

**DHHS – Parent and Caregiver Citizen Review Panel
Annual Report: October 1, 2023 – September 30, 2024
Submitted: October 22, 2024**

This report addresses the actions taken to satisfy the scope of services for facilitation of the Parent and Caregiver Response Citizen Review Panel (CRP) as outlined in the agreement between the Nebraska Department of Health and Human Services (DHHS) and Nebraska Children and Families Foundation (NCF). This report fulfills the annual reporting requirement of the 2023-2024 contract cycle, and includes activities undertaken to facilitate and maintain the Parent and Caregiver CRP recommendations from 2023 and implemented from Oct 1, 2023, to September 30, 2024.

Scope of Work: Provide administrative support to the Nebraska Child Abuse Prevention Treatment Act (CAPTA) Citizen Review Panel for Parent and Caregivers.

Nebraska Children provides staff support to facilitate meetings of the Parent and Caregiver CRP. This support includes arranging meeting locations, dates, times, agendas, minutes, copying and arranging for childcare when necessary.

Scope of Work: Assure that the Panel is composed of volunteer members who are broadly representative of the diversity in the state and includes members how have expertise in the prevention and treatment of child abuse and neglect and may include adult former victims of child abuse and neglect.

Nebraska Children and Families Foundation continues to be grateful for the opportunity to administer the Caregiver Citizen Review Panel (CRP) and provide recommendations to the Nebraska Department of Health and Human Services (DHHS). After making a change in the 2022-23 group, we continued the work with lived experience experts from across the state. The members are also part of Nebraska Children’s Pregnant and Parenting Workgroup Advisory Committee. This will allow more specialized training of the participants and better consistency of the outcomes every year.

Scope of Work: Provide Support for meetings that occur at least once every three months.

Starting in the summer and going through early autumn, members of the panel met to discuss issues facing parents and caregivers with the goal of providing recommendations to the Department of Health and Human Services. The group includes representatives from the education, human services, health department, community organization and residents with lived experience.

The group met four times starting in June 2023 and wrapped up in September. The group met in person on July 10 and virtually on June 20, August 29 and September 12. The group also met on Sept. 26 to go over the recommendations and make final edits.

The minutes for the four meetings can be found in Appendix A.

Scope of Work: Assure that the CRP examines the policies and procedures and practices of the State and local agencies and where appropriate, specific cases, evaluate the extent to

which the State and local child protection system agencies are effectively discharging their child protection responsibilities in accordance with state plan, the child protection standards and any other criteria that the panel considers important to ensure the protection of children, including a review of the extent to which the State and local child protective services system is coordinated with the foster care and adoption programs.

This year, the Citizen Review Panel met five times from June to September to produce recommendations for DHHS that represent our local community's voices to lift up the immediate concerns our regions have been facing about the child welfare system.

The group started with six members of the NCFE Pregnant and Parenting group. This group includes people with lived experience in foster care or juvenile justice and are currently parenting.

The final recommendations include teaching financial literacy for foster parents, offering mental health for foster families and encouraging caseworkers to take more vacation time.

Recommendations:

Recommendation #1 – Financial Literacy for Foster Parents

It is vital to teach foster parents financial literacy so they know and understand how much money they receive from the state will go toward direct expenses for the child who lives with them. One of the hardest things to talk about is money. It's such a hard conversation but it's extremely needed. We're paying individuals to help take care of foster children.

This education should start during foster parent training. Budget management should be part of the lessons included, and it should be a priority to teach them how to budget for their increased expenses. While they could pocket some of the money from the state, most should be directed toward the foster child's well-being, needs and self-expression, including clothing, hygiene, toiletries and hair care.

Because these are young foster children, they may grow out of the clothes quickly. There's no reason why any child in care should have clothes that they've grown out of, clothes that are too big because they are hand-me-downs and clothes that they are uncomfortable in. Understanding that self-expression through clothing may cause a child to not only look good but feel good and develop a better sense of self-worth and self-confidence.

Hair care is another vital form of self-expression and cultural identity. If the foster parent can't care for the child's hair, they should put money towards taking the child to a salon or barber to ensure they feel comfortable in themselves. In addition, the foster child needs access to personal hygiene items to promote general well-being and social acceptance.

These examples are just some of the considerations that parents and caregivers must make when caring for a foster child. By budgeting properly, they should be able to meet the child's needs through the payment they receive from the state.

Recommendation #2 – Offer mental health supports and check-ins to foster families

Therapy and mental health services for foster parents can help them and other household members adjust to the changes of having new members in the household. Foster youth sometimes have unprocessed trauma, and while caring for the youth, foster families may also become emotionally impacted by the stories that they hear. It can also be helpful for families to adjust to having multiple temporary connections and adjustments to the household. To ensure the best possible outcomes for foster youth, they need to be placed with caregivers who prioritize mental health.

DHHS could also help create a supportive environment by offering annual mental health evaluations for the caregivers. Mental health evaluations would help gauge whether foster parents may need to take time off before taking in another youth or if they may need some additional support to continue caring for foster youth. This doesn't have to rise to the level of a formal therapy session. It could be an informal check-in with the caregivers to ensure their needs are being met and to see if DHHS can offer any other support or training to help them care for foster children.

DHHS should also check in after a child is removed or another one is placed in the home. This will help provide closure before they take on another foster child and help avoid burnout. The caseworker can learn how the placement went well or what caused the removal. This will allow DHHS to learn what works for the family and what type of placement would work in the future with the family.

If a newly placed foster youth is offered family therapy with the entire family, it will create a more supportive environment for them to live in. When a new foster child moves in, family therapy will help create a smoother transition for the foster youth, especially if other children are in the house. The therapy will introduce them to the family dynamics and also the norms and expectations of the house. This will also make them feel like they are part of the family and not on the outside trying to fit in.

Recommendation #3 – Vacation Time and Workload for Caseworkers

This panel recognizes the critical role that DHHS caseworkers play in safeguarding the children and families within our communities. However, we also acknowledge the significant stress and burnout that many caseworkers experience due to heavy workloads and the challenges associated with taking time off. To address these issues, we recommend implementing strategies to better support caseworkers in managing their workloads and utilizing their vacation time efficiently.

It is essential to create a more manageable workload for caseworkers. This could involve evaluating case assignments and redistributing cases among staff to ensure no caseworker is overwhelmed. Additionally, the establishment of a system for regular check-ins and support from supervisors or other upper management could help caseworkers voice concerns about their workload and seek assistance when needed. By fostering an environment where caseworkers feel comfortable discussing their challenges, we can promote better mental health and job satisfaction, ultimately benefiting the children and families they serve.

To further this goal, we encourage DHHS to promote a culture that prioritizes the well-being of its caseworkers by promoting the use of vacation time. Caseworkers often hesitate to take time off due to fear of falling behind, the difficulties of catching up upon their return, or the guilt of requiring coverage due to vacation leave. To alleviate this concern, we recommend developing a structured plan that allows for seamless case management during a caseworker's absence and provides additional support to caseworkers taking on additional assignments from coworkers taking time off. By ensuring caseworkers receive adequate resources and support, we can create an environment where taking time off is seen as necessary, beneficial, and manageable for everyone.

We emphasize the importance of fostering a workplace culture that actively supports and encourages using vacation time. Time away from work is essential for recharging and maintaining mental health, leading to improved productivity and focus. When employees feel empowered to take their vacation time without guilt or concern, it enhances their overall well-being and job satisfaction. We urge DHHS to invest in initiatives that promote this culture, including workshops on the benefits of taking breaks and strategies for managing workloads during absences. In a dream world, DHHS would have several extra caseworkers who could fill in for others while they are taking vacations or breaks from work. By prioritizing the well-being of caseworkers, we can significantly contribute to fostering a healthier work environment that benefits both staff and the children and families they serve.

Appendix A Meetings Minutes

June 13, 2024

Attending: Lincoln, Sophia, Alexis, Emma, Azar, Julia

- Connection
- Citizen Review Panel (Lincoln)
 - NCFE has a contract with DHHS to provide recommendations each year
 - Parent and Caregiver CRP
 - Recommendations around policies, practices, and anything that could help the lives of parents/caregivers
 - Past examples:
 - Create a glossary for the family guidebook for parents and families when they are introduced to Child Protective Services
 - Integrate entire families of both families during kinship process - make sure all parties are involved
 - Examining recidivism and prevention
 - Reviewing fingerprint background process for childcare providers
 - Examine Title XX process
 - Increased awareness of services available - especially for non-English speaking residents
 - Submit in October and have a meeting with DHHS to discuss recommendations
 - Invite others to join the group - cap at 10 individuals
 - Things to think about:
 - Imagine your idea world/interactions with DHHS
 - What would be different

- What would be better
- Final review/approval of [Organizing Documents](#)
 - Sophia will adjust the new NC Charter to reflect what is in the organizing documents and share with the group for feedback and approval.
- Structure of the group
 - Time to expand the group - recruitment
 - Invite 2 people to the group
- Presentations
 - We are postponing this for now as I am gaining clarity from NC on direction for this group. I will continue to share that the group has a strong interest in community involvement in addition to policy/advisory roles.
- Next Steps
 - Sophia will adjust the new NC Charter to reflect what is in the organizing documents and share with the group for feedback and approval.
 - Group will focus on Citizen Review Panel (CRP) work for the next four meetings. This will be facilitated by Lincoln. We can also include work for the group in the agenda - we will not be adding additional meetings for CRP work.
 - Meeting schedule (Sophia will send calendar invitations) this can be adjusted if needed
 - Thursday, June 20 @ 5:00pm - via Teams
 - Wednesday, July 10 @ 5:00pm - IN PERSON - Omaha office
 - Thursday, August 1 @ 5:00pm - via Teams
 - Thursday, August 15 @ 5:00pm - IN PERSON - Omaha office
 - Thursday, August 29 - may need to be rescheduled due to NCCFF Learning Day
 - Thursday, September 12 @ 5:00pm - IN PERSON - Omaha office - Sophia is unavailable, but may be fully dedicated to CRP

June 20, 2024

Attending: Sophia, Lincoln, Emma, Sydney, Julia, Alexis H, Alexis W.

- Connection
 - Sydney - joining CRP, 3 year old son, worked in childcare for 10 years
 - Alexis H - joining CRP, from Beatrice
 - Alexis W - has been in Pregnant and Parenting work group, wants to help make a difference
 - Emma - from North Omaha, lives in Beatrice, believes we can make a difference
 - Sophia - Nebraska Children point person for Pregnant & Parenting
 - Lincoln - Nebraska Children point person for CRP
 - Julia - also part of NCFY Youth Advisory Board
- Parent & Caregiver CRP
 - Overview & Goals
 - Contract with DHHS to provide feedback on how to make their experiences and support of child and parents/caregivers involved in process
 - There is also a youth oriented CRP
 - GOAL - end of September want to turn in 3-4 recommendations to DHHS on how to do job better and/or things they can change
 - Focused largely on Child Protective system
 - Today - brainstorming, next meeting finding themes and what we know/don't know, third, contact with DHHS, fourth, writing
 - BRAINSTORMING
 - In a dream world where DHHS exists, how do they interact with parents and caregivers?
 - Only have interaction if absolutely necessary (life in danger/last resort/potential danger to child)
 - Not having kids separated/taken from parents
 - Parent are struggling primarily because of financial instability and children are taken away
 - Would hear out parents for why they are doing things parenting (how they were raised and if same/different)

- Also involve parents in decision making (ex: what daycare)
- Parents have representation that care and is capable, someone that knows them and knows the child
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- What do you wish DHHS does that they would do better
 - Look into people that are foster parents/adopt better (mental/emotional abuse)
 - Stop this from happening: Foster parents that adopt, put them back in foster care.
 - Ongoing training for foster parents
 - Therapy for foster parents
 - Look into neighbors/extended family of foster parents
 - Help caseworkers from being overworked/burnt out
 - Trust parents regarding truancy (especially illness) related cases
 - Alternatives to HHS getting involved when less serious concern (HHS involvement can be traumatic in itself for those with previous experience)
- Have you had any positive interactions with DHHS?
 - Caseworker going out of way to support/help get child back (just wish there were more)
 - Relieved after first DHHS interaction. Caseworker understood.
- How can DHHS do a better job for parents?
 - Expand access to resources/understanding of resources
 - Offer resources initially
 - More therapy access (and financial support) for parents (and everyone)
 - There needs to be more childcare availability
 - Childcare provider can't reach out to DHHS on behalf of family for Title XX paperwork

- What kind of supports and services do parents need?
 - More childcare availability
 - Transportation (especially in rural areas)
 - Parenting classes (highly suggested)
 - Role models
 - Co-parenting classes/support
 - Communication classes/support/guidance
 - Healthy relationships class
 - One thing you can tell DHHS what would it be
 - Don't rush
 - Please break the whole system and rebuild it
 - Asking more of kids in foster care (what can be done differently, their insight)
 - The people that have worked me have given me a good experience
 - Simplify the childcare provider process
 - Oxford houses (voluntary, sober houses for people getting out of substance use/jail). Have a place like that for youth who age out. (Jacob's place in Omaha)
- Next Steps
 - Schedule (dedicate meetings to CRP? August 15?)
 - Wednesday, July 10 @ 5:00pm - IN PERSON - Omaha office
 - Thursday, August 1 @ 5:00pm - via Teams
 - **Wednesday, August 14 @ 5:00pm - IN PERSON - Lincoln office**
 - Thursday, August 29 - may need to be rescheduled due to NCFE Learning Day
 - Thursday, September 12 @ 5:00pm - IN PERSON - Omaha office - Sophia is unavailable but may be fully dedicated to CRP

July 10, 2024

Attending: Sophia, Lincoln, Emma, Alexis W., Sydney, Julia

- Parent & Caregiver CRP
 - Review
 - Themes we can rally around - [see brainstorm here](#)
 - Training and therapy
 - Therapy for foster parents/parents
 - Support for family collaboration
 - Continued mandatory training for foster parents (like continuing education)
 - Place for foster parents to go to ask questions, get reassurance, help with something they've never experienced
 - Standardize foster care agencies
 - More community based placements (kinship or trusted adult)
 - Financial help for parents/families
 - Support for parents/families rather than to foster parents
 - Childcare costs and copays
 - Capacity of caseworkers (caseloads, vacations/time off, paid therapy, prevent burnout)
 - Listen more to the family and/or child
 - What don't we know - questions we want to ask someone from DHHS
 - What is the actual caseload for caseworkers?
 - How many caseworkers actually take vacation?
 - Turnaround for people vacating positions
 - What is grievance policy/discipline policy for caseworkers?

- What does it take to become a foster parent? What trainings are required? minimum standard?
- What are the standards for the foster care agencies?
- How is foster parent pay decided? What are they getting?
- What are state resources vs agency resources vs community resources?
- Information on success rates for successful transitions out of care?

August 29, 2024

Attending: Sophia, Sydney, Alexis, Lincoln, Emma

- Connection
- Parent & Caregiver CRP
 - Review: themes we can rally around - [see brainstorm here](#)
 - Training/Education/Therapy
 - Training for foster parents and therapy
 - Therapy with family and foster family
 - Continued mandatory training for foster parents (like continuing education)
 - Therapy for foster parents/parents
 - Support for family collaboration
 - Place for foster parents to go and ask questions, get reassurance, help with something they've never experienced
 - Financial Support
 - Financial help to parents instead of placing in foster care where the state pays people
 - Childcare costs and copays
 - Find more kinship or trusted adult - community-based placements

- Standardize foster care agencies
- Capacity of caseworkers, vacations/time off/paid therapy to prevent burnout
- Review: Questions to ask DHHS
 - Alexis - What is the actual caseload for caseworkers?
 - Can vary. Several kinds of caseworkers -
 - initial assessment- meet family, see what is going on, talk with family, 30 days to complete investigation - 12 max (4 max while in training status)
 - Ongoing caseworks - when children are removed/need services/safety threat and have safety plan - up to 17)4 max in training status)
 - Also dependent if in home or out of home. 5 kids in-home is a case of 1. If children are removed it is a case of 5.
 - How often are these numbers in compliance? Shayla can look for that information and get back to us.
 - Emma - How many caseworkers actually take vacation? Do they take the full amount of vacation?
 - You earn time as you go. Every pay period earn xx hours of vacation. Personal experience as being a worker and being a supervisor: taking vacation is stressful. You have to make sure everything is taken care of while you are gone. When you come back there is so much that feels blown up and need to catch up. Feels easier to not take vacation. Mind is generally also with work while on vacation.
 - Some workers take vacation religiously. Some take no vacation. Kind of a 50/50 if they take it or not.
 - Is there a good workplace culture encouraging employees to take vacation? Shayla thinks so. But it can be difficult. There is still the expectation of having coverage while on vacation. Everyone feels bad for putting their stuff on someone else.
 - Does someone covering while others on vacation count towards max? No. they are not assigned the cases, just covering.
 - Sydney - Turnaround for people vacating positions

- Turnaround is never ending. There are people who have been there forever and people who have been there a few months. Some people come and go. They think the job is something that it's not. They think its coming into homes and providing services for families. It's not. The job is middle man - documenting needs, what happened in home, law enforcement notes, reasons children are not safe in the home. A lot of people don't like us coming into their homes. It's stressful. People threaten you and say negative things to you a lot. Its' a really hard job with not much thanks. Turnaround will probably forever be high. There has been an increase in pay over the last few years. Hasn't seemed to impact people staying in caseworker position. People with really thick skin are the ones that stick it out the longest.
- Have you tried to implement anything else that makes workers feel more appreciated? Wellness app - calm - get for free. Reimbursed for gym memberships. EAP counseling, etc. A lot of benefits for workers. You're away from your family a lot - a lot of personal guilt.
- Alexis - What is grievance policy/discipline policy for caseworkers?
 - All is completed through HR. They would get in touch with HR.
 - A parent or child can file a grievance - concerns the caseworker is not following policy/procedure or Nebraska law with their case. There is a link on public website to fill out info. Name, what's going on. Shayla or Morgan will call to follow up. Schedule a meeting with the worker, supervisor, administrator, and service area administrator. Making sure following policy/procedure. Call back person who filed grievance and inform what's going on and send letter with that information as well.
 - Discipline for caseworker. All through HR. First level is performance improvement plan. Notice of Action. (several before termination.
 - How do parents know that's the grievance process? For younger children or someone without internet access how do they file a grievance? All families should be given the family guidebook. The rights families have and grievances are included in the family guidebook. Talks about the website. Can contact Jarren, the family advocate - she would give direction. Can fill out the form, send an email, take by phone.

- Emma - What does it take to become a foster parent? What trainings are required? minimum standard? Are there requirements for “continuing ed”/training?
 - Standard trainings for all foster care agencies and DHHS
 - Must have 21 hours of pre-service training before can become foster parent. (TIPSMAPP) Have to have a home study completed, home check, car seat, human tracking, reasonable prudent parenting standard (when foster parent with foster children-we don’t want them to feel different than any other child. Example: foster parent can allow foster child to go to a birthday party without background checks for everyone), suicide prevention
 - Every year 12 hours of training to renew
 - Do the children in the house go through any training/program? No. Children older than 16 have to have a background check.
 - How often do you check what other adults or family members that are around get background checks? How often do you check to see if any new adults have moved in? Every month the caseworker has to visit in the home. Would hope the child would say something if someone who shouldn’t be in the home. Whatever agency is sponsoring the foster care placement also has to visit once per month. The home study is extensive. Many pages about the lives of the adults in the house.
- Sydney - What are the standards for foster care agencies?
 - What do the agencies need to do to become foster care agencies?
- Alexis - How is foster parent pay decided? What are they getting?
 - Nebraska Caregiver responsibility tool. 10 questions. Sit with foster parent and agency/whoever supports home. Questions about what they will have to do to help this child every day. Live skills, behavior, family relationships, medical. If they are high needs they will score higher. Higher the score, the higher amount paid per day. Lower score will be around \$26/day; highest need is \$108/day.
 - Re-evaluated every six months or if there is a change of placement
 - Foster parent teaches mom life skills would be a higher need. Child with a higher medical need (OT/PT/appointments). Might be a middle

level. Teaching a 16 year old life skills. (how to drive, cook, bank account)

- Emma - What are state resources vs agency resources vs community resources? (for caregivers)
 - Everyone can access community resources - sometimes community resources won't let you utilize if you're already getting resources from other sources (state or agency)
 - Some resources can cover somethings others can't
 - State - rent, gas, groceries
 - community/agency - may be able to help with car
 - Figure out a lot of this in community partner meetings
- Sydney - Information on success rates for successful transitions out of care?
 - Shayla doesn't have information on this one. Can you clarify
 - Adopted, reunification
 - How well is this working? Permanency.
 - Shayla says when she thinks of success she thinks of children reunifying with their parents and not going back into care
 - Recidivism rates
 - Reunification rates
 - Come into care and age out
 - CAC annual data - Kids Count Nebraska
- Conversation with DHHS
 - Recommendation is to steer clear from kinship - already a recommendation from last year
- Next Steps
 - September 12 - will write recommendations - you'll get homework

Sept. 12, 2024

Attending: Lincoln, Sydney, Alexis

- Talked about Shayla's visit last month.
- Ideas for recommendations:
 - Vacation time and workload (Sydney)
 - Don't let poor company culture get in the way of a recommendation
 - Still important
 - Talked about financial compensation (Alexis)
 - Could offer financial literacy course as part of foster parent training
 - Do they still have foster care vouchers for clothing/essential items?
 - Will send to Shayla.