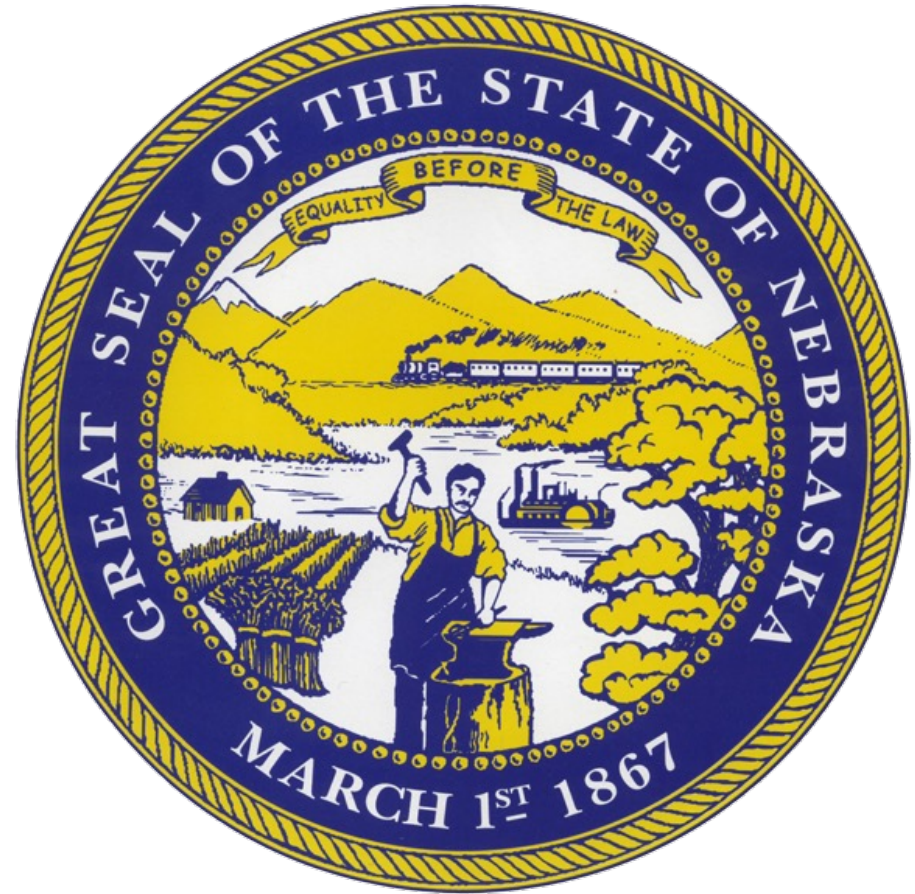


Nebraska LB 1173
Reimagining Child
and Family Well-
Being
in Nebraska



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. Themes from Lincoln Community Forum, John Stephen, The Stephen Group
- IV. Early Childhood and Early Identification Programs, Zainab Rida and Lane Carr, Department of Education
- V. LB 1173 Final Report Framework, The Stephen Group
- VI. Workgroup Feedback/Participation/Decision Making Process

Approval of Minutes

Status Report Review

Themes from Lincoln Community Forum/Stakeholder Meetings

John Stephen
The Stephen Group

Themes

- Strong partnership coordination and trust among CFS, Law Enforcement, and Courts before a decision to remove a child/youth from the home
- Prevention services at community level would increase trust and family receptivity for services
- Need to work with schools on reforming process for removals based on educational neglect
- Opportunity for increased coordination and communication between MCOs and CFS case workers based on MCO requirement to identify CFS-eligible children/youth as a High Risk Population with an assigned MCO case manager
- Lack of available access to SUD treatment services in Lincoln area, including inpatient and outpatient
- Providers unwilling to accept Medicaid - issues with fee schedule and paperwork
- Assisting Pediatricians and PCPs with gaining knowledge on how to access available services in their communities for struggling families they serve could help them identify families in need and connect them to a Services Connector, such as the Community Collaboratives or direct community/faith based SDOH providers
- Addressing CFS disproportionality in the CW and JJ systems needs to be addressed from the perspective of poverty. Poverty alone can't be a reason for removal
- De-stigmatizing asking for help can help with Family Engagement. "It is not us vs. them – it is us."
- There is a need for Family Visitation Centers – safe spaces – across smaller towns and tribal communities, especially when reunification is the goal

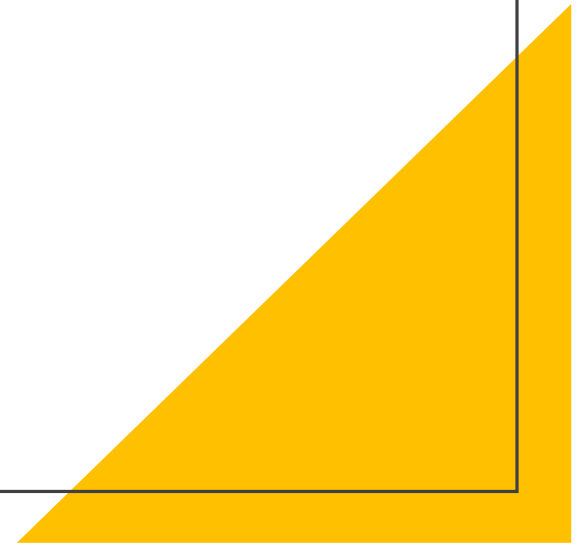
Themes

- Look at who else could be “Visitation Supervisor” beyond the current system.
- Need to find safe places/services for crisis stabilization for children/youth who do not meet inpatient criteria but cannot go home for short periods of time.
- Enhanced family finding, assess to community enhanced support could reduce removals/family finding especially important in Tribal cases.
- Parents don’t want system involvement. Showing parents why EDN services can be a good thing by breaking down longer terms positive outcomes could help increase the number of families accepting EDN services. Parents who have used EDN services could serve as peers
- There is need to get resources to non-system involved caregivers needed at the community level
- The Hot Line can do more effective due diligence in obtaining collateral information before accepting cases for investigation. Cultural considerations on the use of the screening tools could help with disparities
- Gap in services for youth who are 19 and 20 with developmental disabilities. They should not have to wait until age 21 to receive adequate services. Should look to gap service coverage until youth is 21. Some enter the CFS system “just to get services”
- Increase access for Evidence-based parenting classes for parents and needs to be intentionality on what parents are asked to do
- Consider including community response in the future for some Alternative Response cases. AR is still DCFS knocking on the door

Themes

- Develop path that is alternative to CW system asking parents to voluntarily participate in available services for their children (ex: MCOs, EDN, Head Start, HFA)
- DHHS should share available data on state wards across divisions to enhance child well-being (ex: adoptions/disruptions)
- Important medical histories should be shared with CFS outside manual process for state wards
- Provider adequacy and availability should be shared in one place with record from Medicaid that can be the basis for a conversation
- Need more engagement from different state agency partners, MCOs and community based service providers prior to a youth being discharged from YRTS. Need for more effective transition planning process with many partner agencies working together to help youth transitioning out
- Need for more focused effort on youth Wards transitioning out of foster care by having all entities come to the table and offer support early on in the process (MCOs, HUD, Local Housing Authorities, Education/Labor/DMV, communities, private sector/ community leaders. (Ex: Community leaders connecting to landlords in the community to open slots for youth – intersectoral process)
- Drug Court should be available for youth as diversion prior to removal, like DV Court process
- DHHS Eligibility staff need to be available to assist fellow division staff at CFS when working with families that need direction on accessing services and identifying what services they are available for
- Need to provide vehicle for families to know what services are available in the community, especially among families with language barriers
- Universal home visiting services available to all families now in Lincoln

Discussion Around Themes



Early Childhood and Early Identification Programs

Zainab Rida and Lane Carr
Department of Education



Education as Primary Prevention

Nebraska Department of Education

Dr. Zainab Rida
Office of
Coordinated
Student Support
Services

Lane Carr
Office of Policy
and Strategic
Initiatives

Opening Comments



Dr. Brian L. Maher
Commissioner of Education



Agenda

- Position schools as key factors in improving educational, economic, and lifetime outcomes
- Highlight promising practices of full-service community schools
- Discuss additional policy considerations and priorities
- Answer any questions



Context: Why We're Here



The mission of the Nebraska Department of Education is to lead and support the preparation of all Nebraskans or ***learning, earning, and living.***



Nebraska Ready: Legislative and Regulatory Priorities

TEL 402.471.2295 FAX 402.471.0117 P.O. Box 94967 Lincoln, NE 68509-4967 education.ne.gov

Nebraska Ready: PK-12 Policy Priorities

The mission of the Nebraska Department of Education is to lead and support the preparation of all Nebraskans for learning, earning, and living. This mission is directly aligned with the postsecondary attainment goal outlined in LR335 - for **70 percent of Nebraskans to have a postsecondary credential or degree by 2030**.

To achieve this attainment goal, the NDE is pursuing a bold policy vision for the next biennium called "Nebraska Ready." These six broad priority areas will set the state on a path to reach the 70% attainment goal by 2030.

Priority 1: Increase Third Grade English Language Arts Proficiency to 75% by 2030

- **Rationale:** In 2021, 50% of Nebraska 3rd grade students were proficient in English Language Arts. Proficiency by 3rd grade is a key gateway to future success, including graduation rate and postsecondary enrollment and completion.
- **Legislative Priorities:**
 - **BIENNIAL BUDGET REQUEST:** Transform early literacy instruction in Nebraska through an annual \$10 million investment.
 - Support a statewide allocation for statewide family engagement centers (family literacy centers)
 - Achieve the full legislated special education funding/state contribution
 - **BIENNIAL BUDGET REQUEST:** Enhancements to Step Up to Quality
 - Support efforts increasing the compensation for early childhood education providers
 - Create a legislative study group to unearth overlaps and opportunities in early childhood governance, funding, and accountability.
- **Regulatory & Agency Priorities**
 - Adapt Rule 20 to ensure the science of reading (e.g. phonemic awareness, phonics, vocabulary, comprehension, fluency, and background knowledge) is included as a requirement in educator preparation program accreditation

Priority 2: Halve the Gap in 8th Grade Math Achievement for Each Student Group by 2030.

- **Rationale:** Algebra and 8th grade math are also considered "gateways" to success. Students need algebra skills to access higher level courses and succeed in high school. Unfortunately, significant achievement gaps in math exist by the 8th grade based on the state's NSCAS Growth Assessment from 2021.
- **Legislative Priorities:**
 - **BIENNIAL BUDGET REQUEST:** Ensure the NDE has the requisite staff to support school improvement activities
 - Update core services statute, and secure additional state funding for ESUs
 - Address the "homework gap"
 - Support investments in tutoring and mentoring
- **Regulatory & Agency Priorities**
 - Include high quality instructional materials (HQIM) in accreditation requirements for school districts
 - Work collaboratively with ESUs to strengthen professional learning offerings to schools
 - Commit to a consistent assessment measure to ensure stability
 - Clarify "Alternative Administrative Structure" in the priority school statute

To lead and support the preparation of all Nebraskans for learning, earning, and living.

- Priorities aligned with LR335 (2022): 70% attainment goal
- Six core goals focused on educational outcomes
- Explicit focus on reduction in chronic absenteeism (i.e. missing 10% of time in membership)



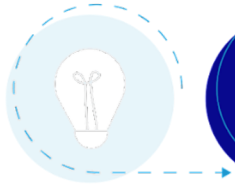
Social Determinants of Health

Figure 1
Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	Quality of care
Medical bills	Playgrounds	Higher education		Stress	
Support	Walkability				
	Zip code / geography				

Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations



Interdependence

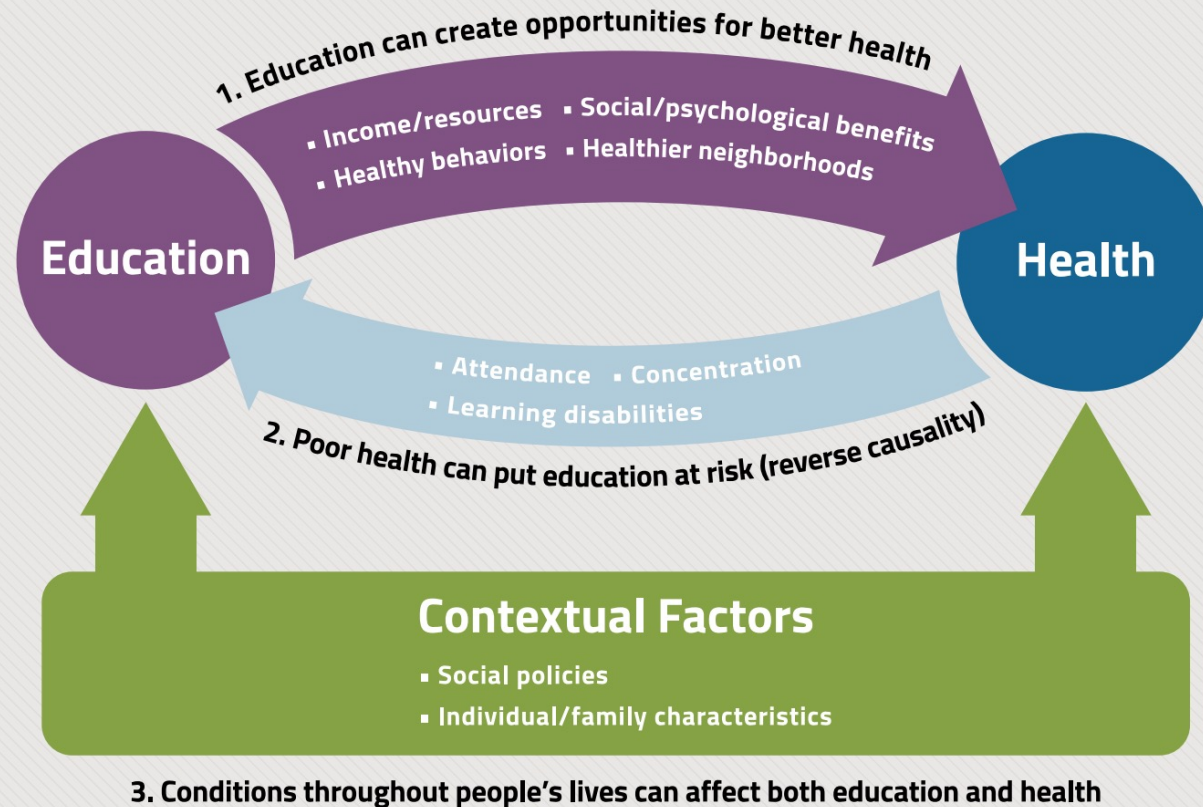


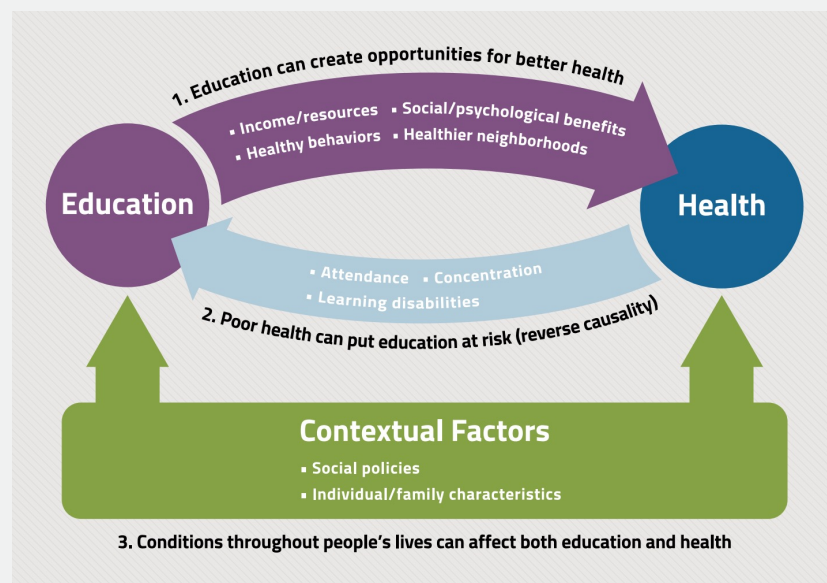


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Health Outcomes

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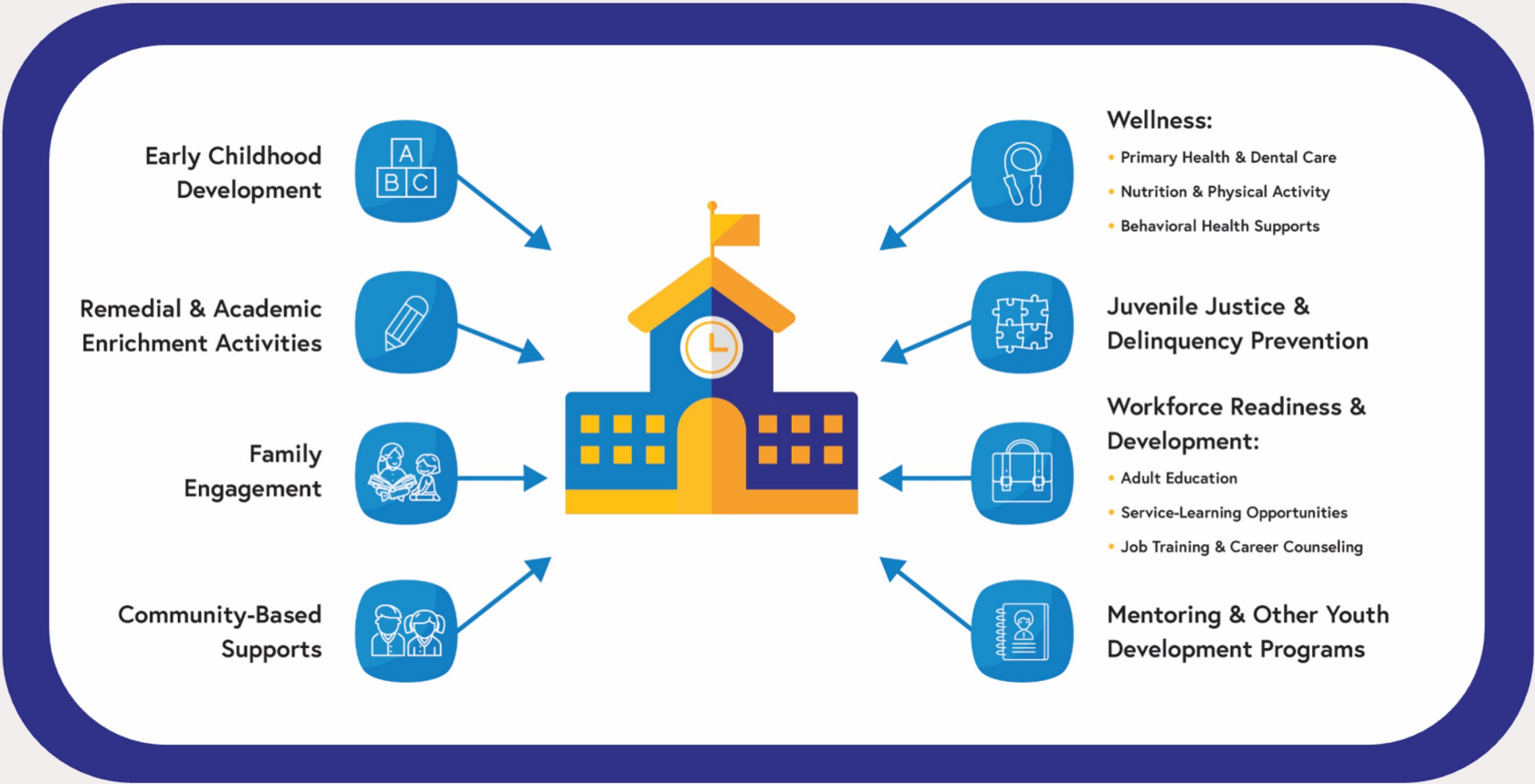
Schools *must* be seen as a key primary prevention partner.



**Evidence-
Based Practice:
Full-Service
Community
Schools**



FSCS- What does it look like?





COLLEGE/CAREER



ENGAGING INSTRUCTION



FAMILY ENGAGEMENT



EXPANDED LEARNING



YOUTH DEVELOPMENT ACTIVITIES



MEDICAL, DENTAL, MENTAL HEALTH AND SOCIAL SERVICES



EARLY CHILDHOOD



COMMUNITY BUILDING



HOUSING



NEIGHBORHOOD APPEARANCE



SAFE



NEIGHBORHOOD CONNECTED

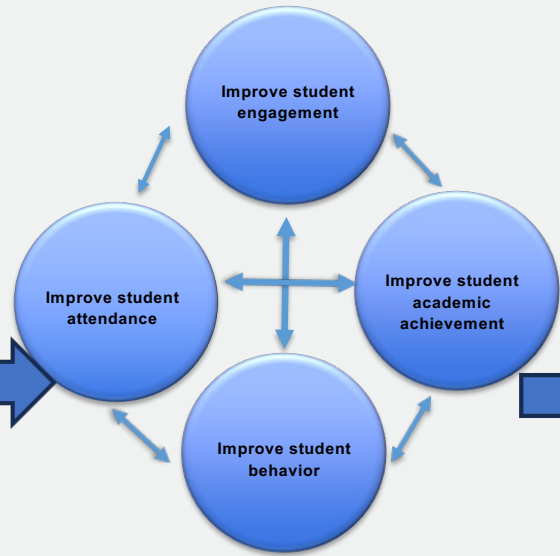


FSCS Theory of Change

Implement FSCS Model through strategic planning and progress monitoring



School Site Coordinator	Implementation Team
Pipeline Service Partners and Providers	Intentional Continuous Improvement



Improved *learning, earning, and living.*

School Site Coordination



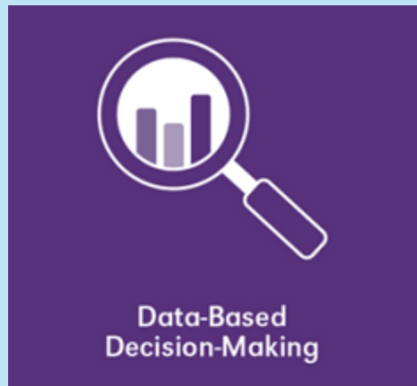
Communication &
Collaboration

School-Site
Coordinator



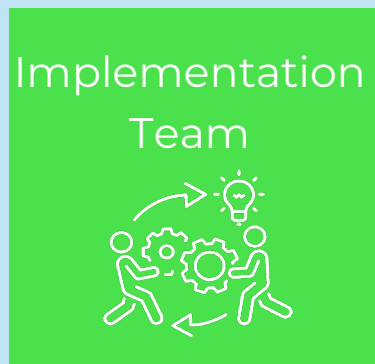
- A FSCS School Site Coordinator is a staff member of the school or partnering entity **DEDICATED** to extending the capacity of the school by assisting students and families overcome barriers to learning
 - Build relationships with school staff
 - Coordinating with partners and classroom volunteers
 - Scheduling services/programs
 - Coordinate services such as food pantry, basic needs pantry and winter clothing drives
 - Writing grants
 - Collect & report data

School Improvement Plan Alignment



- The journey to scale and sustain pipeline services and the FSCS model requires intentional commitment to continuous improvement through a fluid, non-linear process.
- Components of this process includes assessing needs, planning, implementation and evaluation

Collaborative Leadership



- Assess and support student and family needs
- Plans and makes decisions related to forming partnerships
- Implement evidence-based programs and services
- Evaluate effectiveness of programs and services

Integrated Student Supports



- Work to align supports to pipelines known to improve student, family and community outcomes.
- These integrated supports are provided through a network of partnerships

Need Assessment

Activity (program, support, resource)	Currently provide and will continue to provide at current level	Currently provide and plan to expand	Do not currently provide and plan to launch	Do not plan to provide
Integrated Student Supports				
Supports to address chronic absenteeism				
Access to Counselors				
Mental Health Services				
Student Mentoring				
Restorative Justice/Systematic Support for Justice Involved Youth				
Dental Health Services				
Vision Health Services				

Action Plan

Full-Service Community School Focus Area/Alignment	
Fremont	<ul style="list-style-type: none"> • Focus is around parental involvement and Family Literacy programming for middle school campus. Leadership saw the benefit of working with middle schoolers as they can reach siblings in elementary and high school with resources. • Hired Community School Coordinator who will bring community into the school and equip school personnel with the right tools to meet the needs of their students outside of the classroom. • Coordinator has initiated collaboration between the school and the community. • Community Wellbeing prevention goals are being utilized for service delivery such as mental health for students in need.
Grand Island	<ul style="list-style-type: none"> • Focus is around the O'Conner Early Childhood Center as a foundation for early childhood programming. They would like the center to be a hub of services "One-stop shopping atmosphere for families". • School district will employ the Community School Coordinator to provide benefit package similar to those of school staff. • Collaborating with Central Community College on adult education programming as they have identified a need for educational attainment. • Interested in implementing a Family Literacy program.
Schuyler	<ul style="list-style-type: none"> • Focus is around elementary school with strong services geared towards Family Literacy programming. • Expanding outreach for health services via an onsite health clinic, expanding mentoring, monthly parent nights and financial literacy. • Helpful they have foundational knowledge and experience of the services they are wanting to implement. For the most part, they already have the services but are wanting to expand. • Part of "Whole Child" CDC grant.
South Sioux City	<ul style="list-style-type: none"> • Focus is around elementary school and Family Literacy programming with emphases on workforce development opportunities. • Collaboration with Northeast Community College on existing Family Literacy programming will be key in developing specific design for best and needed services for families. • Growing Community Connections has over 600 partners with a wide variety of support services/partners available.

Fremont



COMMUNITY PARTNERS:

- Aspire
- Children's Hospital Vision Mobile
- Salvation Army/ Summer Lunch Program
- Nebraska Extension
- FPS Migrant Education Program
- Capstone Behavioral Health
- Life house/ entity that manages McKinney

ACHIEVEMENTS:

This summer we achieved much in terms of youth and community engagement:

- Work with Aspire and providing students with experiences and field trips throughout the summer
- We scheduled a visit from the Vision Mobile (from Children's Hospital, Omaha) and had 12 students' vision checked. 4 received eyeglasses.
- This summer we have been very intentional in building our relationships with the school system. We have parent/family engagement activity ideas we are exploring.
- Having new administration at the middle school has been super exciting, the principal has been very engaged and includes FSSC and ED in decision making regarding plans for this school year.
- Examples of plans for this school year include sponsoring and assisting with back-to-school bash, FSSC was added to the tier teams and received training this summer to connect resources for families that have students struggling with behavior in school, supplying resources to encourage and motivate staff and students. FSSC will introduce herself at the back-to-school event to the parents and students. Andrea along with the school social workers will utilize Clarity our community-based database to ensure that information and referrals are consistent and tracked appropriately. Along with this we have a standing meeting with school social workers this school year to review cases that school and community partners share through CR.
- Last school year was spent mostly building relationships. Since I came into my position at the end of last year, it took me a few months to understand what this role could look like that best fits the needs of our community. Andrea felt that she had little guidance from prior director. I am so excited for this year! We are going to knock it out of the park.

Schuyler

Activities



Ongoing comprehensive vision exams



Extending vision exams to older students and families



Off comprehensive vision exams annually

Impact



Vision Clinic



5 students referred for additional eye care



10 volunteers from the community



33 1st & 2nd grader students received eye vision exams



4 vision techs



33 students served, they all needed glasses



Community Partners



Nebraska Foundation for Children's Vision

Steps to Program Success



Gaining trust from parents in receiving vision services



Educating parents on the importance of vision care



Educating parents on the importance of follow up visions after initial vision exam

Grand Island

Individual Impact



"You guys have so many great resources, made our children feel loved and cared for and made it a great experience for our family."



\$10,000

Community Cafe Grant



\$2,000

GIPS Foundation: Food and Hygiene Party



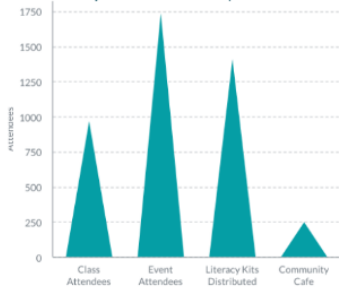
\$1,000

Last Day of School Celebration and Fall Family Night at the Pumpkin Patch)

Impact

Community Schools Impact

Survey of families- 52% response rate.



24 Community Partners

- Central Community College
- Early Development Network
- Clearwater Counseling
- Multicultural Coalition
- Grand Island Public Library
- Legal Aid



25 Activities completed

- Food Pantry
- Healthy Lifestyles Series
- Math In Real Life/Family Bowling Night
- Stress Less Strategies
- UNL Extension Nutrition Class
- YWCA Employment & Training Program
- Zumba Class
- Parent Orientation Community Fair
- Health Fair
- COVID vaccinations



"One of our primary goals during our first year of Community Schools work was to help our families feel welcomed and engaged."



99% of respondents felt satisfied or very satisfied with the programs and services offered at school.



74% of respondents reported that they attended at least one opportunity at school (class, event, etc.).



99% of respondents felt comfortable or very comfortable in the school.

Dakota City

About Dakota City



Dakota City Elementary is a two section K-5 elementary school. The student population is approximately 100. About 51% of the students at Dakota City are minority students



First year summer meals were offered at Dakota City Elementary



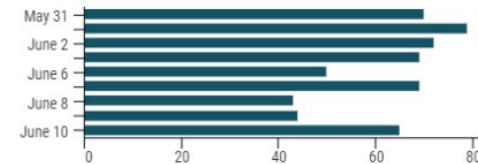
Monthly meetings with Heartland Counseling



Monthly classes with NE Extension

Impact

Number of free lunches served



Monthly family classes to expand learning with Ne Extension- Sewing, photography, cooking, etc.



10% of families attended empowered parents meetings



21 adults participated in adult education



Summer meals served for the first time in Dakota City



Family outings to "new places"



Development of a Family Resource Center at School



Increased PTA involvement



First time families volunteering in their community

Community Partners

- Dakota City Public Library
- NE Extension in Dakota County
- Heartland Counseling
- Northeast Community College
- LaunchPad Children's Museum
- Sioux City Art Center
- Norm Waitt Sr. YMCA

Events

Summer Lunches



- Mental Health Workshop - 6 week class
- Technology Classes - 6 week class
- Love & Logic class
- Free Summer Meals
- School & Home Partnership adult meet-up to openly discuss community, education, parenting, home life



Impact of Successful Implementation

- Improved Attendance
- Continuous School Improvement
- Each Child Supports (Nutrition, dental, eyeglasses, after school/summer participation)
- Improved Build Culture
- Direct College/Career Connections (at middle and high school levels)





Additional Policy Considerations



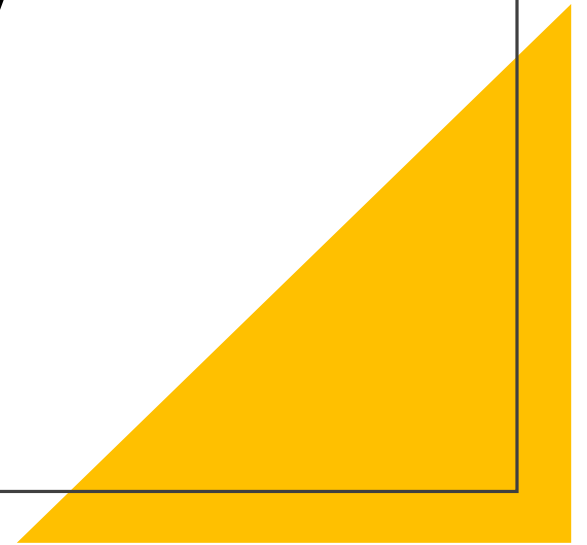
Board Legislative & Regulatory Priorities

- To address reading on grade level:
 - *Support a statewide allocation for statewide family engagement centers (family literacy centers)*
- To reduce chronic absenteeism:
 - *Work collaboratively with DHHS to ensure every school has access to school nurses*
 - *Revise and update attendance statutes and encourage partnerships with probation, county attorneys, and others to prevent chronic school absence.*
 - *Work with DHHS Medicaid Administration to ensure school psychologists are reimbursable by Medicaid.*



Thank You!

Questions around the room/Zoom?



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LB 1173 Final Report Framework
The Stephen Group

LB 1173 Final Report Framework

The Charge: “Shall develop a Practice and Finance Model for Child Welfare System Transformation in Nebraska”

- A practice model is a **framework** that highlights the **vision, values, and principles** that guides the approach to engaging with children and families. Practice models are developed and implemented to **guide policy development, practices, clarify expectations, and improve outcomes** for children and families.



LB 1173 Final Report Framework

LEGISLATIVE BILL 1173

The practice and finance model shall include, but not be limited to:

- Development of a statewide mission and vision for the child welfare system in Nebraska;
- Development of values and practice priorities for the child welfare system in Nebraska;
- Development of statewide program goals and a practice and finance model for child welfare system case management and service delivery;
- Development of *engagement strategies* to support community involvement in child welfare system transformation;
- Development of strategies that strengthen relationships across the court system, probation, executive branch agencies, the State Department of Education, and community partners;
- Development of strategies that *support integration* across agencies;
- Development of accountabilities across the entire child welfare system;
- Evaluation of the state's Title IV-E claiming practices and identification of appropriate steps to optimize federal reimbursement for child welfare system expenditures;
- Opportunities and financial mechanisms for providers to pilot innovative solutions to meet program goals; and
- Development of a strategy for data collection and outcome monitoring

LB 1173 Final Report Framework

Suggested Report Outline to Mirror Workgroup Statutory Responsibility, along with supporting documentation to meet objective and intent of legislation

- Child Welfare Practice Model with suggested *Engagement Strategies* to support the integrated model (Those specifically listed in LB 1173)
- Finance Model Framework to support Practice Model and future Transformation, including evaluation of Title IV E claiming

- **Background related to LB 1173**
Process, including Common Themes heard around state
- **Recommended Strategies to consider for implementation of Practice Model**

A. Prevention

B. Workforce/Training

C. Medicaid

D. Behavioral Health/SUD

E. Additional Practice Transformation Strategies to Consider

F. Appendices/Presentations to the Workgroup

Workgroup Feedback and Next Steps

Upcoming
1173 Events

Workgroup Meetings
October 19
November 7