the Governor. The CEO leads five divisions: the Division of Children and Family Services (CFS), the Division of Behavioral Health, the Division of Developmental Disabilities, the Division of Medicaid and Long-Term Care, the Division of Public Health, and the Office of Economic Assistance (OEA). Centralized operations support all. The Director of each division reports directly to the CEO.

CFS is comprised of Programs, Services, and Protection and Safety. The Director's leadership team includes the Deputy Director of Finance, Analytics & Quality; Deputy Director of Protection and Safety; Deputy Director of Programs, Policy, and Legislative Services; and a Community Prevention Administrator. This organizational structure allows CFS to focus on and support the priorities identified by the division.

The Department oversees the operation of the Youth Rehabilitation and Treatment Centers (YRTC). The YRTCs, located in Kearney, Hastings, and Lincoln, serve youth between 14 and 18 years of age who have been adjudicated as a juvenile offender.

The CFS Protection and Safety Unit is responsible for Title IV-B Subpart 1 (Child Welfare Services), IV-B Subpart 2 (Promoting Safe and Stable Families), Title IV-E (Foster Care and Adoption Assistance), Child Abuse Prevention and Treatment Act (CAPTA), Chafee Foster Care Independence Program (CFCIP), and Chafee Education and Training Vouchers (ETV).

In addition, the unit operates the Statewide Child/Adult Abuse and Neglect Hotline and is responsible for conducting all initial safety assessments. Services are primarily delivered through the five State-administered local Service Areas and tribal-administered child welfare programs.

Case management functions are State-administered in the Western Service Area (WSA), Central Service Area (CSA), Northern Service Area (NSA), Southeast Services Area (SESA), and Eastern Service Area (ESA).

The Disaster plan also includes procedures for contacting and maintaining links with Nebraska Emergency Management Agency (NEMA) officials responsible for managing major and catastrophic disasters. NEMA officials have firsthand knowledge of State-coordinated disaster recovery efforts and up-to-date information that can be shared with CFS personnel and assist in responding to the needs of children and families impacted by the disaster. NEMA may activate the State's Emergency Operations Center (EOC), located in an underground bunker in the agency headquarters. The EOC becomes the center for any State response. Depending upon the nature of the emergency, State teams can be dispatched to the disaster area.

In an emergency, the role of CFS is to support consumers and providers in providing safe and healthy service alternatives for children and families during and after disasters or emergencies. The CFS Disaster Plan provides specific actions that the Division and Service Areas may take in emergency situations. This includes provisions for the coordination and communication in the event of a disaster or emergency, coordination in the relocation of children in affected areas, the assessment of the ability of CFS and partner agencies to function, the assessment of providers' needs, and provision for the establishment of temporary residential child placement.

In summary, CFS details the procedures to be followed in caring for children, youth, and families in the event of a disaster or emergency and focuses on planning and procedures for the continued care and supervision of all children and families served and needing assistance, both during and after the disaster.

B. PLANNING ASSUMPTIONS

- CFS will be operational during disasters and health emergencies.
- CFS Units and Service Areas have identified critical functions and capabilities.
- Alternative facilities may be used or developed during a disaster as a precaution to separate staff, implement social distancing protocols, or provide residential care for children and youth who have been displaced during a disaster.
- Essential functions, division operations, and support requirements will continue to be people-dependent. Most activities require human interactions; however, many interactions may not require face-to-face contact or can be conducted with precautionary measures.
- Travel restrictions, such as limitations on mass transit, implemented by Federal, State, local, and/or Tribal governments will affect staff's ability to get to work and conduct business activities.
- Increased absenteeism will occur. Additionally, employees may be absent as they may be personally affected by the disaster or health emergencies.
- Due to the open nature of the work environment, social distancing and other precautionary measures may be implemented during an epidemic or health emergency to limit the spread of known and unknown viruses that may or could result in a widespread pandemic.

C. PURPOSE

The primary purpose of this plan is to ensure that CFS can continue normal business operations and ensure that critical operations can resume/continue normal processing. Throughout the recovery effort, this plan establishes clear lines of authority and prioritizes work efforts to:

- Ensure that CFS can deliver critical services to children and families as it did prior to the incident;
- Provide services to newly identified children and families to assure that children are safe from present and impending danger threats;
- Provide for the safety, physical care, and well-being of children served on DHHS premises and in contracted placements;
- Continue critical business operations;
- Maintain electronic copies of the DHHS Disaster Plan, CFS Disaster Plan, each Service Area Disaster Plan, and lead contractor disaster plans, which are readily accessible at any time to needed staff;
- Minimize the duration of a serious disruption to operations and resources (both information processing and payments);
- Establish management succession and emergency powers;
- Facilitate effective coordination of recovery tasks;
- Identify critical lines of business and supporting functions; and,
- Establish and implement a management system for coordinating with State, Federal, private, and non-governmental agencies using the multi-agency coordination structure in the State Disaster COOP Plan.

D. CHILD AND FAMILY SERVICES IMPROVEMENT ACT

The Child and Family Services Improvement Act of 2006 amended the requirements for a State to have a compliant Title IV-B State Plan by adding section 422 (b)(16) to require that all States have in place by October 1, 2007, procedures for responding to a disaster, including how the State will:

- Identify, locate, and continue the availability of services for children under State care or supervision who are displaced or adversely affected by a disaster;
- Respond to new cases in areas adversely affected by a disaster and provide services in those cases;
- Remain in communication with caseworkers and other essential personnel who are displaced because of a disaster;
- Preserve essential program records; and,
- Coordinate services and share information with other States.

In general, the intent of this legislation was to ensure that agencies across the country have plans in place to address natural disasters, human-caused events, or health emergencies that can affect the routine ways agencies operate and serve children, youth, and families. The federal disaster planning requirements specifically apply to children and families who are involved in state agency investigations, active in-home service cases, as well as, children that are under State care or supervision who are served by programs funded by Title IV-B and Title IV-E.

To meet the federal requirement for disaster planning, CFS requires each Service Area to develop and maintain written disaster plans and submit them for review annually. These plans must focus on planning and procedures for the continued care and supervision of all children served by CFS in the event of a disaster. All Service Area disaster plans must be developed following the criteria set forth by the federal government and the additional guidelines provided in this plan.

E. DIVISION OF CHILDREN AND FAMILY SERVICES ESSENTIAL CORE FUNCTIONS AND SUPPORTING PROGRAMS

Priority	Essential Functions	Suppor	ting Programs
	•Foster Care •Adoption/Guardianship •Central Registry •ICPC •Transitional Youth Services •ICWA	Child & Adult Abuse/Neglect	 Hotline (Centralized) Expungements Background checks Domestic Violence CAPTA CJA Child Protective Services Adult Protective Services
		Foster Care/Adoption	•Foster Care •Adoption/Guardianship •Subsidies •ICPC •IVE Funding •Websites/Exchanges •Protective Service Alerts
Child Welfare Unit		Family Preservation & Independent/ Transitional Living	•Service Array •Non-Court Youth/Families •In-home Services •Medical •Mental /Behavioral Health •Aftercare •Prevention/Early Intervention •Former Ward •ETV •Records Requests •Transition Services
		Indian Child Welfare ACT	•ICWA Program •Tribal contracts •Training
Finance, Analytics &	• Quality Assurance • Operations	Quality Assurance	•QA in Service Areas •Contract Monitoring •Data Analysis/Reporting

Quality/			•Accuracy Reviews
Operations			•Improvement/Corrective
1			Action Plans
			•Utilization/Capacity
			Management
			•Case Reviews
			•Process Reviews
			•Compliance Reviews
			•Program Improvement
			Plan (PIP)
			Policy Management
			CFSR
			NFOCUS
			•Contracts
			•Audits
		Finance/Operations	•Budget
		•Billing/pay •Fed/State F	•Billing/payments
			•Fed/State Reports
			•Grant Management
			•AR's & OM's
			•Contracts for Services
			•Programming
			•Discipline
			•Grievances
		Youth	•ACA Accreditation
OJS		Rehabilitation	•PBS Monitoring
	•YRTC Operation	&Treatment	•Monitoring Releases
033		Centers (YRTCs)	•Review/Monitoring
		Kearney, Hastings,	Physical Interventions
		Lincoln	•Maintenance/Renovation
			of structures –monitoring
			•Community re-entry
			from YRTC's
			•Triage Center/Crisis/Re-
			entry evaluations

F. EMERGENCY PREPAREDNESS

CFS emergency preparedness efforts include:

- On-going development of partnerships with emergency response agencies;
- On-going training as necessary for staff and contractors;
- Annual review of the CFS Disaster Plan;
- Annual review of the Service Area and Lead Contractor's Disaster Plans;
- Plans for delegation of authority for each CFS unit and Service Area that are at least three deep per responsibility where possible in key positions,
- Utilize call-down phone trees for CFS staff communication;

- Coordinating with key partners;
- Strengthen internal and external communication systems;
- Support Statewide, automated information systems;
- Establish ongoing support services to help staff manage compassion fatigue and the day-to-day trauma that goes along with their work; and,
- Communicate critical information to staff, families, and providers.

G. CFS DISASTER FUNCTIONS

CFS has identified the following activities it will carry out during or after a disaster to ensure that children remain safe and healthy:

- Communicate with partners and customers during, after, and in anticipation of disasters or health emergencies;
- Work with providers to ensure that children are relocated off-site if hazardous materials, fire, and/or other disasters or emergencies pose a threat to their safety while they are placed in out-of-home care;
- Assess whether CFS's capacity to carry out its roles has been affected by the disaster or health emergency and make provisions for the continuation of identified core Division functions;
- Maintain a database to track clients who have called in to communicate that they have been affected by a disaster;
- Conduct an initial assessment of locations and needs of children, families, providers, and youth who are in independent living situations;
- Offer assistance assessing damages and needs to facilities after a disaster;
- Facilitate arrangements for the development of temporary residential child placement options;
- Assure the continuation of child abuse and neglect investigations; and,
- Provide assistance tailored to specific disaster needs.

CFS offers additional programs and services to children, youth, and families affected by the disaster, such as:

- Provide information, support, and services for children, youth and families and coordinate services with other agencies;
- Facilitate access to immediate trauma services for children, youth, and families;
- Provide assistance for medically fragile children and their caregivers;
- Assist in finding child care for families seeking help;
- Provide assistance needed by foster families to provide for their own children;
- Identify children separated from their families and assist with reunification;
- Locate and provide services close to where families and children are, mobilizing disaster assistance centers with local and Statewide service providers, if possible, also using available mobile units, neighborhood centers, or a coordinated outreach approach to provide access;
- Locate culturally competent services and provide information about resources in the client's language and in a culturally appropriate way; and,

• Compile and distribute lists of other disaster-related services and programs available through Statewide emergency management efforts and/or other agencies.

<u>During disasters, CFS and its partners can draw on established relationships to communicate as necessary about the situation.</u> This includes:

- Statewide emergency management staff: Between agencies, discuss the location of emergency services, get information on the agency's role in the response, and advocate for the needs of children, youth, families, staff, and volunteers.
- Liaisons in other jurisdictions: Contact liaisons in other counties or States for assistance or to consult and share information on families leaving or coming into the area.
- Contractors: Roles and responsibilities are functioning as needed between the agency and various contractors.
- Service providers: Consult about the status of current services and plans for services to be delivered after the disaster.
- Courts: Coordinate efforts with courts to locate children and workers. Communicate about any necessary delay in court proceedings and on emergency placements of children. Consult on a process to transfer jurisdiction across State lines when the child and foster family have relocated and the family has no plans to return. For others, institute ICPC requests as appropriate.
- Federal partners: Maintain contact with federal partners to share information and communicate about federal requirements and local needs.
- Volunteers: Draw on any trained or available volunteers.

Coordinate with Communication and Legislative Services to communicate with consumers, staff, and organizations.

- Use the internal communication system to broadcast messages about the disaster or health emergency to staff in all locations.
- Ensure that toll-free phone numbers are working or are available as soon as possible.
- Post critical information on websites and keep updated.
- Implement the media plan.

II. DISASTER PLANNING/ PREPAREDNESS

A. STATE DISASTER COORDINATION

The Nebraska Emergency Management Agency (NEMA) is responsible for general emergency planning and agency coordination in support of the State Emergency Operations Plan. Nebraska's Governor designated The NEMA Director as the State Disaster Coordinator.

NEMA has prepared The State Emergency Operations Plan, which establishes the policies, plans, guidelines, and procedures that will allow Nebraska's emergency planning, response, recovery, or mitigation responsibilities to function effectively as a team when disaster strikes. The preparation phase will begin when it is determined that a disaster is imminent. A disaster is considered imminent when the CFS emergency response plan is activated.

Before, during, and after a disaster or emergency, the DHHS Management Team, CFS Director, or Deputy Director will notify the CFS Management Team of the nature of the disaster and that the plan has been activated. This communication will continue during a disaster or emergency. The CFS Management Team will make decisions at the division level.

If necessary, CFS Management Team members will be asked to report to a designated location to ensure coverage of CFS essential functions. Emergency contact information will be collected from all CFS employees, including a history of previous work experiences within DHHS and any special expertise for special assignments. The specific role of CFS staff members will be clarified during the assignment of specific activities for the disaster. CFS Management Team members will coordinate with other DHHS Disaster Team members (ESF-8).

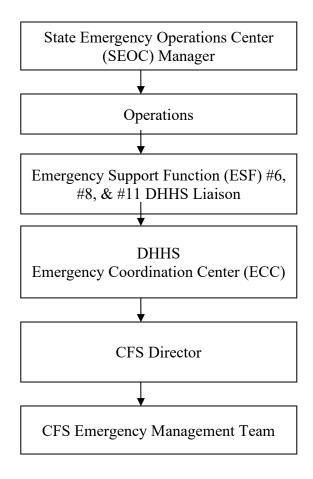
The CFS Director, Deputy Director's or a member of the CFS Management Team will determine which disaster teams to activate and which functions in the Division's Disaster Plan need to be carried out. CFS field staff, central office staff, and partner agencies will be called upon, as needed, to assist in making decisions and/or facilitating responses. CFS staff may also be temporarily reassigned to carry out specific duties or special assignments related to the disaster.

B. COORDINATION IN DISASTER RESPONSE FUNCTIONS

The CFS Management Team will make important decisions about emergency strategies, policies, and resources and will serve primarily as the Division's lead in the event of a disaster.

CFS will use a team structure to plan and oversee its disaster response. The CFS Management team will provide oversight, and specific disaster response tasks will be assigned to specific disaster function teams as developed by the CFS Management Team. Service Area Disaster Teams will manage Service Area coordination and collaboration across functions.

CFS will collaborate with other agencies on disaster response activities through the State Emergency Response Team. The CFS Director or their designee will participate in any Statewide emergency planning processes and make strategic decisions about coordination with other agencies.



For each unit within CFS, the emergency response specifies:

- The role of the supervisor charged with determining whether it is safe for the unit to do its work and with activating the phone tree to contact staff; and,
- Mobilizing staff into specific roles as needed for a disaster or health emergency.

Disaster response planning provides guidance for foster families and necessitates residential and in-home providers to implement their home emergency plans.

In an emergency, the Division maintains its regular on-call procedures (already established for night and weekend work) to ensure no interruption in services to children and families in need. CFS on-call workers would also respond, with law enforcement and/or other responders, to incidents where children are displaced from their parents by the disaster.

Communication is critical in an emergency. Whenever possible, staff will use cellular phones to stay in communication. If that avenue is unavailable, staff will "pony express" messages, carrying them from person to person until an operable communication method is found. Local emergency management staff will use ham radio operators to communicate when necessary, which would be available to CFS staff in emergencies.

DHHS has upgraded its remote work options for CFS staff, which include access through VPN and CITRIX for electronic work-related documents, files, email, and attendance at meetings from remote locations via the Internet. Additionally, access has been established for program-specific

databases. The State's web-based Outlook system is also available via the Internet to staff who only need access to email.

CFS Administrators are responsible for:

- Identifying staff who currently have access to VPN or CITRIX, assisted by the DHHS helpdesk and local CFS security administrators in each Service Area;
- Securing access to VPN or CITRIX for staff who can work at home or from a remote location prior to, during, or post disaster or health emergency events;
- Establish reliable access and security protocols; and
- Ensuring staff have the necessary and appropriate equipment (i.e., computer, laptop, docking station, work cell phone, fax, printer, internet connection) at the remote work location.
- CFS staff laptop computers are equipped with either VPN or CITRIX.

C. DISASTER FUNCTIONS

CFS could undertake the following disaster functions to fulfill the Division's role in supporting service providers and providing children and families with safe and healthy alternatives for services during and after disasters or health emergencies.

CFS may use multiple disaster function teams to carry out specific disaster response and recovery activities and efforts to deploy resources that meet specific needs. A team leader, a coleader, and/or an alternate team leader are designated for each disaster function, and key roles are assigned to the appropriate team members in advance. Disaster function team leaders will report to the CFS Management Team.

Service Area Disaster Teams will be used to facilitate communication and collaboration among CFS and partner agencies at the Service Area level, as well as promote clear communication between Service Areas, the Central Office, and other State Agencies.

Disaster Function Team	CFS section/Staff responsible for function	Partner agencies who may play a role
Planning and Emergency Preparedness CFS preparations, including disaster plan update/training	CFS Emergency Management Team and assigned personnel	DHHS Emergency Response Coordinator Nebraska Emergency Management Agency (NEMA)
Communications Making the public and partners aware of CFS assistance and facilitating communication among partners to improve disaster response and recovery.	Director's Office Communication and Legislative Services	NEMA/local EM, Service Area, Service Area Administrators, DHHS Chief Medical Director

Operations and Coordination Including identification and verification of safety and availability of all employees in making work assignments; and temporally ceasing some non-critical operations, evaluating COOP templates Assistance with Location Verification and Relocation	CFS Emergency Management Team DHHS Public Health	DHHS Human Resources NEMA/CFS Management
of Children Off-Site if a disaster happens while children are in out-of-home care	Licensure Unit Director's Office Administration Service Areas	Team DHHS Emergency Response Coordinator
Facilitating the Development of Temporary Child Placement and Services Help establish the following: 1) to keep children safe during and immediately after disasters; 2) to expand capacity/ access to child placement.	DHHS Public Health Licensure Unit Director's Office	Red Cross/EM personnel DHHS Emergency Response Coordinator
Continuation of Abuse/Neglect Investigations	Intake and Initial Assessment Staff	Local DHHS CFS office – Child and Family Specialists
Legal Requirements of Children and Family Services	DHHS Legal	
InterState Compact on The Placement of Children	ICPC Staff	
Continuing the Reimbursement of Services Enable providers who offer subsidized care to continue to get reimbursed during and after a disaster.	CFS Billing and Payments Team	Automation contacts DHHS Finance and Support Office
Other Assistance – solutions tailored to the disaster, Assessment of Child Care Providers' Damages and Needs	Director's Office Other sections, TBD	TBD

III. DISASTER FUNCTION TEAMS

A. PLANNING AND EMERGENCY PREPAREDNESS

Regular review and update of Disaster Plan: The CFS Management Team will oversee the annual review of the plan, which will involve review by Service Area teams, updating team members and partners lists as needed, and development of recommended changes after the review. When the Management Team decides on changes, the plan will be finalized, and the revised version will be distributed to CFS staff and partners. The designated Disaster Plan Coordinator in the Central Office coordinates this.

Training of CFS Staff, Contractors, and Partners: Distribution of Plan Materials – All CFS staff will be provided with computer access to the CFS Disaster Plan and CFS' emergency procedures via SharePoint. New staff will be directed to the plan as part of their general orientation with the CFS personnel representative. All CFS staff members will also be provided with a brief emergency procedures document explaining what to do in case of emergencies/disasters during the workday. CFS key partners will be provided with an electronic copy of the CFS Disaster Plan.

Disaster-related team lists will be updated quarterly, including work and home contact information. Each team list will be kept confidential and shared only with team members, the Disaster Team Leaders, CFS Management Team members, and the CFS Disaster Plan Coordinator. CFS may share management team member's contact information with key partners.

Training CFS Emergency Management team members, which consist of team leaders and management team members, may be asked to participate in emergency drills or attend meetings to discuss disaster roles or procedures, as requested by the Emergency Response Coordinator with the Division of Public Health, who is responsible for disaster planning within DHHS.

B. COMMUNICATIONS

Disseminating timely and accurate information to public health officials, medical care providers, the media, and the general public is one of the most important facets of Disaster preparedness and response. Nebraska Communication and Legislative Services (CLS) has an established Crisis and Emergency Risk Communication Plan to coordinate all communications for DHHS. This section describes the procedures for leading and assisting with communications to ensure that service care providers, the public, and partners are aware of CFS and other agencies' assistance. Coordination with other DHHS divisions will occur to facilitate communication among partner agencies to improve collaboration and avoid duplication.

Overall CFS responsibilities:

- Help develop and disseminate emergency preparedness information;
- Develop a management communication plan to post information for CFS staff, families, providers, and youth on a designated website and update it regularly (i.e., disaster event updates, alternate transportation routes, toll-free numbers, and other contact information);

- To encourage consumers, providers, and families receiving in-home services to develop and update family disaster plans and provide them with emergency preparedness information and CFS emergency contact numbers that they can call;
- To check on the safety and status of foster children, foster families, and biological families after a disaster;
- Help disseminate information about available services and other types of assistance to parents in affected areas in the event of a disaster;
- Collect and share information on response and recovery efforts with CFS partners (act as a central clearinghouse to reduce the chance of duplication);
- Post information for citizens and the community on a designated Public DHHS website and update it regularly (disaster updates, alternate transportation routes, toll-free numbers, and other contact information);
- Directly communicate with agencies likely to be involved in operating emergency shelters to help locate displaced children and families after a disaster.

Communications before a Disaster:

- The CFS Management Team, in conjunction with the Service Area Administrators, will develop a plan for information to convey to CFS staff, partners, service providers, and families in preparation for emergencies;
- The CFS Management Team works with other Service Area Administrators and the Disaster Plan Coordinator to develop and disseminate information to CFS staff and partners;
- All contracted and licensed providers have an on-site written plan detailing the procedures to be followed to care for children in the event of an emergency or disaster;
- The CFS Management Team and Service Area Teams will develop and collect information to share with providers to encourage them to be prepared for disasters and,
- Develop a management communication plan to activate and post toll-free telephone numbers or reserve numbers for CFS staff, families, youth, foster care, and other service providers to contact during and after a disaster.

<u>Implement Response:</u>

- Declaration of a State of emergency is made by the United States President or the Nebraska Governor. Because disasters may require immediate action, the Director or designee has full authority to activate disaster functions and temporarily reassign staff as needed to carry out response functions;
- The DHHS Communications Office will lead efforts to review press releases, disaster
 updates, and other written communications regarding the disaster event. The CFS
 Management Team assigns all communication responsibilities and, as appropriate, asks
 for help from Service Areas. CFS Management Team and Service Area Disaster Function
 Team leaders will work closely together to ensure appropriate and accurate reporting and
 communications;
- If children need to be relocated from residential child care facilities facing potential dangers, the CFS Management Team will work with CFS field staff, Emergency Management personnel, and/or providers to obtain information about the relocation and assist, as needed, to contact parents;

- CFS shall notify the tribes about the emergency or disaster event and whether a child described by the Indian Child Welfare Act (ICWA) has been affected by the emergency or disaster. As deemed appropriate, CFS will coordinate identified services with the tribe to ensure the continued health and safety of the child;
- The CFS Director or the DHHS Disaster Communications Team Leader works with the DHHS Communications Office to help disseminate information via media outlets in the affected areas. The DHHS Communications Office has pre-developed web pages with the ability to use video production to stream important messages on the internet. If necessary, the Communications Office will request activation of the planned public information hotline;
- CFS shall contact all Federal partners involved in the delivery of services and notify partners of the emergency or disaster. The CFS Management Team designee shall share necessary information with our Federal partners to promote the continuity of service delivery during the emergency or disaster;
- CFS will work with local and State health departments, the Nebraska Emergency Management Agency (NEMA), and other partners to determine what information related to their disaster efforts should be disseminated to providers;
- CFS will ask partners to assist the DHHS Communications Office efforts and will, in turn, seek opportunities to make partners' activities known to child and family service providers and families and,
- The DHHS Communications Office will update the DHHS website to disseminate pertinent information about the Disaster event.

Communication Center:

A Division Communication Center may be established to centralize communication between the Central Office, Service Areas, satellite offices, and other Divisions. The Center will be located at 301 Centennial Mall South, Lincoln, Nebraska 68509.

The Division Director or their designee activates the Center when a specific disaster results in major damage in one or more counties and when the division resources to support its disaster response and recovery efforts generally exceed normal operations. It is anticipated that the center may be activated in preparation for a major disaster. During many disasters, the impact or the event may not exceed the division's capacity to respond using the personnel normally assigned to support a city or county involved in a specific disaster. In these situations, the division would rely on normal personnel assignments and communications channels in a disaster response.

The utilization of telephone landlines, cell phones, and WebEx will be the primary means of communication during a disaster. The utilization of teleconferences and /or video conferences will be maximized, and in-person meetings and conferences will be minimized or eliminated during a health emergency. Alternate communications modalities will include the internet, satellite telecommunications, satellite radio, local 800 MHz trunk radios (local communications), cell phones, and, when necessary, media outlets. All DHHS Public Health communications equipment is inter-operable with the Nebraska Emergency Management Agency.

Using laptops, high-speed telecommunications links, cell phones, flash drives, and other DHHS-approved system options will enable employees performing mission-essential functions and

services to communicate and maintain connectivity with internal organizations, external partners, and customers.

CFS Administrators are responsible for identifying all individuals who may work from alternate facilities or homes to ensure they have the equipment necessary to perform essential job functions. Where internet connectivity is required for essential job functions, CFS Administrators must also ensure this. Essential communications and information technology resources are included in each Service Area's essential information templates.

Administrative staff will be available to assist with requisitions for supplies, equipment, copying, or printing needs and arrange for specific phone numbers to be assigned to the center. Personnel may also be tasked with arranging conference call-in numbers for county briefings.

A minimum of three division employees are assigned to be contact persons at the center. These individuals include two CFS Management Team staff and at least one employee from the Economic Assistance Section. The Economic Assistance Section employee will serve as the Disaster SNAP Program liaison. Additional staff may be assigned as needed.

Conference calls with the affected counties will be held on an established schedule. Conference calls should be scheduled daily during center operations unless otherwise noted. The Division should notify Service Areas by e-mail or post on the intranet the activation of the center, contact persons, telephone numbers, e-mail addresses, conference call numbers, and schedule. The division should also distribute information regarding contacts, phone numbers, and department briefings to other divisions.

Division Liaisons with Service Areas:

To provide continuity of information and planning for the Division in its role to support Service Areas during a disaster, the Division will identify liaisons to work with identified Service Area staff. To the greatest extent possible, all communications should go through the identified staff person assigned to the Service Area. Each Service Area has designated a Disaster Coordinator who communicates regarding the current 'on the ground' disaster event situation and how best to support the specific geographic area. It also provides for tracking of requests from and responses to counties located in each Service Area. This method of operation does not preclude other Division staff and Division management from communication with counties as may be necessary. The number of counties that staff have responsibility for depends on the nature of the disaster, the extent of the disaster geographically, and the number of Division staff available for the Communications Center

Depending on the nature of the disaster, assigning one or more staff to act as the liaison for a specific Service Area may be necessary if staffing is needed for periods impractical for one person to handle. A normal assignment would be 48 hours, but not to exceed 72 hours unless there is no means to relieve.

C. OPERATIONS AND COORDINATION

Sustaining operations will be performed until normal business activity can be reconstituted; this may take longer than 30 days. The principal focus in making this determination is to minimize the effects of the disaster on consumers, staff, and operations. In the event of a flu pandemic, operations will emphasize and implement procedures such as social distancing techniques, infection control, personal hygiene, and telework to sustain operations. Based on the event, the Division Director or designee will make the final determination about what essential positions or skills are needed to maintain division operations based on division priorities and identified functions that must be maintained as identified per program essential functions.

This disaster function team reviews the COOP templates and coordinates strategies for ensuring that critical everyday functions of each operating program's core functions are identified and maintained in the presence of the disaster or expected staffing levels of a health emergency or pandemic. In the event of a pandemic, division programs will be reviewed to consider the need to perform essential functions beyond the traditional 30-day COOP requirement.

Under the CFS Emergency Plan, there are five Service Areas. If a disaster is identified in any one Service Area of the State, all Service Area Administrators can be deployed.

Deployment begins with a request from the local emergency management or a State agency for involvement.

- 1. The CFS Director and/or their designee decide to activate the needs assessment function and determine whether, given the disaster scenario, the field or Central Office staff should take the lead.
- 2. If the CFS field staff is given the lead role:
 - At the direction of Service Area Administrators, assigned staff gathers information about licensed providers and foster homes in their area;
 - With the help of their partners, if needed, staff provides information they gather to their supervisors and indicate which programs may require additional follow-up. The supervisors will ensure that the Central Office has up-to-date information;
 - A team in the Central Office helps follow up to complete the needs assessment by making phone calls to providers who cannot be reached.
- 3. If the CFS Central Office is given the lead role:
 - A team in the Central Office conducts the initial survey of programs in affected areas by making phone calls to providers;
 - The disaster function team leader identifies programs for which information is incomplete and asks assigned staff to complete the information;
 - As requested by their supervisors, staff will locate as much information as they can (e.g., visiting programs that could not be reached by phone) to complete the missing information:
 - A spreadsheet will be used to keep up-to-date information regarding the status of programs effected;

- The disaster function team leader shares the information through the needs assessment with the CFS Management Team, and this information will be used to help determine what types of disaster responses may be needed and,
- Needs assessments should be continued until providers have resumed normal operations.

4. Continuity of Operations

The CFS Emergency Management team establishes a chain of command and procedures to signal to alter specific Children and Family Services operations, such as shutting down non-critical operations or operations in affected areas or concentrating resources on critical activities, and returning to normal operations.

5. Relocation of Offices

If the emergency impacts the CFS Central Office, the Division Director will work with the members of the Management Team to identify any impacts on Central Office staff, the Division office, technology, computer, and phone systems, and what resources may be needed to address the negative impacts. The key CFS Central Office staff would relocate to the identified alternate site in the Lincoln area or work in remote locations. All Service Area plans identify their relocation sites.

CFS shall rely on the Department of Administrative Services (DAS) Building Division logistical support services and infrastructure systems at CFS facilities that remain open (for greater than 30 days) to include alternate operating facilities in the event of an incident concurrent with a pandemic outbreak or other health emergency. This support includes:

- Prioritization/determination of accessible facilities/buildings (as an alternative to relocating to the remote facility)
- Necessary building support staff
- Sanitation
- Essential Services

Partners such as Information Services & Technology (IS&T) may also be called upon to help with the assessment and asked to help the Division develop solutions.

Service Area Administrators would activate phone trees to determine how their field staff have been affected, what resources would be needed to enable the field staff to resume operations, and any information they know about the status of partners in their areas.

If the CFS Central Office were so severely impacted that staff were unavailable to assume leadership roles in the immediate aftermath of the emergency, the Eastern Service Area Administrator would play the primary leadership role for the Division until Central Office staff were available to reassume these responsibilities. The Eastern Service Area Administrator would coordinate with the team members and the other Service Area Team Leaders to assess CFS functionality and staff status.

CFS Management Team members would work with the DHHS Emergency Response Coordinator and other response staff as needed to collect information about the nature of the threat, the geographic area involved, service providers who may be at risk, and the number of children who should be relocated. If time allows, providers in the affected area could be polled to determine whether they have child seats and vehicles that could be used to transport children to safety.

Providers in the threatened areas would be alerted about the relocation and told what key supplies and child records to gather. CFS staff will be in contact with other management team members to determine whether State or local emergency personnel are contacting provider facilities. If so, CFS will ensure that emergency personnel have the latest information on the location of provider facilities and find out where emergency personnel are directing facilities to relocate. CFS and partners could then assist providers in locating transportation if needed. If emergency personnel are not contacting facilities, CFS will find out from State or local emergency personnel where providers could relocate, if needed. CFS will enlist partners to assist in calling providers facilities to alert them of the relocation and to share information from emergency personnel on relocation sites. CFS and partners could also assist providers in locating transportation if needed.

To the extent possible, CFS staff or partners would work with providers throughout the relocation to coordinate records regarding the location and status of evacuated children and families. Information would be made available to parents as quickly as possible concerning where their children are, including how and when the parents can reunify with their children, when appropriate. CFS will keep other management team members or local emergency personnel informed of providers who have relocated with children. Strict procedures will be established to ensure that children are released only to adults authorized by CFS or after confirmation that it is the child's parent or guardian. The child and authorized adult names and contact information for parents or guardians will be documented and supplied to the determined relocation or evacuation site.

Depending on the nature of the relocation, CFS staff can work with the Division of Behavioral Health and Developmental Disabilities to offer mental health services and other supportive services to children and families who might have been traumatized by the evacuation or relocation. The Division of Behavioral Health also maintains this website for information: http://www.disastermh.nebraska.edu/

Needs assessments should be continued or repeated periodically until the Division and key partners have returned to normal operations. The CFS Emergency Management Team and State Emergency Response Team members would be provided with the latest information on the needs to develop appropriate responses.

6. Epidemics, Pandemics, and Public Health Emergencies
In the event of a declared public health emergency or an identified epidemic or pandemic, businesses, and other employers will play a key role in protecting employees' health and safety and limiting the negative impact on the economy and society. DHHS has a special responsibility to plan for continued operation in a crisis and should plan accordingly. In the event of a public health emergency epidemic or pandemic, employee absences of 30-40% or more are possible and to be predicted.

The CFS Management Team will work with each CFS Service Area to identify which staff have been cross-trained in multiple areas. In coordination with DHHS Human Resources, the team will give direction on establishing flexible worksite options (e.g., telecommuting, working remotely) and flexible work hours (e.g., staggered shifts) when appropriate for planned social distancing.

All staff will be required to report immediately their own possible illness during a public health emergency, epidemic, or pandemic. Prompt action by Administrators and Supervisors can prevent and/or minimize the spread of an illness. If an employee is identified as having potentially contracted an illness while at the workplace or outside of the workplace, administrators/supervisors shall grant the individual sick leave and ask that they go home. If an employee exhibits signs/symptoms and refuses to leave the workplace during a pandemic event, the employee shall be referred to workplace medical services if available. If an employee continues to refuse to leave the workplace, next-level supervisors and human resources shall be contacted to provide direction on the removal of a potentially sick or infected employee.

Administrators are responsible for the accountability of all employees who:

- Are ill due to a pandemic illness or other illness or injury;
- Working from home or alternative location due to pandemic event;
- On leave status due to the pandemic event; and/or,
- Have been reassigned to other functional areas due to the pandemic event.

Necessary documentation shall be in accordance with guidance from Human Resources and/or appropriate personnel policies.

D. ASSISTANCE WITH LOCATION VERIFICATION AND RELOCATION OF CHILDREN OFF-SITE

Location verification is critical in preventing State wards from going missing or dispersing to unknown locations. Verification and location of all State wards and families are critical in keeping children and families safe and making vaccines and antiviral drugs available to vulnerable populations. Contact with youth and families assists in the identification of immediate medical and behavioral health needs following a disaster.

1. "Relocation" (also known as "off-site evacuation") refers to the movement of children away from regulated out-of-home facilities to a safe location during an emergency.

CFS has the authority to require providers to relocate children and will assist providers, parents, and emergency personnel when current placement agreements exist. CFS recommends that providers designate the site where children would be relocated in advance, periodically notify parents of this relocation site, and plan for safely transporting the children. Providers are expected to follow instructions from local authorities regarding when to relocate children.

The Division's role in evacuation and relocation will be to serve as a central point of contact to:

- Ensure that all State wards are safely accounted for and assist in their evaluation/relocation to safety if they are currently placed in a child-caring agency or group home.
- Maintain a centralized report for each Service Area of all children by designated type of placement, physical address, and contact phone number.
- Ensure that emergency personnel who may be activating the evacuation/relocation have accurate information to find all the providers in the area.
- Ensure that all providers in the area being relocated by local authorities are aware of evacuation.
- Inform providers, as needed, of sites designated by local authorities where they might relocate.
- Assist providers, as needed, in locating transportation to evacuate and relocate children.
- Obtain information about where providers are relocating and provide it to parents or emergency personnel as needed.
- Remind providers who are relocating children about safe transportation procedures.
- Ensure the identification, safety, and needs of any unaccompanied minors who have been relocated.
- 2. Assistance with Relocation of Children and Families in the Community receiving In-home Safety Services:
 - Individuals and their families have primary responsibility for being prepared for and surviving disasters. Local governments and/or the American Red Cross provide assistance as their capacities allow during disasters.
 - During disasters, many people may need to evacuate, seek shelter with relatives, friends, and neighbors, or secure hotel accommodations. Emergency public shelters may be available in the community when those options are unavailable.

During and after the disaster or emergency, CFS will continue to assess the ability to maintain the integrity of the safety plan where the family has been relocated and determine if it needs to be adjusted.

E. ASSESSMENT OF PROVIDERS DAMAGES AND NEEDS

A key part of operations will be determining how the emergency has affected CFS and/or key partners' ability to function. It will be critical to determine how CFS staff, equipment, and offices may have been affected in order to develop appropriate responses.

F. FACILITATING THE DEVELOPMENT OF TEMPORARY RESIDENTIAL CARE AND SERVICES

CFS will work collaboratively with the Division of Public Health and other partners to ensure that healthy and safe residential care and service arrangements are accessible to meet the needs of children and parents. The definition of temporary residential care, for the purposes of this plan, is organized supervision of unrelated children that may ordinarily be subject to child-caring agency or group home licensure but, due to the severity of a disaster, may be allowed to operate

without a license for a limited amount of time. Temporary residential care arrangements would be allowed to protect the health and safety of children, as well as promote the family's efforts to recover from the disaster.

CFS will work with the partners listed above to make them aware of conditions under which temporary services may be allowed and encouraged:

- Existing licensed providers who are temporarily or permanently unable to continue providing services if the overall supply of child residential care in the community is no longer sufficient, as determined through the needs assessment or other sources;
- Families needing child residential care while they are seeking disaster assistance or living in temporary housing or shelters so they can focus on recovering from the disaster and their children can get special attention; and,
- Emergency workers with young children that need child care to be able to report for duty.

1. Service Provision

- The CFS Director, or at the Director's request, the CFS Management Team, decides
 whether service provision arrangements are needed to supplement existing capacity,
 make it easily accessible to families affected by the disaster, or assist with the relief
 effort. If temporary arrangements are needed, the Director determines the appropriate
 scope of CFS involvement.
- Using information on family needs gathered with the CFS Management Team representatives, the Director will determine what kind of temporary service arrangements may be allowed and encouraged.

G. CONTINUATION OF ABUSE/NEGLECT INVESTIGATIONS

If Child Abuse and Neglect reports are received in areas affected by a disaster, hotline intake staff will make every reasonable effort to process the report. If hotline staff need assistance and if other staff trained in Intake and Safety Assessment procedures are available to aid, the CFS Hotline Administrator may temporarily give the backup staff intake assignments. If the disaster prevents intake staff from processing reports within the normal time frame, the Deputy Director of Protection and Safety will be notified by the Hotline Administrator.

Throughout the disaster, CFS will deploy staff to provide a variety of services to the aforementioned children. Intake staff will be assigned, to include, but not limited to, the following:

- To designated identified shelters to process the initial intake and registration of unaccompanied minors, as well as make efforts to reunify said children with their parents, legal guardians, or responsible adult relatives;
- To be available for 24-hour, 7-day emergency standby to conduct child and abuse and neglect referral investigations as reported to the abuse/neglect hotline and/or on behalf of families;
- To work with law enforcement and local emergency response teams to receive referrals and to get authorization to enter a physical disaster area to provide services;
- To provide pre-placement preventative services and/or foster care placement services, as needed:

- To ensure ongoing case management duties are fulfilled on behalf of all dependent children and their families;
- To make all reasonable efforts to provide supportive services to all children under its care and custody, those under its temporary care and supervision, and the children's care providers during the disaster; and,
- To respond to emergencies with other emergency personnel as requested and as applicable to their roles and duties (i.e., law enforcement, probation, parole, fire).

H. LEGAL REQUIREMENTS OF CHILDREN AND FAMILY SERVICES

Federal and State laws have been enacted to improve the timeliness and quality of care determinations. The Adoption Assistance and Child Welfare Act of 1980, 42 §§ 620-629, 470-477, as amended by the Adoption and Safe Families Act (ASFA) is the principle federal legislation governing foster care and permanent planning for dependent and neglected children. ASFA necessitates more timely, decisive, substantive hearings and more frequent court and administrative reviews.

These include:

- Reviews at least every six months;
- Permanency hearings at least once every 12 months; and,
- Petitions for the termination of parental rights by the time a child had been in foster care for 15 out of the most recent 22 months.

Other legal deadlines commonly found in the State statutes or court rules include:

- Hearings to determine whether to continue children's removal from home;
- Filing child abuse or neglect petitions;
- The completion of the hearing to decide whether the allegations of the petition are true, and the court will therefore assert its authority over the child;
- The completion of the hearing to decide whether the State will be given the custody of the child for placement into foster care; and,
- The completion of termination of parental rights (TPR) proceedings.

During an emergency, DHHS Legal will review applicable Nebraska statutes and recommend which, if any, could be waived in the event of a disaster, pandemic, or declared health emergency.

I. INTERSTATE COMPACT ON JUVENILES

CFS will identify all youth currently placed in Nebraska through an InterState Compact of Placement of Children (ICPC) or InterState Compact on Juvenile Offenders (ICJ). CFS Specialists and/or Supervisors will communicate with ICPC and ICJ Program Specialists regarding the need for evacuation and the overall well-being of the youth placed through ICPC or ICJ. The continued coordination of services shall be discussed to minimize any service disruption.

In the event that a child placed in Nebraska through ICPC or ICJ is affected by the emergency or disaster, a determination shall be made with the home/sending State regarding the continued placement and disposition of the child or youth.

J. CONTINUING REIMBURSEMENT FOR SERVICES

The CFS Chief Financial Officer and the billing and payments team will ensure that providers who can continue to offer services are reimbursed as quickly as possible.

The team determines the extent and estimated duration of the disruption. If the reimbursement system is down throughout the State and it is not anticipated that the system can be reestablished within two weeks, the disaster function team identifies procedures for Service Areas to follow in the interim. Staff members contact agencies to make them aware of new procedures. In the event that phone, fax, and email communications are disrupted, staff will make contact on-site if it is possible to travel. If the subsidized reimbursement system experiences partial disruption and the main system is unaffected, the disaster function team continues automated procedures with unaffected counties.

The team will help to identify the needs of families currently receiving subsidy services, establish processes to ensure service continuity, and implement procedures to process new applications for families needing assistance as a result of the emergency.

Based on information provided by CFS staff, partners, or Statewide disaster reports, the CFS Director or the Director's designee determines that emergency procedures are needed. The CFS Division Director or the alternate verifies if State funding is available for emergency service provision.

IV. <u>DISASTER RESPONSE</u>

A. DISASTER RESPONSE ACTIVATION/EMERGENCY PREPARATION PROCESS

DHHS CFS Central Office and CFS Service Areas will communicate about the counties that have been declared an emergency. This communication will discuss division-specific issues and obtain information not provided through the Nebraska Emergency Management Agency (NEMA). The initial call will include identifying the counties in danger of an imminent disaster and giving information regarding if and when the CFS Communication Center will be activated.

Notification will also provide:

- 1. Alternative Communication methods in the event that landline telephone service is interrupted;
- 2. Update the directory of changes and telephones using e-mail, conference calls, and web intranet; and,
- 3. Notify State and field staff assigned to disaster response and review their responsibilities.

Each Service Area will have the following responsibilities:

1. Provide any updates to the staff directory;

- 2. Review the Service Area plan with staff;
- 3. Coordinate with local county emergency management; and,
- 4. Notify the CFS Central Office of any locally needed personnel, equipment, forms, or supplies.

B. RESPONSE TO AN IDENTIFIED DISASTER EVENT

Response will begin as soon as communication can be established between the CFS Central Office and local CFS Service Areas prior to or immediately following the disaster event.

CFS Central Office will have the following management responsibilities:

- Contacting the Service Areas known to have been impacted by the event to determine immediate needs. This will be accomplished through use of Emergency Management Communications systems and the regularly scheduled conference call with the agency director or his/her designee. In addition, communication for changes in written procedures may be transmitted via e-mail and the State division computer systems at prearranged intervals as required;
- 2. Responding to requests by Service Areas for specific needs. This will include coordination of multi-agency resources;
- 3. Determining the need to provide staff as necessary to assist in Service Area operations;
- 4. Implementing a plan to assign staff to special duties as required, adjusting these assignments as necessary based on the event's impact on staff;
- 5. Serving as a clearinghouse for cities and counties volunteering to share with staff; and,
- 6. Providing a list of shelters, their capacity, and availability, to out-of-county residents.

CFS Central Office will have the following service responsibilities:

- 1. Conducting an initial assessment of locations and needs of children, families, and providers based on the location and scope of the disaster;
- 2. Activating computer mechanisms to identify and serve children separated from their parents;
- 3. Providing information, support, and services to families, providers, and youth disrupted or severely impacted by the disaster;
- 4. Planning with other service providers for the provision of additional programs or services for children and families affected by the disaster;
- 5. Maintaining a central database of displaced or unaccompanied youth not located;
- 6. Establishing emergency field offices, information sites, and relocation options regarding alternate safe locations sites, as required;
- 7. Activating staff re-assignments to critical designed job functions;
- 8. Activating additional toll-free numbers that may be released to the general public to secure CFS assistance and/or services; and,
- 9. Designating public access websites to share disaster information to enroll for benefits or where to go for emergency assistance.

The Service Area will have the following responsibilities:

- 1. Notifying the CFS Central Office of the known areas to have been impacted by the event;
- 2. Immediately activating the local Service Area disaster plan;

- 3. Determining any changes needed to staff assignments as a result of the disaster;
- 4. Notifying CFS Central Office of any special needs;
- 5. Providing updated information through the intranet website and participation in scheduled conference calls; and,
- 6. Coordinating with local county emergency management for all requests for assistance other than personnel needs.

C. RECOVERY EFFORTS AFTER THE EVENT

Recovery begins once normal operations have been resumed.

CFS Central Office will have the following responsibilities:

- 1. Developing a format used to debrief staff;
- 2. Debrief CFS Central Office and Service Area staff;
- 3. Analyzing debriefing data and modify procedures accordingly; and,
- 4. Recognizing staff as appropriate.

The Service Area will have the following responsibilities:

1. Debriefing staff and evaluating the results to determine any necessary changes in the Service Area disaster plan.

V. SERVICE AREA PLANNING

A. DISASTER PREPAREDNESS

- 1. Service Area Administrators, management team members, and designated staff identify information that may be helpful for management team members to have at the Emergency Operations Center to assist with the relocation of children and families.
- 2. Service Area Administrators and CFS Administrators and Supervisors determine the specific information Emergency Management Coordinators in their areas may desire to have in advance of a disaster, which may include lists of providers in their areas, estimates of the number of children at each facility; primary contact information for each facility; and, emergency contact information for foster families.
- 3. Providers will update and provide yearly to CFS a written Disaster plan detailing the procedures to be followed in caring for children in the event of a disaster or health emergency, such as fire, earthquake, pandemics, flood, active shooter situations, and/or technology accidents or energy failure. In addition, CFS requires foster families to develop a family disaster plan, update their plan regularly, post the plan in a prominent place, and review and practice the plan with all family members.

B. SERVICE AREA DISASTER PLANS

Each Service Area will have a disaster plan for responding to a disaster, health emergency, or other event that may disrupt the area's ability to conduct business. Each Service Area designates

who is in charge during a disaster or emergency. The CFS Disaster Plan will provide an administrative plan for responding to a disaster across all Service Areas.

1. Communication Plan

- Identify a Service Area Disaster Coordinator in each Service Area to assume responsibility for collecting information needed for their local Service Area Disaster Plan. The coordinator will update and disseminate emergency contact information and will be responsible for providing disaster or emergency information to staff as necessary by email or other determined communication routes. The contact information for staff should include a listing of previous positions held with DHHS to assist in temporary work reassignment, if necessary.
- For each Service Area, in the event of a Disaster, the plan should specify:
 - The specific staff who will determine whether it is safe to do its work and will activate their phone tree to contact staff;
 - o Mobilizing staff into special roles as needed, specific to the emergency; and,
 - Plan to ensure that each Service Area has access to current information for foster parents, group homes, and other congregate care settings, including corresponding emergency contact numbers (home, business, cell, and emergency backup numbers).
- 2. Each Service Area must develop a plan describing how all CFS Specialists will advise and encourage families receiving in-home services and families with children in out-of-home placements to develop and update family disaster plans. CFS staff will provide families with emergency preparedness information from federal and State disaster planning websites and applicable emergency contact numbers for families to call to check on the safety and status of their children following a disaster or evacuation.
- 3. Each Service Area will work with foster families to develop family disaster plans that may include, but are not limited to:
 - Information about where the foster family or provider supported children and youth would evacuate to; identify two alternate locations, if possible;
 - Personal telephone numbers and contact information (for example, cell phone numbers, fax numbers, e-mail address);
 - Emergency contact information for children and families, which may include out-of-area relatives or friends to whom they have close family relationships and may be aware of location or relocation information;
 - A list of critical items to take when evacuating with children/youth, including
 identification for the child (birth certificate, SSN, citizenship documentation), the child's
 medical information, including health insurance card, medication and/or medical
 equipment, educational records, and existing court orders that show who has legal
 authority over the child;
 - Normal contact, emergency contact, or toll-free telephone numbers for CFS staff, including foster parents and agency-based foster providers; and,
 - Planning disaster preparedness to include storing necessary medicines, food, and water.
- 4. Each Service Area must have a plan that includes, but not limited to:

- Ensure access to information that will identify and locate all children in the custody of the State of Nebraska in each Service Area, including those across Service Areas or State lines. Priority will be given to medically fragile children, physically impaired children, youth with cognitive and/or developmental deficits, unaccompanied and missing youth, youth participating in independent living arrangements or other vulnerable groups of children or youth, and
- Directions for staff and/or supervisors to contact all youth and families on assigned
 caseloads and immediately notify the CFS Emergency Response Team of the name of
 any individual that cannot be contacted or located. Staff will also follow all procedures
 for reporting injuries or known deaths. Service Area staff will work to identify families
 needing emergency services and to prevent the unknown dispersion of children and
 families.
- 5. Each Service Area must have access to phone numbers for emergency contacts, which includes, but is not limited to:
 - Access to current staff personnel lists and corresponding emergency contact numbers (home, business, cell, and emergency backup numbers) and ensure access to contact information to verify availability of all employees;
 - Access to current list of foster parents, group homes, and child-caring agencies and corresponding emergency contact numbers (home, business, cell, emergency backup numbers); and,
 - A Service Area management plan to activate and post toll-free telephone numbers or reserve numbers for CFS staff, families, youth, foster care, and other providers to contact during and after a disaster.
- 6. Each Service Area must have a designated disaster plan that includes:
 - Encouraging staff to develop personal and family disaster plans and keep them updated;
 - Supervisors will keep a book logging staff emergency contact information;
 - Requiring staff to check in after disasters and provide information on how to do so;
 - Keeping emergency supplies in the office (including satellite offices);
 - Training all staff on the CFS disaster plan and having them participate in drills;
 - Information provided to staff regarding active shooter situations and how to maintain personal safety when assisting with domestic violence cases;
 - Establishing personal and professional support services for staff; and,
 - Developing expectations of support for staff in the event of a disaster or emergency.
- 7. Disaster Plan includes processes to:
 - Conduct an initial assessment of the locations and needs of families, providers, and youth based on the location and scope of the disaster;
 - Activate computer mechanisms to identify and serve children separated from their parents;
 - Provide information, support, and services to families, providers, and youth affected or severely impacted by the disaster;

- Communication plan for working with agencies likely to be involved in operating an emergency shelter to help locate unaccompanied, missing, or displaced children and families after a disaster;
- Plan with other providers for the provision of additional programs and services for children, youth, and families affected by the disaster;
- Establish emergency field office information sites and relocate services to alternate locations as required;
- Activate staff re-assignments to critical designated job functions;
- Activate additional toll-free numbers that may be released to the general public to secure CFS assistance and/or services; and,
- Designate public access websites for disaster information sharing and enrollment for benefits and the locations available for emergency assistance.
- 8. Each Service Area must have procedures that detail the protection of equipment and records procedures requiring protection of data and equipment from environmental factors.

See Section V. Service Area Planning and Section D. Service Area Disaster Plans for each CFS Service Area's Disaster Plan and how they identify and respond to each CFS Disaster Plan requirement.

C. DISASTER RESPONSE

- 1. Each Service Area will activate the relocation function to assist service care facilities once it is learned that local authorities are requiring public schools in an area to be evacuated or that individual service providers may face health/safety concerns due to the emergency. Team Leaders will work with the CFS Management Team to determine which roles staff may play in offering guidance to providers or giving information to parents during relocation.
- 2. CFS Management Team members and Service Area Administrators would work with the DHHS Emergency Management Team, the DHHS Emergency Response Coordinator, and other staff as needed to collect information about the nature of the threat, the geographic area involved, service providers that may be at risk and the number of children and adults who should be relocated. If time allows, providers in the affected area could be polled to determine whether they have child seats/vehicles that could be used to transport children and adults to safety.
- 3. The CFS Management Team will immediately discuss needs with the DHHS Emergency Response Coordinator and request help from emergency management resources.
- 4. Service care providers in the threatened areas would be alerted about the relocation and advised about supplies and child records to gather. Service Area Administrators, Supervisors, and CFS staff will be in contact with management team members to determine the efforts of State and/or local emergency personnel to contact service care facilities. CFS will ensure that emergency personnel have the latest information on the location of child care facilities and will follow emergency evacuation and relocation procedures led by emergency personnel. CFS can assist providers in locating transportation if needed. If emergency personnel are not

- contacting facilities, CFS will find out from State and/or local emergency personnel where providers could relocate, if needed.
- 5. To the extent possible, CFS staff will work with providers throughout the evacuation and relocation efforts to coordinate information regarding the status of evacuated children and/or families. Information would be made available to parents as quickly as possible concerning where their children are and how and when parents can reunite with their children, if appropriate. CFS will keep other Management Team members or local emergency personnel informed of providers who have relocated with children. Strict procedures will be established to make sure that children are released only to adults who have been authorized by each child's parent or guardian and that the names and contact information of these authorized persons will be recorded and taken to the relocation/evacuation site.
- 6. Depending on the nature of the relocation, CFS staff can work with the Division of Behavioral Health and the Division of Developmental Disabilities to offer mental health and supportive services to children who might have been traumatized by the evacuation.

D. SERVICE AREA DISASTER PLANS

NORTHERN SERVICE AREA DISASTER PLAN		
Primary	Name:	Brenda Brooks
Contact for	Address:	902 Hackberry Rd, North Platte, NE 69101
Decision-	Primary Phone:	308-530-0691 work cell phone
Making and Authority	Secondary Phone:	
Secondary	Name:	Brandee Nice
Contact for	Address:	622 S Lincoln Avenue, York
Decision-	Primary Phone:	402-362-0287
Making and Authority	Secondary Phone:	402-363-9279 (cell)
Tertiary	Name:	John Ullrich
Contact for	Address:	209 N 5 th Street, Norfolk
Decision-	Primary Phone:	402-370-3159
Making and Authority	Secondary Phone:	402-750-7729 (cell)
Quaternary	Name:	Darla Hopwood
Contact for	Address:	3737 25 th Street, Columbus
Decision-	Primary Phone:	402-562-9624
Making and Authority	Secondary Phone:	402-363-8293 (cell)
Quaternary	Name:	Danita Owens
Contact for	Address:	209 N 5th Street, Norfolk
Decision-	Primary Phone:	402-370-3124
Making and Authority	Secondary Phone:	531-530-7122 (cell)

Current List of all Staff and	
Emergency Contact Information	
Date of Last Update of List:	March 1, 2024
Hard Copy located where:	A hard copy of the NSA Disaster Plan will be maintained in each of the main Service Area offices— Columbus, Fremont, Norfolk, Seward, South Sioux City, and York.
	Northern Service Area Document Library, specifically "Z" Drive. This information is only accessible to the Administration.
Electronic Copy located where:	The "S" Drive is accessible to each local office for Supervisors and Staff.
	Staff should maintain their emergency contact information in Workday.
Current List of Foster Care Homes and Emergency Contact Information:	
Date of Last Update of List:	March 1, 2024
Hard Copy located where:	A hard copy of the NSA Disaster Plan will be maintained in each of the main Service Area offices—Columbus, Fremont, Norfolk, Seward, South Sioux City, and York.
Electronic Copy located where:	Northern Service Area Document Library, specifically "Z" Drive. This information is only accessible to the Administration. The "S" Drive is accessible to each local office for
	Supervisors and Staff. Staff should maintain their emergency contact information in the Workday Employee Work Center.
1	Homes and Congregate Care, Shelter Settings:
Date of Last Update of List:	March 1, 2024
Hard Copy located where:	A hard copy of the NSA Disaster Plan will be maintained in each of the main Service Area offices— Columbus, Fremont, Norfolk, Seward, South Sioux City, and York
Electronic Copy located where:	The Contracted Services Search Tool is maintained by Resource Development and available on the Children & Family Services intranet page under the Contract & Contractor Information section. This provides contact information for the agencies.
	Communication Plan
Identify where your emergency office will be located	3737 25 th Street, Columbus, NE or 209 North 5 th Street, Norfolk, NE

	Or remotely as may be necessary	
	Current NSA CFS offices are:	
Alternative location	Blair – 597 Grant Street, Suite 100 Columbus – 3737 25 th Street Fremont – 1959 East Military Avenue Neligh – 501 Main Street (APS) Norfolk- 209 North 5 th Street Pierce – 111 West Court #15 Seward – 1313 285 th Road South Sioux City – 3201 Plaza Drive West Point – 200 South Lincoln York – 622 South Lincoln Avenue NSA will work towards identifying other community locations or other State office locations. If circumstances allow, communication will also be via	
	phone, text, email, WebEx, or similar tools.	
Describe the process for quarterly updating personnel lists and corresponding emergency contact numbers	Administrative support staff will update personnel personal phone numbers and confirm employee emergency contact numbers quarterly (January, April, July, and October). Administrators and Supervisors will have access to all personal phone number information.	

Medical and/or Physical Needs	for those youth placed OOH.	Notification of biological family		done daily at a minimum.)	(Checks will be	Child Location Verification					disaster event	notification of a	Upon				disaster affecting all or a portion of the Service Area	Recognition of a	
Needs for medical a of the individuals. I requests will be dor Provide a Provide o Provide o Provide o Emergen				as received	track information regarding youth	Compile and		to work	and ability	o verify their safety	Admins	• Contact	coverage.	coordinate	the Disaster Team to	• Call together	Notification of a dishared up or down		SAA (Communicate with Central Office)
Needs for medical and physical well-being of youth will be verified during c of the individuals. Every effort should be made to minimize the lapse in the requests will be done at the time of the event. Provide replacement information for Medicaid coverage if needed Provide prescription information if needed Emergency LOEs, LOAs, and Auths can be provided				regarding youth with SAA	supervisors	Share information					work	safety and	o Verify their	• Contact Sups			Notification of a disaster affecting all or a portion of the shared up or down the chain of command as appropriate.		Admin
g of youth will be ver made to minimize the /ent. on for Medicaid cover on if needed Auths can be provide	Biological parents 1	Staff will make every effort to for wards in a timely manner.	the worker has the info.	If contacted by	youth	Administrator from RD and/or worker regarding	Share info with the	1111481118	document	narration and	of contacts for timely	Maintain log	to work.	their safety and ability	o Verify	• Contact Staff	a portion of the Servic		Sups
ified during contact with provider and/or helapse in the availability of prescriptions orage if needed	Biological parents may also contact the case worker.	Staff will make every effort to contact the biological parents for wards in a timely manner.		Document accordingly.	arrange for appropriate services.	Make contact with State ward(s) daily		Maintain log of contacts for timely narration and document imaging		Information obtained should be sent to SAA. RD Admin, and worker/sup.	 What immediate needs exist for 	 Are any wards injured? 	• Ale any rester parents cimulen dispraced:	Information to be obtained and shared as appropriate:	and homes to assure continuation and receipt of services.	CFS and RD staff shall provide a coording	e Area shall be initiated by anyone with kr		CFS Worker
Needs for medical and physical well-being of youth will be verified during contact with provider and/or home. Priority will be given to the identified needs for the safety and well-being of the individuals. Every effort should be made to minimize the lapse in the availability of prescriptions or other needs. Communication of temporary emergency processes for service requests will be done at the time of the event. o Provide replacement information for Medicaid coverage if needed o Provide prescription information if needed o Emergency LOEs, LOAs, and Auths can be provided			Document accordingly.	supervisor	Ci . C . J . J . 1	Make contact with State wards as	Make contact with contracted providers.	tion and document imaging.		AA. RD Admin. and worker/sup.	for the state wards?	7	If so, where are they, and how can they be contacted?	appropriate:	eipt of services.	CFS and RD staff shall provide a coordinated effort to make contact with agencies	Notification of a disaster affecting all or a portion of the Service Area shall be initiated by anyone with knowledge of such. That knowledge shall be shared up or down the chain of command as appropriate.		RD Foster Care & Contract Mgmt.
eeds for the safety a				,	As described in the respective disaster plan.			DHHS	record with	disaster plan on	F 211 2 11 2 11 2 1 2 1 2 1 2 1 2 1 2 1	monitor.	contract	Contact their	homes.	Contact foster			Providers
nd well-being for service					ne respective			DHHS.	agency or	with the	disaster plan	Follow the	בוווט אמוו.	designated	supporting agency or	Contact			Foster Homes & Placement Facilities

Staff are encouraged to utilize resources such as dictation services, talk to text, voice recorder, and the like to document visits and contacts.

	Emarganay Dronavadnoss
Describe heavy DCEC Cresciplists	Emergency Preparedness
Describe how DCFS Specialists	CFS Specialists are required to maintain monthly contact with the
will advise and encourage	children and families DHHS serves. CFS Specialists and RD
families receiving in-home	contacts will discuss disaster plans with foster families
services and families with	quarterly. RD and Private Agencies support foster families through
children placed in out-of-home	regular in-person, written, and phone contact. Foster families will
placements to develop and	be asked to provide an emergency alternative address, contact,
update disaster plans.	name, and number.
Describe how families will have	 When a natural disaster occurs, a member of the household has been tested and known to have the recognized pandemic illness or the like, and a State ward is in the home, the following procedure will be followed. 1. If an emergency occurs during normal business hours, the family will call their assigned CFS Specialist. If the CFS specialist is not available, the CFS Supervisor will be called. The call shall be initiated as soon as practical. 2. During hours outside normal business hours, the family
access to DCFS Specialist phone numbers in an emergency to access information about their child.	should contact the Child Abuse and Neglect Hotline at 800-652-1999. The Hotline staff will then contact the on-call worker. 3. The family should also contact the child's physician.
	If the child is in out-of-home care and is diagnosed with a pandemic virus, the child's CFSS will relay information regarding the child's emergency situation to their Administrator, who will then forward this information to the Service Area Administrator and the DCFS Director. DHHS will use the Health Department and Center for Disease Control as resources. CFSS will notify the appropriate birth parents, relatives, and legal representatives.
Describe how the expectation for Traditional Foster Families to develop and maintain a disaster plan will be enforced.	A disaster plan will be developed with each foster family as soon as possible. A review of this plan shall take place during the license renewal. A copy will be in the family's DHHS/RD file. Emergency plans/contact information is also contained in the placement support plans.
Describe the process for requiring foster families to communicate with the	The following information will be provided to all foster families. Northern Service Area DHHS Foster Parent Disaster/Pandemic Plan
department in the event of an emergency:	During emergency situations in the Northern Service Area, it is preferred that foster families contact the assigned caseworker for any placement. If the caseworker is not available, the caseworker's supervisor, agency foster care specialist, or assigned RD worker

	can be notified. This contact should happen as soon as is reasonable.
	If the foster parent is unable to reach any of the individuals listed above, s/he should call the Hotline number at 800-652-1999.
	During a pandemic recognized by the CDC and the State of Nebraska, if a member of the household has tested and is known to have the recognized pandemic illness and if a State ward is in the home, the foster parent will contact their assigned caseworker or one of the other persons if the caseworker is not available. Other precautions, such as calling the family physician, the Health Department, etc., will also be a part of the foster parent's plan.
Describe how expectations of	
Traditional foster families to maintain communication with the department throughout a	Foster families will work with their respective agencies and foster care specialists regarding communication in the event of an emergency.
disaster will be enforced.	Child Location Verification
	Who do we have to contact?
Describe the method the Service Area will take to identify and locate all children in that designated Service Area.	 All placement providers and biological parents within the affected area will be contacted. Who makes the contacts? CFS Staff (this would include CFS supervisors, administrators, case management staff, case aides, foster care and contract management RD staff, and administrative assistants) will be designated at the time of emergency based on where the disaster occurred. In the event phone lines and cellular networks are inoperable, staff will make physical face-to-face contact with State wards, as well as AR and non-court involved youth when weather and road conditions allow. Who does the information funnel to (i.e., worker, supervisor, and administration)? The NSA staff gathering information on a child will inform the SAA, youth's worker, and supervisor of the findings. How often are the checks completed? Checks will be completed on a frequency to be determined by Service Area administration at the time of the incident to ensure the safety and protection of the children during the disaster or emergency.
Describe how priority will be given to medically fragile children, physically impaired children, youth with cognitive and/or developmental deficits, and youth participating in	The NSA staff contacting the family/child will inquire regarding any medical or physical needs of the child(ren) at the time of the call. Once identified, priority will be given to the safety and well-being of these individuals. Applicable updates will be made in NFOCUS as soon as is reasonably possible.

independent living	CFS Specialists and the agencies that support the foster homes will
arrangements.	know which homes have children and youth with special needs and
	will contact them daily to ensure their special needs are being met
	throughout the disaster timeframe.
Describe the process for	During the course of our contacts with providers to identify and
responding to youth needing	locate children, placement stability will be addressed.
new placement and care and	
placement of unaccompanied	If the need arises outside of normal business hours, the caretaker or
minors.	provider will call the DHHS Hotline at 800-652-1999, and the on-
	call worker will assist with emergency situations. It is also
	acceptable for caregivers and/or bio-parents to call the case
	manager and indicate that alternative placement is needed.
Describe the process for	NSA Staff (this would include CFS supervisors, administrators,
notification of each child's	case management staff, office technicians, foster care and contract
status to the biological family if	management RD staff, and administrative assistants) will make
the child is in an out-of-home	every effort to contact the biological parents of State wards
placement.	regarding their child in out-of-home care as soon as possible once
	the emergency is identified. It is also appropriate for the biological
	parent to call the caseworker for information regarding their child.
	Staff
	Disaster drills will be conducted on a yearly basis. The NSA
	Administrator or designee will be responsible for determining the
	dates the drill will be held. This information will be communicated
	via e-mail and during Administrative Leadership Team meetings to
	all unit Administrators. The dates for the drills will be
	communicated to all NSA Supervisors by the Unit Administrator
Describe how Disaster Drills	for each program area. On the dates of the drills, the Calling Tree
will occur in your Service Area.	process will be carried out as outlined in the Communication Plan.
will occur ill your Service Area.	After completion of the drills, every Unit Administrator will be
	· · · · · · · · · · · · · · · · · · ·
	responsible for following up within a week with his/her staff for
	the purpose of identifying deficiencies and recommending
	necessary changes to the current plan. The unit Administrators will
	be responsible for reviewing the feedback and reporting back at the
	next leadership team meeting.
	The NSA Disaster Plan is reviewed at a supervisor's meeting
	annually. Supervisors will review the disaster plan at a respective
	team meeting. Any revisions made to the plan since the last review
Describe the plan to train staff	will be shared. The team meeting should be chaired by an
on disaster planning and	Administrator to ensure the delivery of a consistent presentation
procedures for checking in after	between program areas. Supervisors will be responsible for
a disaster.	reviewing the plan with their team at least once a year during a
	team meeting. Any staff absent from the meeting will have the plan
	reviewed with them individually at a later time but as soon as
	possible upon return.

	Any staff member may at any time submit suggestions and ideas to
	their supervisor or any member of the Leadership Team for consideration. The supervisor's responsible for ensuring that every staff member on their team has reviewed the Disaster Plan. In the event a staff member is absent from the team meeting, the supervisor must individually review the Disaster Plan with him/her within 24 hours of his/her return to the office.
	All new staff will receive an orientation from their supervisor on the NSA Disaster Plan and the procedures for checking in with them should a disaster happen.
	The DHHS Weather policy will be used as a guideline regarding the contact and report-to-duty process for any disaster within the NSA.
	The State of Nebraska has a statutory responsibility to keep State offices open from 8:00 a.m. to 5:00 p.m. With the safety and welfare of our employees as a concern, employees will determine for themselves their ability to drive, the condition of their vehicles, the immediate road conditions, and the impact the disaster has placed on them personally.
Describe procedures on action that will be taken for staff that do not contact/report to duty after a disaster.	If an employee determines they cannot report to work, they must contact their immediate supervisor to report their absence. Supervisors will report employee absences to their administrator. If an employee's normal work site is not available, they should report to the alternative work site location previously outlined in the disaster plan. Employees not choosing to work during the disaster will have to use accrued vacation leave, compensatory time, leave without pay, or MAY be allowed to make up missed work time within the work week. When appropriate, staff may be able to work from home.
	To ensure all employees are safe and accounted for, employees must contact their supervisor to report if they are unable to report to work. If an employee fails to call in or report to work as scheduled, the supervisor will contact Human Resources to determine if additional action is needed, which may include contacting law enforcement to ensure the employee and their family are safe.
	Supplies
Describe how emergency supplies will be maintained in each office (including satellite office(s)).	Offices in the NSA will each have a First Aid Kit available, with all staff knowing its location. Kits are maintained and kept updated by support staff in each office at least quarterly. Those identified individuals are as follows:

The First Aid Kit will include, but not be limited to, adhesive bandages, antiseptic wipes, health care gloves (non-latex), non-sterile rolled bandages, first aid tape, scissors, an instant cold pack, hand sanitizer, face masks, bottled water, and blankets.

AED – The same persons will be responsible for ensuring the AED's battery/pads are current if the office has one assigned. The AED will be located where all staff know its location.

Also suggested is that each office has an emergency Rubbermaid container(s) with a clear top large enough to contain the following supplies:

- Current 12-month calendar
- Pens, pencils, highlighters, erasers
- Map of local County area
- Copy of NSA Disaster Plan
- Directions to access Citrix, as well as contact information for IS&T and Help Desk
- Sticky notes-various sizes
- Battery-operated calculator with extra batteries (Preferably one with a tape)
- Battery-operated flashlights with extra batteries
- Note pads various sizes.
- Scissors, staple puller, binder clips, white out, paper clips, flair marker, post-it-tabs, rubber bands, stapler
- Tape and tape dispenser
- A small binder with empty page protectors provides a place to put all the various procedure memos to make a quick manual for the various procedures that evolve during a disaster.
- Empty 2-sided pocket folders to organize extra copies of forms and information sheets to give to clients
- Crayons for children to draw pictures along with some blank paper
- Phone book
- NSA staff phone listing

Other items that do not fit in the box should also be readily available.

Describe procedures to maintain a current list of equipment that can be accessed in the event of disaster (e.g., laptops, cell phones, pagers) Administrators, CFS staff, and supervisors have an assigned work cell phone available to them.

Laptops – A list of assigned laptops is maintained by the administrative/staff assistant and is a separate document available on the Z: drive.

Northern Service Area	NSA SAA
Emergency Response Volunteer	CFS Administrators
Team	Administrative Assistants
	In the event of an emergency or disaster, the Northern Service Area
Community Emergency	Administrative team will initiate contact with the applicable
Management Coordinators	County Emergency Response Coordinator. Contact information is
Wanagement Cooldinators	available from the NEMA website. A hard copy is maintained
	quarterly in the office totes.

CE	NTRAL SER	RVICE AREA DISASTER PLAN
	Name:	Brenda Brooks
Primary Contact for	Address:	902 Hackberry Rd, North Platte, NE 69101
Decision-Making and Authority	Primary Phone:	308-530-0691 work cell phone
Authority	Secondary Phone:	
	Name:	Casey Smith
Sanan James Contract for	Address:	208 N. Pine Street, Grand Island
Secondary Contact for Decision-Making and Authority	Primary Phone:	Work Cell: 308-379-7530
Authority	Secondary Phone:	
	Name:	KaCee Zimmerman
Tertiary Contact for	Address:	208 N. Pine Street, Grand Island
Decision-Making and Authority	Primary Phone:	Work Cell: 402-705-1859
Authority	Secondary Phone:	
Quaternary Contact for Decision-Making and Authority	Name:	Stephanie Jensen
	Address:	208 N. Pine Street, Grand Island
	Primary Phone:	308-385-6126
Secondary Phone:		
Quinary Contact for Decisio and Authority	n-Making	
Date of Last Update of List:		2-28-24
Hard Copy located where:		In the CSA Disaster Plan Binder on the Bookshelf in Casey Smith's Office
Electronic Copy located whe	ere:	Intranet Share Point – Children and Family Services - Central Service Area – CSA Administration – CSA Disaster Plan

Current List of Foster Care Homes and					
Emergency Contact Information:	March 2024				
Date of Last Update of List:					
Hard Copy located where:	In the CSA Disaster Plan Binder on the Bookshelf in				
	Casey Smith's Office				
Floatrania Cany located where	Intranet Share Point – Children and Family Services – Central Service Area – CSA Administration – CSA				
Electronic Copy located where:	Disaster Plan				
Current List of Group Homes and	Disaster Flam				
Congregate Care, Shelter Settings:					
Date of Last Update of List:	March 2024				
•	In the CSA Disaster Plan Binder on the Bookshelf in				
Hard Copy located where:	Casey Smith's Office				
	Intranet Share Point – Children and Family Services –				
Electronic Copy located where:	Central Service Area – CSA Administration – CSA				
	Disaster Plan				
Co	ommunication Plan				
	Ainsworth Office – 644 E. 4 th Street				
	Broken Bow – 2475 E Street				
	Grand Island – 208 N. Pine Street				
Identify whom your among an over office	Hastings – 4200 W. 2 nd St				
Identify where your emergency office will be located	Holdrege – 701 – 5 th Avenue				
will be located	Kearney – 24 W. 16 th Street				
	O'Neill – 128 – 6 th Street				
	Ord – 801 S Street, Suite 2				
	Valentine – 202 N. Main St.				
	Ainsworth – No location determined.				
	Broken Bow – NE Dept of Roads, 515 East South,				
	Contact Person is Dan Lewandowski 308-872-6735				
	Grand Island – No location determined.				
	Hastings – Hastings Regional Center, 4200 West Second				
Alternative location	Street Hallman Danta & Danta				
	Holdrege – Dept of Roads, 701 – 4 th Avenue, Suite 4				
	Kearney – YRTC, 2802 – 30 th Avenue O'Neill – No location determined.				
	Ord – No location determined.				
	Valentine – No location determined.				
	The following CSA staff will provide quarterly updates in				
	each of the CSA Offices. Updated information will be				
	submitted to Stephanie Jensen to be added to the CSA				
Describe the process for quarterly	Disaster Plan Binder in Casey's Office and the CSA				
updating personnel lists and	SharePoint location on the intranet.				
corresponding emergency contact	Ainsworth: Nancy Turpin				
numbers	Broken Bow:				
	Grand Island N. Pine – Stephanie Jensen				
	Grand Island S. Pine – Darrin Wyatt				

	W W
	Hastings – Kristi McDowell
	Holdrege – Kristi McDowell
	Kearney: Kristi McDowell
	O'Neill: Nancy Turpin
	Ord:
	Valentine: Nancy Turpin
Describe the process for contacting and	Calling Tree: Administrators will contact their
verification of staff safety and	supervisors, and the supervisors will contact the staff they
availability to work in the event of a	supervise to verify staff safety and check the staff's ability
•	to work in the event of a disaster.
	The CSA Resource Development Units are in constant
	contact with contractors and providers and will obtain this
	information as changes occur. The information will be
<u> </u>	submitted to the CSA Administrative Assistant to store in
	the Disaster Plan Binder in Casey's office and updated on
	the intranet SharePoint location.
	Contractors, group homes, shelters, and any other service
	providers will contact the CSA Resource Development
	Units with changes as they occur. Agency Supported
	Foster Parents will contact their supporting agency, which
	in turn will contact the CSA Resource Development
	Units. Contractors have also submitted their
T Describe the brocess for redilestino	Disaster/Recovery Plans through administrative reviews
service providers to contact the	and are available through the Resource Development
Department in the event of an emergency	Units.
and the method for contact:	
	Updated contracted agency information may be found on
	the DHHS Intranet Web Site at the following internet
	link:
	http://dhhsemployees/sites/CFS/Contract%20%20Contrac
	tor%20Assignments/Forms/By%20Category.aspx?InitialT
	abId=Ribbon%2EDocument&VisibilityContext=WSSTab
	Persistence
	The Resource Development Supervisor, Brieana Teeters,
Describe method for communicating	relays information regarding families' needs during an
Describe method for communicating	emergency situation daily to the Resource Development
with agencies caring for youth in out-of- home care in the event of a disaster	Administrator, Katie Harvey, who then forwards this
nome care in the event of a disaster	information to the appropriate agencies via email or
	telephone.
Emer	gency Preparedness
Describe how CFS Specialists will advise	
	CFS Specialists are required to maintain monthly contact
and encourage families receiving in-	CFS Specialists are required to maintain monthly contact with the children and families served and will encourage
_	± • • • • • • • • • • • • • • • • • • •
home services and families with children	with the children and families served and will encourage

Describe how families will have access to CFS Specialist phone numbers in an emergency to access information about their child.	 The following procedure should be followed during an emergency disaster situation: If an emergency occurs during normal work hours, the family should call their assigned CFS Specialist. If they are unable to reach them, the CFS Supervisor should be contacted. During times outside normal business hours, the family should contact the Child Abuse and Neglect Reporting Hotline number at 800-652-1999 as soon as possible. The hotline staff will then notify the worker on-call in the appropriate area.
Describe how the expectation for Traditional Foster Families to develop and maintain a disaster plan will be enforced.	The licensing Resource Development Specialist will review these guidelines with each foster family at the time of license renewal.
Describe the process for requiring foster families to communicate with the Department in the event of an emergency.	The following information has been provided to existing foster families and will be provided to all new ones. Central Service Area DHHS Foster Parent Disaster/Pandemic Plan Who to contact within the CSA during an emergency situation during normal work hours as well as after hours. Brieana Teeters, Resource Development Supervisor Office Cell: 308-379-2636 Brenda Brooks, Service Area Administrator 308-530-0691 work cell phone If a foster parent is unable to reach any of the above, he/she should call the Hotline number at 800-652-1999. During a disaster, foster parents will need to contact the names and numbers listed above as soon as possible to inform the Department of their situation. Agency Support Foster Homes will contact the agency that supports them, and the agency will contact the Department at the above numbers. This information has also been added to the New Foster Parent Packet. During a pandemic recognized by the CDC and the State of Nebraska, if a member of the household has tested and

Describe how expectations of Traditional foster families to maintain communication with the Department throughout a disaster will be enforced.	is known to have the recognized pandemic illness and if a State ward is in the home, the foster parent will contact the names listed above in addition to their caseworker. Other precautions, such as calling the family physician, the Health Department, etc., will also be part of the foster parent's plan. Foster families will be required to contact the Department at the numbers listed in the previous Statement. If they have a current child placed in their home, they may also contact their assigned case manager or that case manager's supervisor.
Child	Location Verification
Describe the method the Service Area will take to identify and locate all children in that designated Service Area.	The monthly Supervision List will be printed from N-Reports. It shows all youth in custody placement, schools, and bio-parent information. Changes that occur during the month are sent to the RD Supervisor, who will forward them to the CSA Administrative Assistant to post on SharePoint and keep a printed copy in the Disaster Plan Book.
Describe how priority will be given to medically fragile children, physically impaired children, youth with cognitive and/or developmental deficits, and youth participating in independent living arrangements.	CFS Specialists and the agencies that support the foster homes will know which homes have children and youth with these needs and will contact them daily to ensure their special needs are being met throughout the disaster timeframe.
Describe the process for responding to youth needing new placement and care and placement of unaccompanied minors.	Youth needing new placement will have their caretaker call the case manager to indicate the placement/care needs. The case manager will respond accordingly. If the need arises outside of normal business hours, the caretaker will call the Child Abuse Hotline Number—800-652-1999—and the on-call worker will be contacted to handle the situation.
Describe the process for notification of each child's status to the biological family if the child is in an out-of-home placement.	The CFS Specialists, CFS Supervisors, and CFS Administrators will contact the bio-parents to inform them of the child's status in the event of an emergency.
	Staff
Describe how Disaster Drills will occur in your Service Area	Disaster Drills will be conducted on a yearly basis in all the CSA Offices during the Statewide Severe Weather Drill scheduled annually in April. This information will be communicated via e-mail and during Administrative Leadership Team meetings to all Administrators and their assistants. The dates for the drills will be communicated to all CSA Supervisors by the Unit Administrators for each program area. The Calling Tree process will be followed as outlined in the Communication Plan above on

Describe the plan to train staff on disaster planning and procedures for checking in after a disaster	the dates the drills are to be held. After the drills are held, every Unit Administrator will be responsible for following up within a week with their staff to identify deficiencies and recommend improvement opportunities based on lessons learned. The findings will be reported to Steph Jensen, Administrative Technician, to compile for the Service Area Administrator's review. The Disaster Plan will be reviewed yearly at the CSA CFS All Staff Meetings. Supervisors are responsible for training any new staff they hire prior to the annual review.
	The DHHS Weather Policy will be used as a guideline regarding the contact and report to duty process for any disaster within the CSA. The State of Nebraska has a statutory responsibility to
	have State offices open from 8:00 a.m. to 5:00 p.m. With the safety and welfare of our employees as a concern, employees will determine for themselves their ability to drive, their vehicle condition, the immediate road conditions, and the impact the disaster has placed on them personally.
Describe procedures on action that will be taken for staff that do not contact/report to duty after a disaster.	If an employee determines they cannot report to work, they must contact their immediate supervisor to report their absence. Supervisors will report employee absences to their administrator. If an employee's normal work site is not available, they should report to the alternative work location, as described in the disaster plan. Employees not choosing to work during a disaster will have to use accrued vacation leave, earned compensatory time, leave without pay, or may be allowed to make up missed work time within the work week.
	To ensure all employees are safe and accounted for, employees must contact their supervisor to report if they are unable to come to work. If an employee fails to call in or report to work as scheduled, the supervisor will contact Human Resources to determine if additional action is needed, which could include contacting law enforcement to ensure the employee and their family are safe.
	Supplies
Describe how emergency supplies will be maintained in each office (including satellite office(s)).	Offices in the Central Service Area will each have a First Aid Kit available in their offices, with all staff knowing its location. Kits will be maintained and kept updated by the Office Managers and staff listed below:

Grand Island North Pine: Stephanie Jensen Grand Island South Pine: Darrin Wyatt

Hastings: Tara McBride

Holdrege: Angie Morten/Jill Dahlgren

Kearney: Kristi McDowell

Broken Bow: Cathleen Leverington

Ord:

O'Neill: Nancy Schmitz Ainsworth: Nancy Schmitz Valentine: Nancy Schmitz

The kit will include, but not be limited to, Adhesive Band-Aids, Antiseptic Wipes, Tylenol Extra Strength Caplets, Antibiotic/Pain-Relieving Ointment/First Aid Cream, Health Care Gloves (non-latex), non-sterile rolled bandage, First Aid Tape, Scissors, Instant Cold Pack, Hand Sanitizer, face masks, bottled water, and blankets.

Also suggested that each office have an emergency Rubbermaid "office box" with a clear lift top for room for the following supplies:

- Current 12-month calendar
- Pens, pencils, highlighters, erasers
- Map of local county areas
- Sticky notes various sizes
- Battery-operated calculator with extra batteries (preferably one with tape)
- Battery-operated flashlights with extra batteries
- Note pads various sizes
- Scissors, staple puller, binder clips, white-out tape, paper clips, flair marker, post-it tabs, rubber bands, stapler
- Tape and tape dispenser
- A small binder with empty page protectors provides a place to put all the various "procedure" memos to create a quick manual for the various procedures that evolve during a disaster.
- A couple of empty 2-sided pocket folders to organize extra copies of forms and information sheets to give to clients
- Crayons for children to draw pictures along with some blank paper.
- Copy of CSA Disaster Plan
- Phone book
- CSA Staff phone numbers

	Other items that don't fit in the box, however, should be easily available are as follows: • 2 sided folders for client files • Cell phone charger • Bottled water
Describe procedures to maintain a current list of equipment that can be accessed in the event of disaster (e.g., laptops, cell phones, pagers)	All Administrators, Supervisors, CFS Specialists, and RD Foster Care Workers have work cell phones that can be made available for use in the event of a disaster. CFS Administrators, Supervisors, Administrative Assistants, some CFS Specialists, and checkout laptops in each office will be made available in the event of a disaster. With administrator approval, staff with Citrix/NFOCUS access are available to work from a home computer. Stephanie Jensen keeps a master list of laptops on a flash drive with her at all times.

WESTERN SERVICE AREA DISASTER PLAN		
Deine Grant of Con	Name:	Brenda Brooks
Primary Contact for	Address:	200 South Silber, North Platte, NE 69101
Decision-Making and Authority	Primary Phone:	308-530-0691 work cell phone
and Authority	Secondary Phone:	
Sacandamy Contact	Name:	Courtney Armstrong
Secondary Contact for Decision-Making	Address:	503 Broadway, Scottsbluff, NE 69361
and Authority	Primary Phone:	308-641-2207 work cell phone
and Authority	Secondary Phone:	
Tartiamy Contact for	Name:	Collete Guynan
Tertiary Contact for Decision-Making	Address:	200 South Silber, North Platte, NE 69101
and Authority	Primary Phone:	308-530-4825 work cell phone
and Authority	Secondary Phone:	
		The current List of Staff and Emergency Contact
Current List of all Star	ff and Emergency	Information is available on the LINK Employee
Contact Information	8 1	Workstation. Staff will be asked to update their
		information, which will be updated annually or as
		needed.
		Staff Emergency contact information is provided by each
Date of Last Update o	f List:	staff member and maintained on the Employee LINK
1		Workstation. This list can be readily accessed from the
		LINK Employee Workstation.
Hard Copy located where:		Each DHHS Office in the Western Service Area will
		maintain a list of current employees and their emergency
		contact information. Supervisors will be responsible for
		updating the list. By office, the responsibility for
		maintaining that list is as follows:
		Lexington- Dominic Heimann

	Chadron- Nicole Gill Alliance- Nicole Gill
	McCook- Nicole Peterson
	Ogallala- Sonya Oliverius
	Sidney- Sonya Oliverius
	North Platte- Brenda Brooks
	Scottsbluff- Courtney Armstrong
	Western Service Area Document Library, specifically "Z"
Floatronia Convilacated where	Drive. This information is only accessible to the
Electronic Copy located where:	Administration. The "S" Drive is accessible to each local
	office for Supervisors and Staff.
	A current list of Western Service Area Foster Homes will
Current List of Foster Care Homes and	be created and located on the S drive for each local office.
Emergency Contact Information:	Resource Development Supervisors will facilitate this
	process.
Date of Last Update of List:	February 2024
H1 C111	Each local RD staff will provide a hard copy to each
Hard Copy located where:	office in the WSA.
	A copy will be attached to the Disaster Plan and located
Electronic Copy located where:	on each office's S Drive (Shared Drive—everyone will
	have access to this) under "Disaster Plan."
	Resource Development supervisors will facilitate the
	creation of a spreadsheet with all the information
	regarding these placement resources. It will be updated
Cymant List of Chayn Homes and	quarterly on the S Drive in each local office and attached
Current List of Group Homes and	to the Disaster Plan on the S Drive. This list will include
Congregate Care, Shelter Settings:	group homes, shelters, and other facilities. The Western
	Service Area will also request that these service providers
	update their Disaster Plans and emergency contact
	information quarterly.
Date of Last Update of List:	February 2024
	A hard copy file will be maintained at each local office as
Hard Copy located where:	with the Resource Development Supervisor. (Katie
	Harvey, Administrator)
	An electronic copy will be located on the S Drive for each
Electronic Copy located where:	local office and attached to the Disaster Plan in each
	office.
Communication Plan	
	- North Platte – 200 South Silber, North Platte, NE
Identify where your emergency office will be located	69151
	- Scottsbluff – 503 Broadway, Scottsbluff, NE 69361
	- Lexington – 200 West 7 th Suite 1, Lexington, NE
	68850
	- Ogallala – 201 East 5 th , Ogallala, NE 69153
	- McCook – 301 North Highway 83, McCook, NE
	69110
	<u> </u>

	A11' A11 D1 1 TT'11 A11' NTE (0201
	- Alliance – 411 Black Hills, Alliance, NE 69301 Chadrage 1022 Fast 21d Street Chadrage NE 60227
	- Chadron – 1033 East 3 rd Street, Chadron, NE 69337
	- Sidney – 1000 10 th Ave (Court House), Sidney, NE 69162
	- North Platte-Lexington DHHS, Dominic Heimann
	308-641-6884 Souttaklyff Cystomer Call Contan Soutta Plyff, Coni
	- Scottsbluff-Customer Call Center-Scotts Bluff: Geri
	Young: 308-633-5868 Levington Contemp Coll Contem Levington, Michalle
	- <u>Lexington-Customer Call Center-Lexington: Michelle</u> Eby: 308-325-4300
Alternative location	- Ogallala-Sidney: Sonya Oliverius: 308-275-8733
Atternative location	- McCook-McCook: Nicole Peterson: 308-340-4925
	- Alliance-Scottsbluff: Courtney Armstrong: 308-641-
	2207
	- Chadron-Scottsbluff: Courtney Armstrong: 308-641-
	2207
	- Sidney-Sidney: Sonya Oliverius: 308-275-8733
	The following Supervisors will be charged with making
	sure that each office has updated personal information.
	The supervisor will ensure that quarterly (January, April,
	July, and October), the information will be checked for
	accuracy, and any updates will be done by staff.
	Supervisors will then send the information to Collete
	Guynan to compile an updated master list to be placed on
	each office's S Drive and within the Disaster plan.
Describe process for quarterly undeting	
Describe process for quarterly updating personnel lists and corresponding emergency contact numbers	Supervisors responsible for this are induced as follows:
	- North Platte-Brenda Brooks: 308-530-0691/308-535-
emergency contact numbers	<u>8042</u>
	- Scottsbluff-Courtney Armstrong: 308-641-2207
	- Lexington-Dominic Heimann: 308-641-6884/308-
	<u>324-7651</u>
	- Ogallala & Sidney-Sonya Oliverius: 308-275-
	8733/308-254-6900 N. G. J. Ni. J. P. 4
	- McCook-Nicole Peterson: 308-340-4925/345-8425
	- Alliance & Chadron-Nicole Gill: 308-672-7463/308-
	436-6575 The Western Service Area will will a conflict tree in
Describe the manage for contesting and	The Western Service Area will utilize a calling tree in
Describe the process for contacting and	which Western Service Area Administrator Brenda Breaks will contact her Administrations, Country and
verification of staff safety and availability to work in the event of a	Brooks will contact her Administrations. Courtney and
disaster	Becky will then contact their Supervisors, who will then contact their CFSS Staff. Upon contact, each supervisor
	will assess their staff's safety and ability to return to work.
	Resource Development Supervisors (Katie Harvey,
Describe the process for updating contact	Administrator) will facilitate the request for updated
information for group homes and other	contact information from the group home and congregate
<u> </u>	contact information from the group nome and congregate

0 1111	11 7011 1 0 11 11 1 1 1
congregate care facilities in the Service	care providers. This information will then continue to be
Area	updated during license/contract renewal.
Describe the process for requesting service providers to contact the department in the event of an emergency and the method for contact:	Resource Development Supervisors will initiate communication with service providers regarding the expectations of contacting the department during an emergency. Expectations for contact are as soon as possible following the emergency by telephone. Emailing may also be acceptable depending on the status of the emergency, but local law enforcement may also need to be utilized.
Describe method for communicating with agencies caring for youth in out-of-home care in the event of a disaster	Resource Development Supervisors will forward information regarding the children's emergency situation to the Resource Development Administrator on a daily basis. The RD Administrator will then forward this information to the WSA Administrators and appropriate agencies via email or telephone contact. (Becky Jones, lead)
Eme	rgency Preparedness
Describe how CFS Specialists will advise and encourage families receiving in- home services and families with children placed in out-of-home placements to develop and update disaster plans.	CFS Specialists are required to maintain monthly contact with the children and families DHHS serves. During the months of May, June, and July, CFS specialists and RD contacts will discuss disaster plans with foster families. RD and Private Agencies support foster families through regular in-person, written, and phone contact. Foster families will be asked to provide an emergency alternative address, contact, name, and number.
Describe how families will have access to CFS Specialist phone numbers in an emergency to access information about their child.	 When a member of the household has been tested and known to have the recognized pandemic illness and a State ward is in the home, the following procedure will be followed. 1. If an emergency occurs during normal business hours the family will call their assigned CFS Specialist. If the CFS specialist is not available, the CFS Supervisor will be called. Call shall be initiated as soon as practical. 2. During hours outside of the normal business hours the family should contact the Child Abuse and Neglect Hotline number at 800-652-1999. The Hotline staff will then contact the on-call worker. 3. The family should also contact the child's physician. If the child is in out-of-home care and is diagnosed with the H1N1 virus, the child's CFSS will relay information regarding the child's emergency situation to the RD

	 ,
Describe how the serve static C	Administrator, who will then forward this information to the birth parents/relatives, DCFS Administrator, Service Area Administrator, and DCFS Director. DHHS will use the Health Department and Center for Disease Control as resources. Developing a disaster plan will be done with each foster
Describe how the expectation for Traditional Foster Families to develop and maintain a disaster plan will be enforced.	family as soon as possible. A review of this plan shall take place during the time of license renewal. A copy will be placed in the family's DHHS/RD file.
	The following information will be provided to all foster families.
	Western Service Area DHHS Foster Parent Disaster/Pandemic Plan
	The following individuals will be the Western Service Area's contact resources during emergencies.
	Katie Harvey, Grand Island, RD Administrator, 402-237-9444.
	Courtney Armstrong, Scottsbluff, CFS Administrator, 308-641-2207
Describe the process for requiring foster families to communicate with the	Brenda Brooks , Western Service Area Administrator, 308-535-8042.
department in the event of an emergency:	Kathleen Stolz , Grand Island, Deputy Director for Protection and Safety, 308-390-9436.
	If the foster parent is unable to reach any of the individuals listed above, he/she should call the Hotline number at 800-652-1999. During a disaster, foster parents will need to contact the names listed above as soon as possible.
	During a pandemic recognized by the CDC and the State of Nebraska, if a member of the household has tested and is known to have the recognized pandemic illness and if a State ward is in the home, the foster parent will contact the names listed above in addition to their caseworker. Other precautions, such as calling the family physician, the Health Department, etc., will also be part of the foster parent's plan.

Describe how expectations of Traditional foster families to maintain communication with the department throughout a disaster will be enforced.	RD will review this with each foster family at each license renewal.	
Child	Location Verification	
Describe the method the Service Area will take to identify and locate all children in that designated Service Area.	Office Technicians will maintain a spreadsheet by office that lists all State wards. The "Wards in CFS Program Cases" report will be utilized, as this report lists the child's placement information, contact information for the placement, and contact information for biological parents whose rights are intact.	
Describe how priority will be given to medically fragile children, physically impaired children, youth with cognitive and/or developmental deficits, and youth participating in independent living arrangements.	Child medical and characteristics will be maintained in NFOCUS. Information for our high-needs youth will be printed off and kept in an on-call bag in each local office. Information sheets will be created outlining these identified youth and specifying the child's condition. The information will be provided to support staff to maintain. The list will be stored on each local WSA S drive and attached to the disaster plan. This information is in NFOCUS under medical conditions for each State ward.	
Describe the process for responding to youth needing new placement and care and placement of unaccompanied minors.	The caretaker for the youth in need of a new placement due to an emergency will call the assigned CFS Specialist to assess available placement resources. If the CFS specialist is unavailable, the CFS Supervisor, on-call, and Hotline numbers will be utilized.	
Describe the process for notification of each child's status to the biological family if the child is in an out-of-home placement.	The biological parent will contact the caseworker for information regarding the case manager to indicate the placement/care needs. In the event the relationship between the biological parents, whose rights are intact and the foster parents allow, the biological parent can contact the foster family directly for information regarding their child.	
Staff		
Describe how Disaster Drills will occur in your Service Area	Disaster drills will be conducted on a yearly basis. The WSA Administrator will be responsible for determining the dates the drill will be held. This information will be communicated via e-mail and during Administrative Leadership Team meetings to all unit Administrators. The dates for the drills will be communicated to all WSA Supervisors by the Unit Administrator for each program area. On the dates of the drills, the Calling Tree process will be carried out as outlined in the Communication Plan. After the drills are held, every Unit Administrator will be responsible for following up within a week with his/her staff for the purpose of identifying deficiencies and	

recommending necessary changes to the current plan. The

	1, 4, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
	unit Administrators will be responsible for reviewing the feedback and reporting back in the next leadership team meeting.
Describe the plan to train staff on disaster planning and procedures for checking in after a disaster	All supervisors will have the WSA Disaster Plan reviewed with them at a supervisor's meeting. The Disaster Plan will be reviewed with supervisors annually; however, these reviews may be held at a team meeting after the initial presentation during the supervisor meeting. Particular attention will be paid to any revisions made to the plan since the last review. The team meeting should be chaired by an Administrator to ensure the delivery of a consistent presentation between program areas. Supervisors will be responsible for reviewing the plan with their team once a year during a team meeting. Any staff absent from the meeting will have the plan reviewed with them individually at a later time but as soon as possible upon return.
	The DHHS Weather policy will be used as a guideline regarding the contact and report to duty process for any disaster within WSA. The State of Nebraska has a statutory responsibility to keep State offices open from 8:00 a.m. to 5:00 p.m. With the safety and welfare of our employees as a concern, employees will determine for themselves their ability to drive, the condition of their vehicles, the immediate road conditions, and the impact the disaster has placed on them personally.
Describe procedures on action that will be taken for staff that do not contact/report to duty after a disaster.	If an employee determines they cannot report to work, they must contact their immediate supervisor to report their absence. Supervisors will report employee absences to their administrator. If an employee's normal work site is not available, they should report to the alternative work site location previously outlined in the disaster plan. Employees not choosing to work during the disaster will have to use accrued vacation leave, compensatory time, leave without pay, or MAY be allowed to make up missed work time within the work week.
	To ensure all employees are safe and accounted for, employees must contact their supervisor to report if they are unable to report to work. If an employee fails to call in or report to work as scheduled, the supervisor will contact Human Resources to determine if additional action is

needed, which may include contacting law enforcement to ensure the employee and their family are safe.

Supplies

Offices in the WSA will each have a First Aid Kit available in the office, with all staff knowing its location. Kits will be maintained and kept updated by the office managers or identified staff members. Those individuals are as follows:

Chadron: Nicole Gill Alliance: Nicole Gill

Scottsbluff: Chelsea Johnston Sidney: Sonya Oliverius Ogallala: Sonya Oliverius North Platte: Collete Guynan McCook: Nicole Peterson Lexington: Dominic Heimann

The First Aid Kit will include, but not be limited to, Adhesive bandages, antiseptic wipes, Tylenol extrastrength caplets, antibiotic/pain-relieving ointment/first aid cream, health care gloves (non-latex), non-sterile rolled bandages, first aid tape, scissors, an instant cold pack, hand sanitizer, face masks, bottled water, and blankets.

Describe how emergency supplies will be maintained in each office (including satellite office(s)).

Also suggested is that each office has an emergency Rubbermaid container(s) with a clear top large enough to contain the following supplies:

- Current 12-month calendar
- Pens, pencils, highlighters, erasers
- Map of local County area
- Sticky notes-various sizes
- Battery-operated calculator with extra batteries (preferably one with a tape)
- Battery-operated flashlights with extra batteries
- Note pads various sizes.
- Telephone message pads
- Scissors, staple puller, binder clips, white out, paper clips, flair marker, post-it-tabs, rubber bands, stapler
- Tape and tape dispenser
- A small binder with empty page protectors provides a place to put all the various procedure memos to make a quick manual for the various procedures that evolve during a disaster.

Describe procedures to maintain a	 A couple of empty 2-sided pocket folders to organize extra copies of forms and information sheets to give to clients Crayons for children to draw pictures along with some blank paper Copy of WSA disaster plan Phone book WSA staff phone listing Other items that do not fit in the box should also be readily available. 2-sided folders for clients' file Office cell phone and charger Bottled water Administrators, CFS staff, and supervisors have available to them an assigned work cell phone.
current list of equipment that can be accessed in the event of disaster (e.g., laptops, cell phones, pagers)	Dictation System - The dictation line will open and be available for employees to call in for dictation services. Laptops- are assigned to staff.
Western Convice And Emergency	* *
Western Service Area Emergency Response Volunteer Team	Collete Guynan, Courtney Armstrong, Becky Jones, and Brenda Brooks are assigned responsibility.
Community Emergency Management Coordinators	In the event of an emergency or disaster, the Western Service Area Administrative team will initiate contact with the applicable County Emergency Response Coordinator. Those applicable contacts are being compiled and will be attached to the Disaster Plan.

SOUTHEAST SERVICE AREA DISASTER PLAN		
Primary Contact		Lana Verbrigghe
for Decision-	Address:	1313 Farnam St. Omaha, NE 68102
Making and	Primary Phone:	(402) 214-0715
Authority	Secondary Phone:	
Secondary Contact	Name:	Jennifer Runge
for Decision-	Address:	5220 South 16 th Street, Lincoln
Making and	Primary Phone:	402.416.2855
Authority	Secondary Phone:	
Tertiary Contact	Name:	Colby Holz
for Decision-	Address:	5220 South 16 th Street, Lincoln
Making and	Primary Phone:	402.730.4120
Authority	Secondary Phone:	
Current List of All S	taff and Emergency	The SESA Disaster Coordinator (Jennifer Runge) has an
Contact Information	:	electronic and a hard copy of the current staff with contact

	information. If Remonte Green is unable to be reached
	during a disaster, Jennifer Runge and Colby Holz are
Data of Lost Undata of Lists	identified as alternative options. 01-09-2024
Date of Last Update of List:	
	Jennifer Runge's offices in Lincoln, NE South office
H 10 I 1W	(5220 South 16 th Street)
Hard Copy Located Where:	Colby Holz's office (5220 South 16 th Street)
	Remonte Green's office (5220 South 16 th Street)
Floatrania Cany Lagated Wherei	480 SHARE Drive-Folder-Disaster Plan SESA
Electronic Copy Located Where:	_
Comment List of Faster Com House and	SESA Foster Care Resource Development staff have an
Current List of Foster Care Homes and	updated list (monthly) of all current foster homes with
Emergency Contact Information:	emergency information. This information is also kept on
D. CI. (II.1)	the shared drive under the Disaster Plan SESA Folder.
Date of Last Update of List:	01-09-2024
H 10 I 137	All SESA local offices are in Lincoln South, Beatrice, and
Hard Copy Located Where:	Nebraska City. The SESA Disaster Coordinator also has a
	hard copy.
Electronic Copy Located Where:	480 SHARE Drive-Folder-Disaster Plan SESA
	SESA Resource Development staff will maintain a list
Current List of Group Homes,	(monthly) of all Group Homes/Shelters and have current
Congregate Care, and Shelter Settings:	contacts for all facilities during business hours and after
	hours.
Date of Last Update of List:	01-09-2023
	All SESA local offices: Lincoln South, Beatrice (Sara
Hard Copy Located Where:	Jelinek's office), Geneva, and Nebraska City (Tom
That Copy Docated Where.	Ross's). The SESA Disaster Coordinator also has a hard
	copy.
	NFOCUS can provide an electronic copy, and a current
Electronic Copy Located Where:	list is on the Share Drive in the Folder-Disaster Plan
	SESA.
Co	ommunication Plan
	The SESA has several office locations. The location of the
	emergency office would depend on where an emergency
	has occurred. All CFS Specialists, Supervisors, and
	Administrators who have been employed longer than 6
Identify Where Your Emergency Office Will Be Located:	months have access to VPN or Citrix. This would allow
	workers to work from home as long as they have access to
	the internet for an emergency need. A list of staff who
	have State-issued laptops can be accessed through Kati
	Smidt.
	Emergency Offices will be located at the following:
	Lincoln-5220 South 16th Street
	Beatrice-3000 Lincoln Blvd-201 Kennedy
	Nebraska City-917 Wildwood Lane, Suite A

	m 1, , 1 1 , 1 1 1 1 1 .1
	The alternative location would depend on where the
	emergency took place in SESA.
	Beatrice-BSDC2000 Lincoln StBeatrice NE
Alternative Location:	Nebraska City-Nebraska City Police Dept-1520
	Central Avenue, Nebraska City, NE
	Lincoln S 16th- NSOB 301 Centennial Mall South,
	Lincoln, NE
	Janice Kirchoff, Administrative Assistant, will update the
Describe process for quarterly updating	SESA personnel list quarterly. This list will include
personnel lists and corresponding	emergency contact phone numbers provided by staff. It
emergency contact numbers:	will be given to Human Resources and each SESA
	administrator every quarter as it is updated.
Describe the process for contacting and	Administrators will be responsible for calling all their
verification of staff safety and	supervisors. The Supervisors will call all staff on their
availability to work in the event of a	team to determine their safety and availability during an
disaster:	emergency/disaster situation.
Describe the process for updating contact	The resource development supervisor in the SESA area,
information for group homes and other	will update contact information for group home and
congregate care facilities in the Service	emergency shelter providers across the State monthly or
Area:	as information is received from the providers.
	Each service provider is assigned to a specific SESA
	Resource Development Worker. As a part of each of the
	individual service provider's emergency plans, they have
D 11 11 C	all been required to name at least two positions that will
Describe the process for requesting	notify their assigned Resource Development worker as
service providers to contact the	well as the hotline should they not be able to talk with
department in the event of an emergency	their assigned Resource Development worker. Each
and the method for contact:	agency is responsible for having a live conversation with
	either their Resource Development worker or hotline staff.
	Leaving a message over the phone or writing an email is
	not considered sufficient communication.
	In the event of an emergency, Resource Development
	workers and Resource Development supervisors will
	either send emails or communicate by phone with their
	assigned agencies to communicate information. SESA
	Administrator Remonte Green, who oversees Resource
Describe the method for communicating	Development, will make phone calls and send emails to
with agencies caring for youth in out-of-	agency CEOs. If a phone message is left, the SESA
home care in the event of a disaster:	Administrator will call again within an hour and
	communicate with the Resource Development worker to
	ensure someone from the agency has information from
	DHHS. This process will occur daily until the disaster
	situation is considered safe.
Emergency Preparedness	
Describe how CFS Specialists will advise	For youth in out-of-home care, the foster family will be
and encourage families receiving in-	responsible for developing an emergency or disaster plan

home services and families with children placed in out-of-home placements to develop and update disaster plans:	upon licensing their home. The agencies and SESA DHHS plans will need to be reviewed every two years as part of the renewal process for their license. If a disaster occurs, the assigned Resource Development worker can communicate these plans to the CFS specialists and inquire about any additional information that may be helpful for that family. If this is a kinship placement without the licensing process, the CFS Specialist and assigned agency will encourage the family to develop a disaster plan and document efforts in the foster home's ORG. on NFOCUS.
	If this is a family receiving in-home services, the CFS Specialists are required to maintain monthly face-to-face contact with the families and children served. The CFS Specialist will encourage all families to develop a disaster plan during these contacts. These efforts can be documented on NFOCUS in the family's Master Case.
Describe how families will have access to CFS Specialists' phone numbers in an emergency to access information about their child:	Every ASFC/DHHS foster family will have a support plan for their home that is specific to the needs of the child (ren) placed in their home. On that plan is the CFS Specialists' phone number and the hotline number listed (1-800-652-1999). The agency the family is affiliated with will also have access to Resource Development workers who can help locate CFS staff and supervisors during business hours and the hotline staff to communicate concerns to on-call staff after business hours.
Describe how the expectation for traditional foster families to develop and maintain a disaster plan will be enforced:	Just like ASFC families, DHHS foster families must also develop emergency plans for their homes as part of the licensing process. These plans are reviewed every two years as part of the renewal process for their foster care license, and Resource Development Workers will ensure that this information is current.
Describe the process for requiring foster families to communicate with the department in the event of an emergency:	In the event of an emergency, it is the foster family's responsibility to communicate with the department. Resource Development workers and CFS Specialists will be in communication with one another if they have heard from a family who might have been affected by an emergency/disaster. If the family has been in communication with one of the CFS staff, the staff must continue to communicate with the family and relay information to the other department employees. If a family has an emergency and is not able to talk with their assigned Resource Development staff, CFS Specialist,

CFS or Resource Development Supervisor, or CFS Administrator, they must immediately call the hotline. DHHS foster families are also responsible for communicating with department staff throughout an emergency/disaster. Once it has been identified that a traditional foster family has been affected by an emergency/disaster, the assigned Resource Development worker and CFS Specialist working with the child (ren) in the home will communicate with one another to see if Describe how expectations of traditional either has heard from the family. If not, they will decide foster families to maintain which staff should be the primary contact, and that staff will send email communication, make phone calls, or communication with the department throughout a disaster will be enforced: travel if need be to the home to ensure that the family and any State wards are safe. If the family has been in touch with someone, that staff will continue to be the family's primary contact and will be responsible for updating the other staff associated with the home. If CFS Specialists or Resource Development workers are unable to be reached, the family will contact the hotline and talk directly with somebody and will not leave a message. **Child Location Verification** Should an emergency occur, each administrative team will print off their caseload of families from NFOCUS and make plans to communicate with each of the children involved or their caregivers, depending on the age and Describe the method the Service Area development of the child. It is preferred that the CFS will take to identify and locate all specialist have a face-to-face visit with the child; however, if conditions are not favorable for traveling, a children in that designated Service Area: phone conversation is satisfactory. The CFS Specialist should consult with his or her supervisor and administrator about whether conditions are safe or not to travel to see a child. After each administrative team has its list of families, it will staff with its supervisor or administrator those Describe how priority will be given to children who are medically fragile, developmentally delayed, physically impaired, or participating in medically fragile children, physically impaired children, youth with cognitive independent living programs. Those youth will be put at and/or developmental deficits, and youth the top of the list to contact first. Again, face-to-face visits participating in independent living are preferred if the conditions are appropriate for arrangements: traveling. Otherwise, a phone conversation with the youth is sufficient to ensure safety and that they have what they

need.

	,
Describe the process for responding to youth needing new placement and care and placement of unaccompanied minors:	Department staff ensure that the children and families on their caseload are safe, and they will also assess whether placement can continue. The CFS Specialist or supervisor will contact Resource Development immediately if a new placement is needed. Resource Development staff will follow the protocol for an emergency placement and communicate the need to all the agencies. They will also make phone calls with agencies to secure placement options for a child.
Describe the process for notification of each child's status to the biological family if the child is in an out-of-home placement:	Administrative teams will work together to communicate with families about each child's status to their biological family if the child is placed out of the home. CFS Specialists, Supervisors, Administrators, and Resource Development workers will work together as needed to ensure families are informed about the safety and wellbeing of their child who is out of the home. If the relationship with the foster parents allows, they can call the foster homes directly to get information regarding their children.
	Staff
Describe how Disaster Drills will occur in your Service Area:	Disaster Drills will be conducted on a yearly basis. The SESA CFS Administrator, Remonte Green, or designee, CFS Administrator Jennifer Runge, will be responsible for determining the dates of the drills. This information will be communicated via e-mail to Administrative and Supervisory teams. During these drills, SESA will review various types of emergencies, how staff should evacuate, where to take shelter, and how they would contact clients during an emergency. After the drills are held, every Administrator will be responsible for following up within a week with his/her staff to identify deficiencies and recommend improvement opportunities. Revisions to the Disaster Plan will be made as needed.
Describe the plan to train staff on disaster planning and procedures for checking in after a disaster:	Staff will be trained on procedures as part of their new staff orientation. Procedures will be reviewed on a quarterly basis at all-staff meetings. The staff member is responsible for checking in with their supervisor and supervisors to check in with their administrator after a disaster. If revisions are made to the plan, it will be the administrator's and supervisors' responsibility to funnel down information to staff. Supervisors are responsible for reviewing the disaster plan with their team once a year. Any staff person at any time may submit suggestions and ideas to their supervisor for consideration.

Describe procedures on action that will be taken for staff that do not contact/report to duty after a disaster: For those staff that do not check in after a disaster, their supervisor and administrator, those staff members will be called, as well as emergency contact people, to ensure that staff are safe. If an employee determines they cannot report to work, they must contact their immediate supervisor. If an employee's normal work site is unavailable, they should report to the alternative work location described in the disaster plan. For any staff member who is unable to be located or communicated with after a disaster, local law enforcement will be contacted to ensure the safety of the staff person. This information will also be communicated to Human Resources and the Service Area Administrator.

Supplies

SESA Office Techs are currently in charge of maintaining emergency safety kits for State cars. Emergency supplies for the office will also be added to that list of responsibilities. This will include First Aid Kits. Kits will be maintained and kept updated at all times. All staff will have access to the kits located in each local office (Lincoln South, Beatrice, Geneva, and Nebraska City).

Supplies in the kits include but are not limited to:

- Band-Aids
- Wipes
- Tylenol
- Pain Relieving Ointment
- Non-Latex Gloves
- Rolled Bandages
- First Aid Tape
- Scissors
- Instant Cold Pack
- Hand Sanitizer
- Face Masks

Also suggested items that each office has in case of disaster/emergency:

- Map of local counties
- Copy of SESA disaster plan
- Phone book
- Office cell phone and charger
- SESA staff phone numbers
- Blankets
- Bottled water
- Battery-operated flashlight

Describe how emergency supplies will be maintained in each office (including satellite office(s)):

	Battery-operated radio
Describe procedures to maintain a current list of equipment that can be accessed in the event of disaster (e.g., laptops, cell phones, pagers): A A A A A A A A A A A A A A A A A A A	Administrative Assistants currently update and maintain lists of equipment such as laptops, cell phones, and Wi-Fi devices. They are responsible for checking these devices out to necessary staff and updating Supervisors and Administrators of their status to ensure they are working properly and ready for use. All CFS Specialists, Supervisors, Administrators, and Resource Development staff have available to them assigned work cell phones; staff are also assigned laptops for work use. If a disaster occurs, staff will be provided access to VPN or Citrix, and staff can work from their home computer.

EASTERN SERVICE AREA DISASTER PLAN		
	Name:	Lana Verbrigghe
	Address:	1313 Farnam St. Omaha, NE 68102
	Primary Phone:	(402) 214-0715
and Authority	Secondary	
Ph	Phone:	
	Name:	Amanda Nawrocki
Secondary Contact	Address:	11949 Q St. Omaha, NE 68137
for Decision-Making	Primary Phone:	(402) 657-9210
and Authority	Secondary	
	Phone:	
	Name:	Kinsey Baker
Tertiary Contact for	Address:	3311 N 93 rd St. Omaha, NE 68134
Decision-Making	Primary Phone:	(402) 677-7665
and Authority	Secondary	
	Phone:	
Current List of all Star Contact Information	ff and Emergency	ESA Disaster Coordinator (Lana Verbrigghe) has an electronic and a hard copy of the current staff with contact information. The electronic version is maintained on a shared drive that all ESA admins have access to. If Lana Verbrigghe is unable to be reached during a disaster, Amanda Nawrocki and Kinsey Baker are identified as alternatives to provide this information.
Date of Last Update o	f List:	3/1/2024
Hard Copy located wh	nere:	Hard copies are maintained in the offices of Lana Verbrigghe, Amanda Nawrocki, and Kinsey Baker, the addresses of which are listed above. Lana Verbrigghe also keeps a hard copy on her person at all times.

Electronic Copy located where:	Share Drive-Admin 2 Folder-ESA Disaster Plan
Current List of Foster Care Homes and Emergency Contact Information:	ESA Resource Development staff maintain a list (monthly) of all foster care homes and emergency contact information, including after-hours and on-call contact information. Lana Verbrigghe will maintain hard copies of updated lists.
Date of Last Update of List:	3/1/2024
Hard Copy located where:	Lana Verbrigghe's office, 1313 Farnam St. Omaha, NE 68102
Electronic Copy located where:	NFOCUS can provide an electronic copy, and a current list is maintained on the Share Drive—Admin 2 folder—ESA Disaster Plan.
Current List of Group Homes and Congregate Care, Shelter Settings:	ESA Resource Development staff maintain a list (monthly) of all group homes, congregate care, and shelter care providers with emergency contact information, including after-hours and on-call contact information. Lana Verbrigghe will maintain hard copies of updated lists.
Date of Last Update of List:	3/1/2024
Hard Copy located where:	Lana Verbrigghe's office, 1313 Farnam St. Omaha, NE 68102
Electronic Copy located where:	Share Drive – Admin 2 folder – ESA Disaster Plan
	Communication Plan
Identify where your emergency office will be located	The ESA has several office locations. Depending on where an emergency has occurred, will determine which office would be the emergency office for staff. All CFS Specialists, Supervisors, and Administrators have access to either Citrix or VPN. Additionally, all staff have been issued laptops and cell phones equipped with multi-factor authenticators. This allows staff the ability to work remotely from any location and the ability to access all information contained on the network and NFOCUS. Emergency Office: Omaha State Office Building – 1313 Farnam St. Omaha,
Alternative location	Project Harmony Location – 11949 Q St. Omaha, NE.
Describe process for monthly updating personnel lists and corresponding emergency contact numbers	Support staff update this list monthly. New hires are added upon hire by support staff.
Describe the process for contacting and verification of staff safety and availability to work in the event of a disaster	ESA calling tree – SAA to Admin to Supervisor to Staff: The ESA Service Area Administrator will initiate the calling tree and will contact the Admins to provide direction. Admins are then responsible for contacting the supervisors assigned to them. Supervisors are then responsible for contacting the case managers assigned to them to determine the safety and availability of staff during an emergency or disaster situation.

Describe the process for updating contact information for group homes and other congregate care facilities in the Service Area	Resource Development staff will update contact information for providers across the State monthly or as information is received from providers.
Describe method for communicating with agencies caring for youth in out-of-home care in the event of a disaster	In the event of an emergency, Resource Development workers and Supervisors will either send emails or communicate by phone with their assigned agencies to share information. If a phone message is left, the RD Administrator will call again within an hour and communicate with RD supervisors/workers to ensure someone from the agency has information from DHHS. This process will occur daily until the disaster situation is considered safe.
En	nergency Preparedness
	urage families receiving in-home services and families with
children placed in out-of-home placemer	nts will develop and update disaster plans.
Describe how families will have access to CFS Specialists in an emergency to access information about their child.	Every ASFC/DHHS foster family will have a support plan for their home that is specific to the needs of the child (ren) placed in their home. The CFS Specialists' phone numbers and hotline numbers (1-800-652-1999) are listed on that plan. The agency the family is affiliated with will also have access to Resource Development workers who can help locate CFS staff and supervisors during business hours and the hotline staff to communicate concerns to on-call staff after business hours.
Describe the method the Service Area will take to identify and locate all children in that designated Service Area.	Should an emergency take place, each administrative team will print off their caseload of families from NFOCUS and make plans for communication with each of the children involved or their caregivers, depending on the age and development of the child. It is preferred that the CFS specialist have a face-to-face visit with the child; however, if conditions are not favorable for traveling, a phone conversation is satisfactory. The CFS Specialist should consult with his or her supervisor and administrator about whether conditions are safe or not to travel to see a child.
Describe the process for responding to youth needing new placement and care and placement of unaccompanied minors.	Department staff ensure the safety of the children and families on their caseload and assess whether placement can continue. If a new placement is needed, the CFS Specialist or supervisor will contact Resource Development immediately. Resource Development staff will follow the protocol for an emergency placement and communicate the need to all agencies. They will also make phone calls with agencies to secure placement options for a child.

Describe the process for notification of each child's status to the biological family if the child is in an out-of-home placement.	Administrative teams will work together to communicate with families about each child's status to their biological family if the child is placed out of the home. CFS Specialists, Supervisors, Administrators, and Resource
	Development workers will work together as needed to ensure families are informed about the safety and well-being of their child in out-of-home care. If the relationship with the foster parents allows, they can call the foster homes directly to talk with and get information regarding their children.
	Staff
Describe how Disaster Drills will occur in your Service Area	ESA holds monthly and quarterly fire, tornado, and active threat drills. During these drills, ESA reviews various types of emergencies, such as how staff should evacuate, where to go to take shelter, and how they would contact clients during an emergency. After the drills are held, every Administrator is responsible for following up within a week with his/her staff to identify deficiencies and recommend opportunities for improvement. Revisions to the Disaster Plan will be made as needed.
Describe the plan to train staff on disaster planning and procedures for checking in after a disaster	Staff will be trained on procedures as part of their new staff orientation. Staff members are responsible for checking in with their supervisors and supervisors to check in with their administrator after a disaster. If revisions are made to the plan, it will be the administrator's and supervisors' responsibility to funnel information to staff. Supervisors are responsible for reviewing the disaster plan with their team once a year. Staff members may submit suggestions and ideas to their supervisor at any time for consideration.
Describe procedures on action that will be taken for staff that do not contact/report to duty after a disaster.	If staff do not check in with their supervisor and administrator after a disaster, they will be called and emergency contact people to ensure their safety. If an employee determines they cannot report to work, they must contact their immediate supervisor. If an employee's normal work site is unavailable, they should report to the alternative work location described in the disaster plan. For any staff member who is unable to be located or communicated with after a disaster, local law enforcement will be contacted to ensure the safety of the staff person. This information will also be communicated to Human Resources and the Service Area Administrator.

Supplies	
Describe how emergency supplies will	Emergency supplies are located at Project Harmony,
be maintained in each office (including	OSOB, Fort St, and Sarpy Couty offices. Support staff
satellite office(s)).	maintains the supplies and reorders new ones as needed.
Describe procedures to maintain a	
current list of equipment that can be	Electronics – computer, laptop, and cell phone inventory of
accessed in the event of disaster (e.g.,	ESA P&S staff is maintained by an administrative assistant.
laptops, cell phones, pagers)	

VI. TRAINING

Testing and training are essential to assessing, demonstrating, and improving organizations' ability to maintain their essential functions and services. CFS will participate in disaster exercises offered by the public emergency coordinator with the Division of Public Health or NEMA to examine the impact on the agency's essential functions, familiarize agency personnel with their responsibilities, and validate the effectiveness of COOP planning.

VII. PRESERVATION OF RECORDS

DHHS Information Systems and Technology (IS&T) is responsible for the security of electronic records. Protection and backup of electronic records are completed per IS&T policies and protocols, which include regular backup, alternate servers, and storage of electronic documents. The IS&T procedures address processes essential to the safety and security of electronic documents and records. All vital data and documents utilized on a daily basis shall be accessed and stored on DHHS servers and not stored locally on individual desktop computers.

Nebraska's child and family records are largely computerized. In the event of a disaster, relocated staff can access these records from any authorized Nebraska DHHS computer site across the State with the appropriate log-in and password procedures. This allows staff to continue to serve consumers at a variety of sites or at newly established or emergency sites during a period of recovery.

CFS staff have access to DHHS systems using VPN or CITRIX from remote locations when approved by the CFS Administration. VPN or CITRIX allows staff to access needed electronic documents, files, and the email system from remote locations via the Internet. Access can also be established for program-specific databases. Access to web-based Outlook is also available to individuals who only need access to email.

The CFS Disaster Plan includes, but is not limited to, the following information and planned activities:

- The protection of vital records; establishing off-site backup for information systems with case and client records (for example, adoption subsidy and foster care payments systems);
- Procedures requiring protecting data and equipment from environmental factors (for example, installing surge protectors);
- A management communication plan to initiate contact with federal partners;

- Cross-training of multiple staff regarding ICPC and ICJ processes and procedures to help assist
 with timely transfers of youth across States in the event of a disaster or emergency in our State or
 another State; and,
- Assessing the critical nature of paper records prior to a disaster and then determining what steps may be necessary to protect such records from potential damage in a disaster (for example, using fire-safe metal filing cabinets, creating scanned copies of vital records, and storing electronically).

VIII. RECONSTITUTION

Reconstitution is the ability of DHHS to recover from a disaster, a catastrophic event, or a declared health emergency to ensure the necessary resources that allow DHHS to return to full functionality. Once the disaster event has ended, one or a combination of the following options may be implemented, depending on the situation.

- Continue to operate from the alternative site locations with support, if necessary;
- Begin an orderly return to established offices;
- Collaborate with the Department of Public Health on re-credentialing and licensure assurance of facilities impacted by the disaster and/or,
- Begin or establish a new office in an alternative facility, as identified.

Replacement of employees who are unable to return to work is the responsibility of DHHS Human Resources. In areas critical to operations of the division where priority is given for the replacement of employees, the following considerations should be made in expediting the hiring process either on a temporary or permanent basis:

- Contracting with external entities to perform job functions;
- Hiring temporary employees;
- Hiring retired State employees on a temporary basis; and,
- Waiving regulations regarding hiring processes to expedite the filling of vacant positions.

DIVISION OF CHILDREN AND FAMILY SERVICES

DISASTER PLAN Appendices

APPENDIX A

CFS Emergency Management Team Members

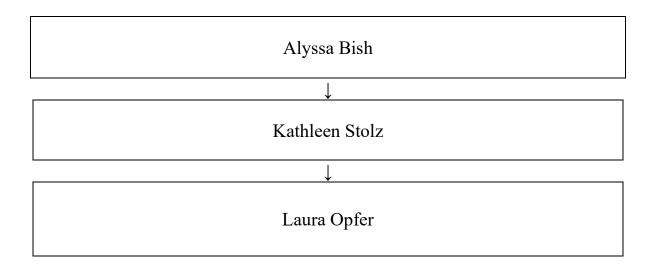
NAME	TITLE
Alyssa Bish	Division Director
Laura Opfer	Deputy Director – Programs, Policy, and Legislative Services
Kathleen Stolz	Deputy Director - Protection and Safety
Vacant	Deputy Director of Finance, Analytics & Quality
	Deputy Director – Research & Evaluation
Lisa Jurrens	IV-E Administrator- Protection and Safety
Beth Buhr	Administrator II - Protection and Safety
Ashley Peters	Policy Administrator - Protection and Safety
Angela Miles	Well-Being Administrator - Protection and Safety
Jamie Kramer	Family First Administrator- Protection and Safety
Nichole Hersh	Permanency Administrator - Protection and Safety
Camas Holder	Community Prevention Administrator – Protection and Safety
Mark LaBouchardiere	Facility Administrator - Youth Rehabilitation &Treatment Centers (YRTCs) Kearney/Hastings/Lincoln

APPENDIX B

CFS Delegation of Authority/Decision Making

Succession is critical in the event CFS leadership is debilitated or incapable of performing their legal authorized duties, roles, and responsibilities. The following pre-determined orders of succession are designed to allow for an orderly and pre-defined transition of leadership within CFS.

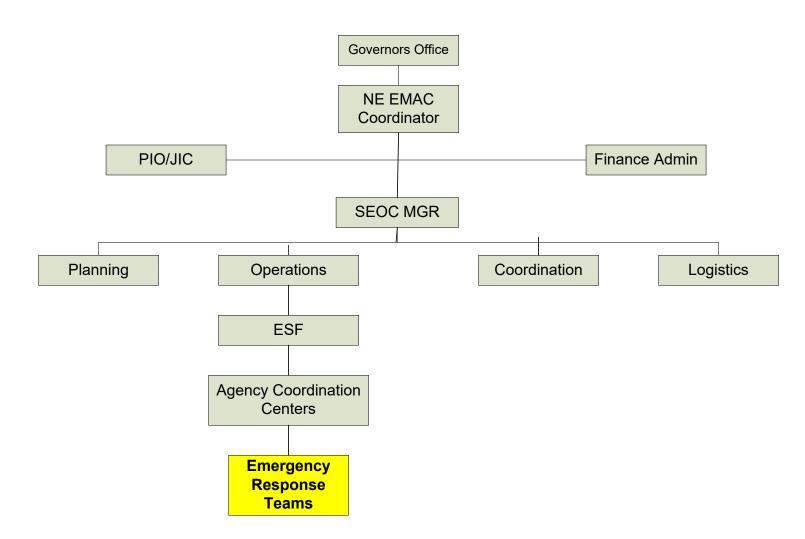
In the absence of an appointment made by the Governor or DHHS CEO, the Division of Children and Family Services senior leadership chain of command for delegation of authority is as follows:



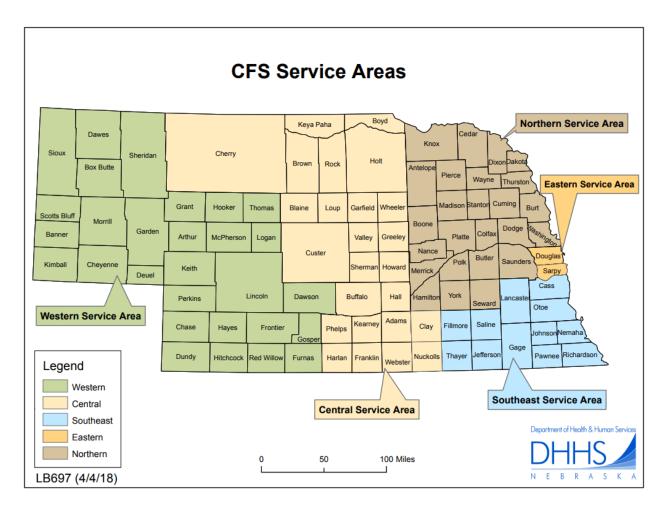
APPENDIX C

Emergency Response Teams in the Nebraska Emergency Management Structure

Below is a simplified organizational chart representing the placement of deployed emergency response teams in the Nebraska emergency management structure.



APPENDIX D



Central Service Area: Brenda Brooks, 200 S Silber St, North Platte NE 69101 308-530-0691 Northern Service Area: Brenda Brooks, 200 S Silber St, North Platte NE 69101 308-530-0691 Southeast Service Area: Lana Verbrigghe, 11949 Q St, Omaha NE 68137 402-595-3257 Western Service Area: Brenda Brooks, 200 S Silber St, North Platte NE 69101 308-530-0691 Eastern Service Area: Lana Verbrigghe, 11949 Q St, Omaha NE 68137 402-595-3257

APPENDIX E

Service Area Disaster Plan Template: Identified Service Area

		Contac	ct Information
Primary Contact	Name:		
for Decision-	Address	•	
Making and	Primary	Phone:	
Authority	Seconda	ry Phone:	
Secondary Contact	Name:		
for Decision-	Address	:	
Making and	Primary	Phone:	
Authority	Seconda	ry Phone:	
Tertiary Contact	Name:		
for Decision-	Address	•	
Making and	Primary	Phone:	
Authority	Seconda	ry Phone:	
Current List of all St	aff and E	mergency	
Contact Information			
Date of Last Updat	te of List:		
Hard Copy located	where:		
Electronic Copy lo			
Current List of Foste	er Care Ho	omes and	
Emergency Contact Information:		on:	
Date of Last Update of List:			
Hard Copy located where:			
Electronic Copy located where:		ere:	
Current List of Grou	p Homes	and	
Congregate Care, Sh	elter Sett	ings:	
Date of Last Updat	te of List:		
Hard Copy located	where:		
Electronic Copy lo	cated wh		
		Comm	unication Plan
Identify where your			
emergency office wi	ll be		
located			
Alternative location			
Describe process for			
quarterly updating			
personnel lists and			
corresponding emerg	gency		
contact numbers			
Describe process for			
contacting and verifi	cation		
of staff safety and	l		

availability to work in the	
event of a disaster	
Describe process for	
updating contact	
information for group	
homes and other congregate	
care facilities in the Service	
Area	
Describe process for	
requesting service providers	
to contact the department in	
the event of an emergency	
and the method for contact:	
Describe method for	
communicating with	
agencies caring for youth in	
out-of-home care in the	
event of a disaster	
	Emergency Preparedness
Describe how CFS	Emergency reparedness
Specialists' will advise and	
encourage families	
receiving in-home services	
and families with children	
placed in out-of-home	
placements will develop	
and update disaster plans.	
Describe how families will	
have access to CFS	
Specialist phone numbers in	
an emergency to access	
information about their	
child.	
Describe how the	
expectation for Traditional	
Foster Families develop and	
maintain a disaster plan will	
be enforced.	
Describe the process for	
requiring foster families to	
communicate with the	
department in the event of	
-	
an emergency: Describe how expectations	
of Traditional foster	
families to maintain	
communication with the	

department throughout a	
disaster will be enforced.	
	Child Location Verification
Describe the method the	
Service Area will take to	
identify and locate all	
children in that designated	
Service Area.	
Describe how priority will	
be given to medically	
fragile children, physically	
impaired children, youth	
with cognitive and/or	
developmental deficits and	
youth participating in	
independent living	
arrangements.	
Describe process for	
responding to youth	
needing new placement and	
care and placement of	
unaccompanied minors. Describe the process for	
notification of each child's	
status to the biological	
family if the child is in an	
out-of-home placement.	
'	Staff
Describe how Disaster	
Drills will occur in your	
Service Area	
Describe how staff will	
receive information on how	
to maintain personal safety	
during an active shooter	
situation or when assisting	
with a DV case	
Describe plan to train staff	
on disaster planning and	
procedures for checking in after a disaster	
Describe procedures on action that will be taken for	
staff that do not	
contact/report to duty after a	
disaster.	
disaster.	Supplies
	Duppnes

Describe how emergency	
supplies will be maintained	
in each office (including	
satellite office(s)).	
Describe procedures to	
maintain a current list of	
equipment that can be	
accessed in the event of	
disaster (e.g., laptops, cell	
phones, pagers)	

APPENDIX F

Communications with Federal Department of Health and Human Services (DHHS) Partners during a Disaster

If Nebraska is affected by either a natural or man-made disaster that affects the children, youth, and families receiving services through CFS or inhibits the ability to provide services, the following communication steps shall be followed:

The Director of the Nebraska Department of Health and Human Services Children and Family Services Division or his/her designee(s), or the Protection and Safety Deputy Director shall call Kendall Darling, the RPM with the Children's Bureau with Region 7 Office, at (816) 426-2262 or at E-mail: kendall.darling@acf.hhs.gov. If unavailable, the Director or designee shall call the Administration of Children and Families (ACF) Region 7 Office at (816) 518-8630.

If there is no response from the ACF Region 7 Office, the Director or designee shall call the Children's Bureau at (202) 205-8618.

The content of the call shall be a summary of the situation and a request for any assistance that may be necessary or appropriate.

Communications with Other State and National Organizations

If Nebraska is affected by either a natural or man-made disaster that affects the children, youth, and families receiving services through CFS or inhibits the ability to provide services, the following communication steps shall be followed related to notification of other States and national groups:

- The Director of the Nebraska Department of Health and Human Services Children and Family Services Division or his/her designee(s), or the Protection and Safety Deputy Director shall call The Nebraska Emergency Management Agency at (402) 471-7421.
- A CFS Administrator shall notify the Executive Director of NFAPA (402 476-2273) who in turn will notify the National Foster Parent Association.
- The Director of the Nebraska Department of Health and Human Services Children and Family Services Division or his/her designee(s), or the Protection and Safety Deputy Director shall call the administrative office of the American Public Human Services Association (APHSA) at 202/682-0100 and the League of America (CWLA) at 703/412-2400.

APPENDIX G

CFS Employee Duty Coverage Procedures:

- 1. Whether the disaster occurs when employees are on or off duty:
 - a) CFS personnel shall, upon learning of the disaster, contact their regularly assigned Supervisor for emergency response assignments. Personnel shall immediately report to their designated work site and conduct their assigned duties and responsibilities. There may be situations wherein following the normal chain of command is not possible. In those situations, personnel shall follow the directives of Supervisors and/or Administrators for other divisions of the Agency.
 - b) If personnel are unsure of what to do or whether to check in, they should listen to local news broadcasts, Emergency Broadcast Station announcements, and/or other media to determine the nature of the emergency.
 - c) Unless otherwise directed, all personnel are required to work their regularly scheduled work calendar and hours.
- 2. During or after a disaster, the status of children under the CFS' care will be determined as follows:
 - a) If possible, during normal working hours, all CFS personnel with an assigned caseload will contact the children on their assigned caseloads via telephone and/or personal home visits. The information needed (i.e., the caretaker's name, address, and telephone number for each child) is in each case file. If the assigned CFS Specialist is not available, another assigned CFS personnel shall make the contacts.
 - b) Caseload coverage shall be ensured by each CFS Supervisor or Administrator. Other CFS personnel may be assigned to help contact all children and families. Contacts must also be done on behalf of all children placed via the InterState Compact on the Placement of Children and children residing in the State whereby courtesy supervision services are being provided.
 - c) In the event other States request courtesy safety home visits on behalf of their dependents, CFS personnel shall honor those requests.
 - d) Supervisors shall maintain a comprehensive list of all children under the care, custody, and control of CFS on a monthly basis utilizing a computer-generated report. This list must be able to be accessed in the event of an emergency to CFS personnel who may be operating on a skeleton crew or after normal working hours. In that event, staff who are directed to be responsible for making the contacts will have an up-to-date list to utilize.
 - e) All attempted and completed contacts will be entered into NFOCUS as soon as reasonably possible and in accordance with data entry procedures. Hand written notes shall be kept on every contact until the data can be entered into NFOCUS

- 1. The following information, at minimum, shall be kept child's name, caretaker's name, who the CFS Specialist spoke to (Staff must speak to the caretaker, child, or approved secondary caretakers), information about the child's health, safety and welfare, the child's location throughout the disaster and any services the child may require. If required, all other documents or forms must be filled out by hand.
- 3. During or after a disaster, services shall be provided to children under CFS care as follows:
 - a) Active efforts to follow all Court Orders made prior to the disaster will be made. CFS personnel will require the approval of management to act in opposition to an existing Court Order and a Court Report will be filed as soon as possible explaining why the applicable Court Order could not be followed.
 - b) For any situation that emergency services or medical care on behalf of a child must be acquired, CFS personnel will seek guidance from Supervisors or Administrators prior to giving consent for the procedures. Upon direction, CFS personnel may provide written consent for the emergency procedure.
 - c) For non-life-threatening emergencies, which may become life-threatening and require consents above those typically reserved for caretakers and parents, CFS personnel must make every reasonable effort to obtain a Court Order for care. If one cannot be reasonably obtained, CFS personnel may approve the procedures in writing after consulting with a Supervisor or Administrator.
 - d) All other rights given to caretakers and parents by Nebraska Revised Statute also will apply during a disaster situation.
 - e) If a child has died, CFS personnel shall follow the policies and procedures in relation to child deaths as soon as reasonably possible.
 - f) If the child and/or caretaker needs any other services (i.e., transportation, food, shelter, clothing, crisis counseling, water), CFS personnel shall make every reasonable effort to acquire the services via community-based providers and/or emergency shelters.
 - g) CFS personnel shall document all efforts, services, contacts, and the results in NFOCUS when reasonably possible, regardless of which child or family it is they come into contact with. Hand written notes shall be kept until it is possible to enter the data. Any required documents or forms must be filled out by hand, if necessary.
- 4. The after-hours policies and procedures shall be followed during and after a disaster to ensure the Agency meets its mandatory 24-hour emergency response requirements. The Emergency Response Supervisor shall coordinate after-hours emergency response coverage to ensure staff and Supervisors are on call as scheduled.
 - a) All information shall be entered on documents and forms by hand if NFOCUS is not available. Information shall be entered as soon as reasonably possible.
 - b) In the event the disaster results in a necessity for CFS personnel to be stationed at emergency shelters to handle intake and emergency response duties, staff shall be assigned to provide those services in a rotating manner. Otherwise, the services can be provided via the normal after-hours call-in procedures.

- 5. Emergency Response services to the public shall continue during and after a disaster. Child abuse and neglect investigations shall be conducted in accordance with regulations, legislation and Agency policies and procedures active prior to the disaster. CFS personnel shall place children into protective custody as necessary and locate foster care placements on behalf of those children. Emergency relative and home approvals shall be done in accordance with agency procedures and policies during and after a disaster.
 - a) CFS personnel shall continue searching for placement on behalf of detained children until safe, suitable, and approved/licensed placements are found and made. During the placement search, CFS personnel shall be assigned to rotating shifts for the care and supervision of detained children. The care and supervision site may be in a designated shelter or other facility that is safe and has food, water, and proper sanitation for the children.
 - b) Welfare and Institutions Code Petitions and Reports must be prepared and filed within statutory guidelines during and after a disaster in the event the Court system is functioning. The Agency is still held to statutory requirements for the detention of children if Court days are being counted in the County. All other legal and civil rights accorded to children and their families will also continue to apply during or after a disaster; therefore, CFS personnel will make active efforts to comply with those regulations.
- 6. CFS personnel shall assist unaccompanied minors resulting from the disaster. These children may be delivered to CFS personnel, sent to emergency shelters and/or must be responded to by CFS personnel in other areas of the Service Area. CFS personnel shall make every effort to locate the children's parents, legal guardians and/or responsible relatives to release the children to during or after the disaster in accordance with policies and procedures.
 - a) If children can be released safely, all efforts, services and contacts shall be entered into NFOCUS as a referral and closed appropriately. Hand-written notes, documents and forms shall be completed if NFOCUS is not available, and the information shall be entered as soon as possible when NFOCUS becomes available.
 - b) If children cannot be safely released to an appropriate caretaker, CFS personnel shall treat the referral as an intake.

APPENDIX H

Emergency Plan for Foster Parents

Natural or human-made disasters such as floods, hurricanes and tornadoes, fires, and chemical spills can occur at any time and any place. Disasters may occur on a local scale or be widespread and impact multiple counties and/or States. Regardless of the size and scope of the disaster or emergency, the impact may result in a major disruption of normal operations. In the event of a disaster, essential services to children, youth and families could be disrupted or seriously compromised. Therefore, it is especially important for agencies caring for vulnerable populations, such as foster children, to do what they can to prepare for a disaster and any subsequent disruption of services. In order to address the safety issues of children in out-of-home care during an emergency situation, the following procedure has been established:

This procedure will be communicated to foster parents via the NFAPA newsletter, personal letter, and face-to-face contact.

- 1. Foster parents are directed to develop and display a family emergency plan. The plan will include:
 - where the foster family, foster children, and youth would go in an evacuation (if possible, identify 2 alternate locations);
 - personal telephone numbers and contact information (cell phone numbers, fax numbers, e-mail address, names, address);
 - emergency contact information for foster families (out-of-area relatives or friends);
 - a list of critical items to take when evacuating with children/youth, including identification documents for the child, the child's medical information, health insurance card, medication and/or medical equipment; and
 - emergency contact or toll-free telephone numbers for CFS, to include: the CFS
 Specialists phone number, ACCESS Nebraska toll-free number, the Nebraska
 Adult & Child Abuse Neglect Hotline number, as well as the contact information
 for Service Area staff.
- 2. Resource Development staff, along with NFAPA, will provide foster parents with a template (Appendix A) to complete. They will also work with foster parents to ensure that the plan is completed.
- 3. Once the plan is completed, foster parents will submit the plan to their local resource development office to be made part of their licensing record.

*Note: Agency supported foster families will submit their plans to both the local resource development office and their supporting agency.

- 4. Once the plan is submitted, Resource Development staff will document the plan in NFOCUS under Home Detail-Contact. Create a new narrative entitled "Disaster Plan".
- 5. Foster parents will review and update, if necessary with their foster children (age appropriate), the case worker and the Resource Development Staff every six months. The Resource Development staff person and the case worker will document the review date, as well as any changes.
- 6. Foster parents are also directed to assemble a disaster supply kit. Items to include in the kit:
 - A three-day supply of water (one gallon per person per day) and food that won't spoil.
 - One change of clothing and footwear per person and one blanket or sleeping bag per person;
 - A first aid kit that includes your family's prescription medications;
 - Emergency tools, including a battery-powered radio, flashlight, and plenty of extra batteries;
 - An extra set of car keys and a credit card, cash, or traveler's checks;
 - Sanitation supplies;
 - Special items for infant, elderly, or disabled family members; and,
 - An extra pair of glasses.

These items should be stored in a waterproof container.

In the event of a mandatory evacuation order, foster families must comply with the order. Foster parent must ensure that their foster children are evacuated according to the plan and procedures set forth by the Nebraska Emergency Management Agency (NEMA).

• Once they have reached safety, foster parents are directed to inform CFS of their whereabouts and contact information as soon as possible.

*In some instances, evacuation may not be necessary or possible; however, informing CFS of foster family and foster children whereabouts still remains necessary.

In the Central Service Area:

The foster parent must contact a Resource Development Supervisor at 308-385-6141 or 308-850-7003, or 1-800-779-4855 as soon as possible.

In the event that the Resource Development Supervisor is not available the foster parent must contact, Resource Development Administrator at 308-385-6173 or 308-390-9436.

The Resource Development Supervisor will relay information regarding children's emergency situations daily to the Resource Development Administrator who will then forward this information to birth parents/relatives, Service Area Administrator, CFS Director and central office staff.

Foster parents are expected to communicate with CFS in an effort to keep families and CFS staff current on the well-being and safety of children in their care.

In the Northern Service Area:

Foster parents must call their local office and contact their RD worker, the child's CFS Specialist, or coverage staff during normal working hours to inform DHHS of an emergency. For after-hours emergencies, foster parents will be provided with pager information and phone numbers for a coverage office if that is needed in the event of an emergency. If none of those numbers can be reached they should use the SIX system to contact their RD worker and the child's CFS Specialist and provide as much information as possible so that they can be contacted.

The CFS Specialist or coverage worker is responsible for contacting the birth parents if rights are intact. The worker will consult with their supervisor or the coverage supervisor informing them of the child's situation. The supervisor will create a list documenting where the child is located and any safety issues and provide that to their CFS Administrator within 24 hours. The CFS Administrator will report to central office.

If staff identify immediate safety issues, daily communication will take place until the child and foster family are safe. If the child and foster family are safe, weekly communication is sufficient.

In the Western Service Area:

Foster parents must attempt to call the local office to notify the assigned CFS Specialist or Resource Developer of the emergency situation. If the CFSS or RD is not available, the foster parent must request to speak with an Administrator.

If normal communication channels are down, the foster parent must follow the steps outlined by local emergency management personnel to communicate the emergency situation affecting the children in their care.

The CFS personnel who receive the report from the foster parent will communicate as needed birth families, Service Area Administrator, Protection & Safety Administrator, CFS Director and/or Central Office personnel regarding the emergency situation affecting the child/children in the foster home.

If the emergency situation continues more than one week, the foster parent will report the status of the effected child/children in their care at least one time per week. If, at any time during the emergency situation, the physical location of the child/children changes, the foster parent immediately notify DHHS of such change

In the Eastern Service Area:

Foster Parents/ASFC Contractors are required to call the Adult & Child Abuse Neglect hotline at 800-652-1999 with their required information when there is an emergency situation. Hotline staff will maintain a list of the foster parents, their location, and the children in their care and report that information to the central office.

Foster Parents will be required to check in with the designated communication site initially and if their location or situation changes.

In the Southeast Service Area:

As information is gathered by CFS staff and an emergency situation has occurred with a youth, the critical incident process will be utilized to include contacting birth parents. Both a coverage plan and calling tree procedure will be in place to aid in this process.

Foster parents are directed to keep CFS informed of their situation as directed.

All foster parents and foster supported agencies have contact people within Resource Development as well as many have access to the SIX System. When phones are working foster parents will be asked to call in or send an e-mail to report their current status.

If the local offices are not accessible due to the emergency situation, the foster parent must call the Adult & Child Abuse Neglect Hotline at 800-652-1999 and report the emergency situation affecting the children in their care. Hotline staff will maintain a list of the foster parents, their location, and the children in their care and report that information to the Service Area and central office.

In the event that the Hotline becomes overburden or unusable, the CFS will work with IS&T and the phone company to set up an alternative number for foster parents. The Coordinator will then work with the Nebraska Emergency Management Agency (NEMA) to get the number communicated via the State relay network that includes radio and television.

- Foster parents will be contacted as soon as possible to determine what assistance is needed and to address any concerns that foster parents may have at the time.
- If a foster family has relocated to another State, local staff will inform the ICPC Administrator as soon as possible.
- The Child Welfare Administrator will notify the Executive Director of NFAPA of the foster parent's situation as soon as possible.
- Local office staff will notify the courts, parents, attorneys, and schools as soon as possible regarding information about the child's whereabouts.

Phone lines for parents will be set up and designated for parents to obtain information about the welfare of their children. The number will be broadcast through NEMA.

Circumstances of the disaster and instructions provided will determine the frequency of contact.

APPENDIX I

Operational Disaster Kits for Managers could include:

- Laptop computer with extra batteries
- 1 gigabit USB thumb drive (with important documents loaded before a disaster)
- Phone lists, address book, with employee and management contact information
- Employee lists
- Cell phones, satellite phones, radios/walkie-talkies, wireless handheld devices
- Radios and extra batteries
- Disaster plans
- Maps, driving directions to alternate facilities
- Portable GPS devices (if available)
- Flashlights, lanterns with extra batteries
- First aid kit
- Pocket knife or multi-tool
- Car chargers for laptop and cell phone
- Personal hygiene items

APPENDIX J

Emergency Plan for Families

Family's <u>Last</u> Name:			Phone:		
Household Address	•				
Location of Disaste	r Supply	y Kit(s):			
First Names of Family Members	Age	Social Security Number	Date of Birth	Medical Information (including allergies)	

Emergency Plan Page __ of ___

Pets	Rabies Vac	cination #	Vet Name and Number
Car Information:			
Car 1: Make	_/ Model	/ Year	License #
Car 2: Make	_/ Model	/ Year	License #
Car 3: Make	_/ Model	/ Year	License #
Household Phone(s):			
E-mail Contact Informat	ion:		
School(s) Phone(s):			
Back-up Contacts: (inclu	de name/town or	· State)	
Close Friend or Neighboremergency:	·		whereabouts in case of an
Relative:			
Out-of-State Contact:			
Emergency Numbers: 91	11		
Law Enforcement:	City:		
County:			vav Patrol:

Medical Contacts:	Doctor:
	Doctor:
	Hospital:
	Emergency Plan Page of
	tory evacuation order, foster families must comply with the neir foster children are evacuated according to the plan.
Local	
Household Fire:	
Tornado or Severe Thur	nderstorm:
Winter Storm:	
Earthquake:	
Medical Emergencies:	
Community Disaster / E	vacuation:

Emergency Plan Page of
Evacuation plans should include:
- Two places to meet.
1. Outside your home in case of a sudden emergency.
2. Outside your neighborhood/community in case you can't return home or

there is an evacuation.
Who will the contact person be and their phone number.

Insurance/Other Information (Health, auto/home/life)				
Name	Policy #	Phone		

Disaster Kit Content List

In Kit	Item	Perishable/Dated (Put expiration date.)
	Store at least 3 days of food and water for all family members	
	Change of Clothing for each person	
	Sleeping bag or bedroll for each child	
	Battery-powered radio or television	
	Extra batteries	
	Flashlight	
	Sanitation supplies	
	Special Needs Items for each person	
	- Extra Medication, extra pair of glasses	
	Names and numbers of Emergency Contacts	

Copy of Emergency Plan	
First Aid Supplies	
Personal Document and ID	
Money	
Sanitary Supplies - Include extra toilet paper, feminine supplies, personal hygiene products, bleach, and any other personal products you may need in your preparedness kit.	
Pet Supplies	
Tools	

Overview: Consider the following when assembling or restocking your kit to ensure your family is prepared for any disaster:

- Keep your kit where it is easily accessible.
- Remember to check your kit every six months and replace expired or outdated items.

This information is confidential and protected!

Minor and	d Special Needs	Information:			
Child/Indi Date of Bi	ividual's Name: rth:				
(Dosage sh		ed / General Info			
		/ / /			
Special Ne	eeds (allergies, n	o contact orders,	, etc.):		
Identifying	g Information:				
Hair:	Eyes:	Height:	Weight:	Other:	
Location I	Information:				

Babysitter Day Care Pre-School Elementary School High School Other: Contact Person (Name, Contact Number, Alternative Number): Emergency Plan Page of Emergency Contact Information:					
				at	
				at	
3 rd :	at				
Child of i Critical Items to Brin	n household. g in an event of an Evacuation:				
Item					
Birth Certif					
Social Secur					
Citizenship	Documentation/Letters of Entitlement				
Information	of Medical History				
	ance/Medicaid Card				
	ation and any Medical Equipment				
Existing Co					
	ormation for DHHS				
Contact Info	ormation for Biological Parents (if know)				

APPENDIX K

POST INCIDENT REVIEW QUESTIONNAIRE

Date:		Time:	
Staff:			
Nature	of	the	event:
			_
			<u> </u>
Is there any threat electrical hazards?	to personal safety? Fallen	shelves, slippery floor, fa	alling tiles, exposed
Is there structural da	amage? Are utilities affected	1? Electricity, heat, air cond	litioning, telephone?

What kinds of records are damaged?
Is there damage to furnishings, equipment, computers?
What is the nature of the damage? Is the material damp or wet? Was the water muddy, oil contaminated, or clean? Is there additional damage from fire, soot, or heat?
_

Is the water in a flooded area contaminated? Water may be contaminated by soot, ash, sewage, or by having passed through a pipe or gutter.

	I what type of reconstimate the approxi				
Can services b necessary?	e maintained? Fu	ll or selective?	Can areas be	restricted on a	selective basis
	nt will be needed? umps, packing cra				ok trucks, freezo

scribe challenges experienced during the response phase and salvage operations w can staff better prepared for similar incidents in the future?
w can staff better prepared for similar incidents in the future?
w can staff better prepared for similar incidents in the future?
w can staff better prepared for similar incidents in the future?
w can staff better prepared for similar incidents in the future?
w can staff better prepared for similar incidents in the future?
w can staff better prepared for similar incidents in the future?
w can staff better prepared for similar incidents in the future?
at supplies were needed on hand, but were not readily available?



Active Shooter

FOREWORD

The Active Shooter Annex is a companion document to the Department of Health and Human Services (DHHS) Continuity of Operations Plan and focuses on the planning and preparation phase for a response to an emergency. Due to the recent increase in the number of Active Shooter incidents it is necessary to plan for a response and recovery from such incidents. In the aftermath of an Active Shooter incident, it is a fact that organizations will experience a continuity situation, where both facilities and personnel will be adversely impacted. Facilities may be unavailable or uninhabitable for extended periods of time due to either a lockdown or criminal investigation. Personnel may be impacted either physically or mentally by the incident for uncertain periods of time. This document reinforces much of the published guidelines of how to respond to an Active Shooter, and further discusses ways in which the organization can recover from such a tragic incident.

Emergency Numbers:

Emergency Services: 911				
Local Emergency Information L	ine:			
Local Police Department: 911 (non-emergency number: 402-441-6000)				
Local Fire Department: 911 (nor	n-emergency number: 402-441-7363)			
Local Hospital: Bryan Medical C	Center West Campus 402-481-5142 (emergency room)			
Local FBI Field Office: (402) 47	76-6393			
Facility Security: Nebraska State	e Patrol (Building Security) 402-471-2400			
Facility Address: 301 Centennia	l Mall So. (1400 M St.) Lincoln, NE 68509			
Floor: Su	ite/Room:			
Office #: Ex	t			

1. Profile of An Active Shooter

An Active Shooter is an individual actively engaged in killing or attempting to kill in a confined and populated area; in most cases, active shooters use firearms and there is no pattern or method to their selection of victims.

Because active shooter situations are often over within 10 - 15 minutes before law enforcement arrives on the scene, individuals must be prepared both mentally and physically to deal with an active shooter situation.

2. Good practices for coping with an active shooter situation

- Be aware of your environment and any possible danger
- Take note of the two nearest exists in any facility you visit.
- If you are in an office, stay there and secure the door
- If you are in a hallway, get into a room and secure the door.
- As a last resort, attempt to take the active shooter down. When the shooter is at close range, and you cannot flee, your chance of survival is much greater if you try to incapacitate him/her.

Call 911 when it is safe to do so!

3. If the active shooter is nearby:

- Lock the door
- Silence you cell phone and/or pager
- Turn off any source of noise (i.e., radios, televisions)
- Hide behind large items (i.e., cabinets, desks)
- Remain quiet

4. If evacuation and hiding out are not possible:

- Remain calm
- Dial 911, if possible, to alert police to the active shooter's location
- If you cannot speak, leave the line open and allow the dispatcher to listen

5. Take action against the active shooter

As a last resort, and only when your life is in imminent danger, attempt to disrupt and/or incapacitate the active shooter by:

- Acting as aggressively as possible against him/her
- Throwing items and improvising weapons
- Yelling
- Committing to your actions

6. How to Respond when Law Enforcement Arrives

Law enforcement's purpose is to stop the active shooter as soon as possible. Officer will proceed directly to the area in which the last shots were heard.

- Officers usually arrive in teams of four (4)
- Officers may wear regular patrol uniforms or external bulletproof vests, Kevlar helmets, and other tactical equipment
- Officers may be armed with rifles, shotguns, handguns
- Officers may use pepper spray or tear gas to control the situation
- Officers may shout commands, and may push individuals to the ground for their safety

7. How to react when law enforcement arrives:

- Remain calm, and follow officers' instructions
- Put down any items in your hands (i.e., bags, jackets)
- Immediately raise hands and spread fingers
- Keep hands visible at all times
- Avoid making quick movements toward officers, such as holding on to them for safety
- Avoid pointing, screaming, and/or yelling
- Do not stop to ask officer for help or direction when evacuating, just proceed in the direction from which officers are entering the premises.

8. Information to provide to law enforcement or 911 operator:

- Location of the active shooter
- Number of shooters, if more than one
- Physical description of shooter(s)
- Number and type of weapons held by the shooter(s)
- Number of potential victims at the location

The first officers to arrive to the scene will not stop to help injured persons. Expect rescue teams comprised of additional officers and emergency medical personnel to follow the initial officers. These rescue teams will treat and remove any injured persons. They may also call upon able-bodied individuals to assist in removing the wounded from the premises. Once you have reached a safe location or an assembly point, you will likely be held in that area by law enforcement until the situation is under control, and all witnesses have been identified and questioned. Do not leave until law enforcement authorities have instructed you to do so.

9. Training Your Staff for an Active Shooter Situation

To best prepare your staff for an active shooter situation, create an Emergency Action Plan (EAP) and include this information in each local Service Area emergency plan, have open and candid discussions concerning what should be done during an Active Shooter incident

and conduct training exercises when possible. Together, the EAP, the discussion and training exercises will prepare your staff to effectively respond and help minimize loss of life.

10. Components of an Emergency Action Plan (EAP)

Create the EAP with input from several stakeholders including local staff, human resources, and local law enforcement and/or emergency responders. An effective EAP includes:

- A preferred method for reporting fires and other emergencies
- An evacuation policy and procedure
- Emergency escape procedures and route assignments (i.e., floor plans, safe areas)
- Contact information for and responsibilities of individuals to be contacted under the EAP
- Information concerning local area hospitals (i.e., name, telephone number, and distance from your location)
- An emergency notification system to alert various parties of an emergency, including:
 - o Individuals at remote locations within premises
 - Local law enforcement
 - Local area hospitals

11. Components of Training Exercises

The most effective way to train your staff to respond to an active shooter situation is to conduct mock active shooter training exercises. Local law enforcement is an excellent resource in designing training exercises.

- Recognizing the sound of gunshots
- Reacting quickly when gunshots are heard and/or when a shooting is witnessed:
 - o Evacuating the area
 - Hiding out
 - o Acting against the shooter as a last resort
- Calling 911
- Reacting when law enforcement arrives
- Adopting the survival mind set during times of crisis

12. Additional Ways to Prepare for and Prevent an Active Shooter Situation Preparedness

- Ensure that your facility has at least two evacuation routes
- Post evacuation routes in common area locations throughout your facility
- Include local law enforcement and first responders during training exercises
- Encourage law enforcement, emergency responders to tour and train for an active shooter scenario at your facility.

Prevention

- Foster a respectful workplace
- Be aware of indications of workplace violence and take remedial actions accordingly

13. Preparing for and Managing an Active Shooter Situation

Leadership should engage in planning for emergency situations, including an active shooter scenario. Planning for emergency situations will help to mitigate the likelihood of an incident.

Leadership Responsibilities

- Ensure effective employee screening and background checks
- Create a system for reporting signs of potentially violent behavior
- Make counseling services available to employees
- Develop an EAP which includes policies and procedures for dealing with an active shooter situation, as well as after action planning.

Facility Considerations

- Ensure building access controls
- Distribute critical items to appropriate staff, including:
 - Floor plans
 - o Keys
 - o Facility personnel lists and telephone numbers
- Coordinate to ensure the physical security of the location
- Assemble emergency/crisis kits containing:
 - Radios
 - o Floor plans
 - O Staff rosters, and staff emergency contact numbers
 - First aid kits
 - o Flashlight
- Place removable floor pans near entrances and exists for emergency responders
- Activate the emergency notification system when an emergency situation occurs

14. Reactions of Supervisors and Administrators During an Active Shooter Situation

Staff and clients are likely to follow the lead of supervisors and administrators during an emergency situation. During an emergency, leadership should be familiar with their EAP, and be prepared to:

- Take Immediate action
- Remain calm
- Lock and barricade doors
- Evacuate staff and customers via a preplanned evacuation route to a safe area

15. Assisting Individuals with Special Needs and/or Disabilities

- Ensure the EAPs, evacuation instructions and any other relevant information address to individuals with special needs and/or disabilities
- Your building should be handicap-accessible, in compliance with ADA requirements.

16. Recognizing Potential Workplace Violence

An active shooter in your workplace may be a current or former employee, or an acquaintance of a current or former employee. Intuitive mangers and co-workers may notice characteristics of potentially violent behavior in an employee. Alert your supervisor or

Service Area administrator if you believe an employee or co-worker exhibits potentially violent behavior.

General Indicators of Potential Violence by an Employee

- Increased use of alcohol and/or illegal drugs
- Unexplained increase in absenteeism; vague physical complaints
- Noticeable decrease in attention to appearance and hygiene
- Depression/withdrawal
- Resistance and overreaction to changes in policy and procedures
- Repeated violations of company policies
- Increased severe mood swings
- Noticeably unstable, emotional responses
- Explosive outbursts of anger or rage without provocation
- Suicidal; comments about "putting things in order"
- Behavior which is suspect of paranoia, "everyone is against me"
- Increasing talks of problems at home
- Escalation of domestic problems into the workplace; talk of severe financial problems
- Talk of previous incidents of violence
- Empathy with individuals committing violence
- Increased in unsolicited comments about firearms, other dangerous weapons, and violent crimes.

17. Managing the Consequences of an Active Shooter Situation

After the active shooter has been incapacitated and is no longer a threat, supervisors and administrators should engage in post-event assessments and activities, including:

- An accounting of all individuals at a designated assembly point to determine who, if anyone is missing and potentially injured
- Determining a method for notify families of individuals affected by the active shooter, including notification of any causalities.
- Assessing the psychological State of individuals at the scene, and referring them to health care specialists accordingly
- Identify and filling any critical personnel or operational gaps left in the organization as a result of the active shooter.

18. Lessons Learned

To facilitate effective planning for future emergencies, it is important to analyze the recent active shooter situation and create an after action report. The analysis and reporting contained in this report is useful for:

- Serving as documentation for response activities
- Identify successes and failures that occurred during the incident
- Providing an analysis of the effectiveness of the existing EAP
- Describing and defining a plan for making improvements to the EAP

19. References

• Active Shooter: How to Respond, U.S Department of Homeland Security, October 2008 available here: https://www.dhs.gov/xlibrary/assets/active_shooter_booklet.pdf

- How to Plan for Workplace Emergencies and Evacuations, U.S. Department of Labor, Occupational Health and Safety Administration, OSHA 3088, 2001.
- Active Shooter Preparedness, U.S. Department of Homeland Security, www.dhs.gov/active-shooter-preparedness
- Active Shooter Preparedness, translated resources when working with non-English speakers available here: https://www.cisa.gov/translated-active-shooter-resources

20. Training

Active Shooter: What You Can Do (IS907), U.S. Department of Homeland Security, Federal Emergency Management Agency, Emergency Management Institute, resources for classroom training available here: https://training.fema.gov/is/courseoverview.aspx?code=IS-907 IS-0907 Active Shooter- What Can you Do - training available on-line at the following link: https://emilms.fema.gov/IS0907/curriculum/1.html



Domestic Violence and Staff Safety

Workplace violence situations can potentially result in serious harm, injury, or death for anyone involved. Child welfare professionals must take precautions when providing service to families experiencing domestic violence, and need to know the risk factors and special safety precautions that may be needed when in the field, especially when working with families, and especially those affected by domestic violence, mental health, and substance use disorders.

Steps to Reduce Risk of Violence for Child Welfare Workers

There are a number of steps child welfare workers can take to make themselves safer during home visits with children and families. It is important to emphasize that violence or the threat of violence against most child welfare workers is rare.

These steps and tips can help workers predetermine safety when planning to meet with families.

- 1. The first set of actions child welfare workers can take is to be mindful of their responses to threats of violence, which can help to reduce their level of stress. These include:
 - Keeping calm using deep breathing techniques;
 - Holding reasonable expectations for themselves and acknowledging that no one is perfect;
 - Working to keep a positive attitude even in a difficult situation;
 - Building an effective personal and professional support system; and,
 - Relying on coworkers and teammates and cultivating a positive relationship with their supervisor, all of which have been shown to reduce fear of violence, as well as to promote clearheaded thinking when faced with threat of violence
- 2. A second set of actions concerns assessing the potential for violence before going on a home visit.

Workers should collect information in order to prepare for the home visit, including assessment of the following questions:

- Have there been reports of violence related to this family? If yes, when and what type?
- Can you describe the neighborhood? A pre-assessment of the neighborhood and the family's home to determine the safety of the surroundings can be helpful.
- Are you aware of any weapons the family might have on the premises?
- What are the family's attitudes toward violent behavior?
- Does the family use physical punishment for their children?
- What is the family's attitude toward the referral and upcoming visit?
- 3. The worker should also call the family to schedule the visit when possible, as this initial phone call al-lows the caseworker to begin to develop a relationship with the family, demonstrate respect, and de-escalate the family's anxiety about the visit, and can also help determine the family's attitude toward involvement with the child welfare system.

- 4. Child welfare workers should avoid giving out any of their personal information, such as a home address or their phone number, to family members with whom they are working with.
- 5. The worker should share any safety concerns with a supervisor before going on the home visit and should let a coworker know where they are going and how long they plan to be there. If there is significant perception of risk of violence, the child welfare worker making the visit should share their schedule with coworkers and their supervisor and arrange a phone check-in with their supervisor or coworker at an appointed time.
- 6. Some evidence indicates that workers might feel safer during home visits if they can go in pairs, particularly during evening visits, visits to a potentially hostile family, or visits by a female worker to a male family member's home. However, this poses the danger of the family feeling "outnumbered" by the visiting workers and being put on the defensive at the beginning of the visit. Thus, when considering whether to make the home visit alone or with another worker, each situation should be evaluated individually.
- 7. Home visits should be made as early in the day as possible to be sure of leaving the family's home during daylight hours and when coworkers and supervisors can easily be reached.
 - Before leaving the office, workers should leave a map and directions to the family's home with coworkers or their supervisor;
 - Make sure mobile phones are fully charged;
 - When arriving at the family's home, workers should take common sense precautions, such as parking their car in a well-lit, easily accessible area, locking all valuables in the trunk, and scanning the immediate environment for any safety concerns; and,
 - If at any time, the worker feels unsafe, he or she should leave the environment immediately.
- 8. Before entering the family's home child welfare workers should:
 - State clearly who they are and the reason for the visit;
 - Wait to be invited inside before entering the home and should not take a seat until they are invited to do so by a family member; and,
 - Workers should try to meet in areas of the home that minimize danger to their
 physical safety, such as the living room, and avoid isolated rooms such as bedrooms
 or basements.
- 9. Child welfare workers should be aware that while some families will see their visit as an expression of concern and a welcome offer of assistance, other families may view their visit as a threat. It is important for workers to assess:
 - The family members' mood and body language;
 - Learn to trust their gut feelings when evaluating family members' State of mind and the potential for violence during the visit;

- Workers should take a collaborative approach with families during the home visit, and should provide ample opportunities for family members to present and discuss their points of view during the visit; and,
- Ensure that all family members are treated with dignity and respect at all times during a home visit.

Resources:

- Child Welfare Information Gateway Resources for Domestic Violence Safety
 - https://www.childwelfare.gov/topics/systemwide/domviolence/caseworkpractice/worker-safety/
 - o https://library.childwelfare.gov/cwig/ws/library/docs/capacity/Blob/115592.pd f?r=1&rpp=10&upp=0&w=+NATIVE(%27recno=115592%27)&m=1
- Family to Family, 2002
- Southern Area Consortium of Human Services, 2016
- National Association of Social Workers, 2013
- Kim & Hopkins, 2017
- Newhill, 2012