Nebraska LB 1173
Reimagining Child
and Family WellBeing
in Nebraska
October 19, 2023



## Housekeeping

- I. If you haven't yet, please sign in. We will circulate the sign-in sheets.
- II. Mics are throughout the room and will capture side conversations, even whispers.
- III.Identify yourself when speaking for the recorder and virtual attendees.

# Workgroup Member Roll Call

## Statutory Member Roll Call

- I. Director of Behavioral Health of the Division of Behavioral Health or the director's designee: **Tony Green**
- II. Director of Children and Family Services of the Division of Children and Family Services or the director's designee: Tony Green
- III. Director of Developmental Disabilities of the Division of Developmental Disabilities or the director's designee: Tony Green
- IV. Director of Medicaid and Long-Term Care of the Division of Medicaid and Long-Term Care or the director's designee: Kevin Bagley
- V. Director of Public Health of the Division of Public Health or the director's designee: **Charity Menefee**
- VI. Commissioner of Education or the commissioner's designee: **Commissioner Brian Maher**
- VII. State Court Administrator: Corey Steel
- VIII. Representative of the Supreme Court appointed by the Chief Justice: **Corey Steel**
- IX. Representatives from each federally recognized Indian tribe within the State of Nebraska, appointed by each tribe's Tribal Council or Executive Committee:
  - I. Miskoo Petite, Winnebago Tribe
  - II. Danielle LaPointe, Santee Sioux Tribe
  - III. Alexis Zendejas, Omaha Tribe
  - IV. Stephanie Pospisil, Ponca Tribe

## Agenda

- I. Call to Order
- II. Approval of Previous Month
- a. Minutes
- b. Status Report
- III. Review Draft Practice Model, John Stephen, The Stephen Group
- IV. Review Draft Finance Model, Dave DeStefano, The Stephen Group
- V. Planning for Public Presentation
- VI. Adjourn

## Approval of Minutes

## Status Report Review

# Review Draft Practice Model John Stephen The Stephen Group

Intersectoral Objective for the Child Welfare Practice Model

We Believe that the lives of children & families can be enhanced by building strong partnerships for child & family well-being transformation that invests resources in effective & innovative ways.

## MODEL MISSION, VISION, GUIDING PRINCIPLES, AND CORE VALUES

MISSION	VISION
Engaging communities to support families so they thrive, & children are safe.	Every child in Nebraska has what they need to thrive in a safe, stable, & permanent home, sustained by nurturing relationships & strong family & community connections.  We will strengthen families in their communities by safely reducing the need for intervention & system involvement by aligning resources more effectively.

## MODEL MISSION, VISION, GUIDING PRINCIPLES, AND CORE VALUES

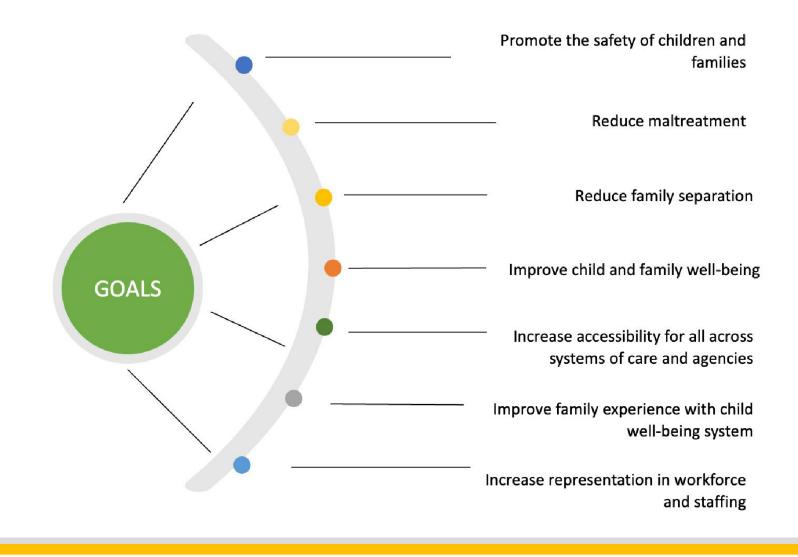
#### **GUIDING PRINCIPLES**

- ♦ Authentic Partnerships: A child well-being system that collaborates across executive branch agencies, the court system, probation, & community partners, & is designed & built with the voices of persons with lived experience & their communities, working in partnership with individuals & families.
- Compassion, Empathy & Humility: Demonstrating compassion, empathy, & humility to design systems & services that reflect & value individuals, traditions, & the personal experience of those with whom the child well-being system serves.
- Honesty & Transparency: Being open, straightforward, & truthful. This involves honesty about policies, processes, expectations, & limitations influencing people's experience & outcomes. This also involves openness between partners about system performance, acknowledging strengths & challenges, adapting when necessary, & publicly sharing information about steps to address areas needing improvement.
- ♦ Empowerment: Empower staff, individuals, families, & communities by ensuring all have the information & tools to achieve success.
- Innovation: Cultivating a learning, adaptable environment through feedback, data & innovative ideas to improve efficacy & outcomes.

#### **CORE VALUES**

- Collaboration: A child well-being system that involves state partners, tribal Nations, community & families collaborating to address the wellbeing & best interests of children.
- Children, Youth, & Families: Children & youth should live in a safe, nurturing, & supportive family environment. Families are the best place for children & youth to grow up & family connections should be maintained whenever possible.
- Respect: Honor & support for the inherent dignity & worth of each person served & each partner. Demonstrate empathy & kindness in all interactions. Value lived experience & diverse opinions in the work to transform & improve the child well-being system in Nebraska. Be proactive in communication. Recognize that individuals & families are experts in their own lives, listen to them about what they need to be safe & thrive.
- Accountable: A child well-being system that is responsible, transparent, & dependable in all its actions, & establishes clear performance standards, & support for the workforce, communities, & families it serves to achieve success.
- ♦ Excellence: High-quality service is a priority in every interaction with individuals, families, partners & communities, & a system wide commitment to identifying & acting upon opportunities to improve its performance & outcomes deepen partnerships & strengthen communities.

## **MODEL GOALS**



## **MODEL STRATEGIC PRIORITIES**



Build systems designed to achieve positive outcomes



Partner to end silos & fragmented approaches to build a continuum of care



Maximize and Rebalance Available Funding



Improve relationships between families, children, & family well-being system partners



Elevate voices of those with lived experiences

## NEBRASKA CHILD WELFARE MODEL OF PRACTICE

☐ WORKFORCE	SERVICES TO CHILDREN AND FAMILIES
☐ PREVENTION	☐ WELL-BEING
FAMILY ENGAGEMENT	WHEN CHILDREN ARE UNABLE TO REMAIN IN THEIR HOME
INTAKE AND ASSESSMENT—CHILD SAFETY FIRST, AND FOREMOST	☐ PERMANENCY
☐ TEAMING	☐ TRANSITION FOR OLDER YOUTH

### **MODEL ENGAGEMENT STRATEGIES**

**Engagement Strategies to Support Community Involvement in Child Welfare System Transformation** 

- Strategy 1: Transform Child Welfare System through Communitybased Prevention Services
- Strategy 2: Ensure Child Welfare and Related Systems and Services Reflect Communities Served
- Strategy 3: Strengthen the Role of Tribal Liaisons at DHHS
- Strategy 4: Address Disproportionality by Engaging Community-Based Organizations

Strategies That Strengthen Relationships Across Court System, Probation, Executive Branch Agencies, State Department of Education, and Community Partners

- Strategy 1: Continue the Three-Branch Collaboration into Implementation
- Strategy 2: Develop Partnerships with Schools to Transform the Child Welfare System
- Strategy 3: Develop Intersectoral Relationship with Housing and Homeless Initiatives
- Strategy 4: Increase Intersectoral Training Opportunities
- Strategy 5: Build Authentic Collaboration With All Sectors and Stakeholders
- Strategy 6: Shared Accountability for Children and Families
- Strategy 7: Expand Intersectoral Efforts for Parents with Pre-natal Risk or Children 0 to 5 Years of Age
- Strategy 8: Coordinate Intersectoral Partners to Better Serve Transition
   Youth
- Strategy 9: Intersectoral Collaboration to Promote and Support Permanency

### **MODEL ENGAGEMENT STRATEGIES**

#### **Strategies That Support Integration Across Agencies**

- Strategy 1: Implement Best Practice Strategies for Cross-over Youth
- Strategy 2: Align Resources Across Agencies to Best Serve At-Risk Families and Children
- Strategy 3: Establish Multi-Disciplinary Team-Based Approaches to Collaboratively Support Families
- Strategy 4: Enhance Collaboration, Communication and Partnership with County Attorneys
- Strategy 5: Build Leverage DHHS Tribal Liaisons for Intra-agency Collaboration
- Strategy 6: Shared Accountability for Children and Families

## **Engagement Strategies That Support Data Collection and Outcome Monitoring**

- Strategy 1: Collect Data that is Usable by Practitioners in Real Time
- Strategy 2: Technology Systems Should Operate within a Master Data Management Strategy
- Strategy 3: Implement a Comprehensive Child Welfare Information System (CCWIS)
- Strategy 4: Leverage Existing Public Data to Inform Practice
- Strategy 5: Build Leverage DHHS Tribal Liaisons for Intra-agency Collaboration
- Strategy 6: Shared Accountability for Children and Families

# Review Draft Finance Model Dave DeStefano The Stephen Group

## NEBRASKA CHILD WELFARE FINANCE MODEL

☐ PRIORITY AREA 1: ENHANCE TITLE IV-E FEDERAL FINANCIAL PARTICIPATION

☐ PRIORITY AREA 3: PROVIDER RATES AND CONTRACTS

☐ PRIORITY AREA 2: CROSS-SYSTEM SYNERGY
AND COLLABORATION

☐ FUNDING THE EXPANSION OF PREVENTION SERVICES IN NEBRASKA

### **FINANCE MODEL STRATEGIES**

#### Priority Area 1: Enhance Title IV-E Federal Financial Participation

- Title IV-E Income Eligibility: AFDC Lookback
- Revenue Maximization State Law and Department Policy
- Title IV-E Eligibility Documentation
- Licensing of Relative & Non-Relative Caregivers
- Incentivizing Licensing of Relative Caregivers
- Children Placed Through Letters of Agreement with Shared Living Providers
- Title IV-E Administrative Cost Claiming
- Leverage Training Opportunities to Create a Pathway to Child Welfare Employment
- Implementation of a Modern Child Welfare Information System
- Fully Implement Title IV-E Claiming for Prevention Services

#### **Priority Area 2: Cross-system Synergy And Collaboration**

- High Quality Legal Representation of Children and Families
- Title IV-E Claiming for Juvenile Probation Services
- Create Medicaid Blended and/or Braided Funding Strategies for FFPSA Interventions
- Provision of Concrete and Economic Supports
- Investment of TANF Surplus
- Education Collaboration to Provide Early Intervention, Prevention, and Crisis Intervention
- Community Response Pathway
- Medicaid Funded Services and 1115 Waivers
- Leverage Increased Public Grant Funding for Home Visiting Services
- Reducing the Impact of Benefits Cliff to Support Movement to Self Sufficiency
- Development of Provider Workforce Capacity

## **FINANCE MODEL STRATEGIES**

#### **Priority Area 3: Provides Rates and Contracts**

- Provider Rate Setting Process and Frequency
- Tribal Contracts and Funding
- Performance-Based Contracting
- Complete an Enhanced Review of Placements in Tier 4 and Higher Levels of Foster Care
- Technology Enhancements to Support Monitoring and Reporting of Provider Outcomes

#### **Funding the Expansion of Prevention Services in Nebraska**

- Increased Title IV-E Administrative Claiming
- Out-of-Home Care Expenditures

## **GENERAL DISCUSSION**

## TO SUBMIT FURTHER FEEDBACK

info@stephengroupinc.com

## **Planning for Public Presentation**

## Upcoming 1173 Events

## Workgroup Meetings November 7