



LB 1173 Reimagining Child Welfare in Nebraska Workgroup Monthly Status Report

August 2023

Monthly Accomplishments, Highlights, and Planned Activities

Accomplishments

- 6.22 Attended Judges Conference in Kearney. Conducted focus group with Judges from around the State. Identified key themes and issues
- 6.23 Continued research on Childrens Medicaid issues and outreach to DHHS, Medicaid regarding issues involving Paramedicine national best practice and applicability to Nebraska, especially rural areas
- 6-27 Continued meeting and discussions with DHHS and LB 1173 Statutory Review team assembled by DHHS. Purpose to identify issues Workgroup may want to consider needing statutory review that could impact future state vision, including discussion of Prevention impact
- Prepared memo at DHHS request with possibly LB 1173 statutory change considerations – final draft to be reviewed and approved by the LB 1173 Workgroup as part of the Recommendations report
- 6-27 Meeting with Buffalo County Deputy Attorney Mandy Schweitzer to discuss issues related to child welfare and Cross over youth cases in Buffalo county, including services and best practices. Discussion also on 1184 practice, and recommendations on future state solutions
- 7/5 Meeting with Ryan Stanton and Compass
- 7/10 Meeting with University of Nebraska re: DCFS Training
- 7/11 Foster Parent Focus Group regarding current state, future state solutions to ensure placement capacity, retention of quality foster parents and engagement strategies.
- 7/11 LB 1173 Workgroup Meeting
- 7/11 TSG reached out to Jeff Stafford United Health Care based on their offer to discuss potential for LB 1173 Pilot
- 7/12 TSG meeting with CFS Community Support Specialist Team to discuss their roles and responsibilities and what their vision would be for future state in reimagining child welfare, as well as how families and communities receive necessary support through the future Community Pathway system
- 7/14 TSG Participated in DHHS Tribal Liaison Meeting
- 7/18 TSG participated in meeting with all Tribal Nation representatives organized by Michelle Parker and Misty Flower and hosted by the Omaha Tribe. Participants included those from all Tribal Nations as well as DHHS support staff. Discussion included gaps in service, financial resource needs and solutions that the Tribal Nations would like to see in the LB 1173 Report. All Tribal Nations would like to collectively submit their own LB 1173 Report to be attached as an appendix to the statutory report submitted to the Legislature by the workgroups.
- 7/19 Meeting with Lutheran Family Services team responsible for operating the Co-Responder grant in Grand Island and Kearney with the Local Police and Buffalo County Sheriff's office. TSG met with LSF staff, including Therapist that goes out on calls with law enforcement and peer support specialists that is called in to follow up with the individuals and families. The meeting discussed the model, funding and applicability to future mobile crisis response solution for Nebraska, including how the model is currently aligned with the Regional Behavioral Health and Medicaid Managed Care systems, as well as the Community Collaboratives and other state departments such as Department of Education and schools.
- 7/19 Meeting with Midwest Encouragement and Counseling Center
- 7/23 Completed analysis of TSG CFS Training Survey and prepared recommendations for the Workgroup



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- 7/28 Meeting with Libby Moderow, Families Together Program. Discussed faith based organizations involvement in the child welfare system and the use of technology to notify faith organizations of needs in Douglas, Sarpy, Lancaster and Kearney areas.
- 7/31 meeting with Holly Brandt, Regional Administrator, Region 1 Behavioral Health Authority – Scottsbluff
- 7/31 meeting with Faith Mills, representing Panhandle Community Collaborative
- 7/31 TSG facilitated two Community Forums in Scottsbluff

Finance

- 6/27 Finance Synergy Subgroup Meeting
- 6/28 Finance Workgroup Meeting
- 6/30 Finance Rates & Contracts Subgroup Meeting
- 7/6 Finance Workgroup Meeting
- 7/13 Finance Workgroup Meeting
- 7/20 Finance Workgroup Meeting
- 7/26 Finance Executive Workgroup Meeting
- 7/27 Finance Workgroup Meeting

Highlights

Interviews, Stakeholder Focus Group Highlights

- Foster parents felt best practice when CFS case manager (Lancaster County) kept every member of the team caring for the best interests of the child on one email trail – All expectations were known. Everyone updated regularly – “The feeling was we were a member of a team.”
- Foster parents do not feel they have anywhere to go to alert someone if GAL is not doing their job. When GAL does not show up foster parents have some recourse to file a report but nothing seems to happen. Accountability is an issue. When GAL is meeting statutory obligations, the case moves through the system much quicker and more efficiently
- Statutes on timely adjudication rarely followed in rural areas and Judge just indicates exception – very common on kinship case
- Need for a centralized system with foster parent access. “a centralized system where the history of the case is all in one system where all parties can have access to a common and shared file. No need to continue to duplicate but can keep an on-going record” “All communication documented in one place”
- For Visitation perception is the case manager plays “good cop” and foster parents end up the “bad cops.” Parental visits are supposed to be for bonding and moving to reunification, but better standards are needed. Kids are driven for hours for visits that often don’t happen or the parent may be impaired. This may be impacted also by drug testing policy changes.
- Visitation – cases are delayed due to waiting on agency to take visitation case.
- Need to go back to unified eligibility so that people are not going to different workers and have an integrated eligibility

Prevention

- Prevention focus may need statutory change where cases remained open and there is no safety threat and where prevention plan and FFPSA Evidence Based Program in place. If a case is closed, the consensus is that there is no need for CFS continued involvement in case management where case is



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referred to the Community, for services or to an EBP provider. Budget would have to allow for funding directed to DHHS for CFS to be able to compensate provider of service with or without Title IV E funds.

- Social worker model embedded in schools is having positive impact – need to look at expanding this practice statewide.

Regional Behavioral Health System

- Regional Behavioral Health Authorities (RBA) are not required to assure or provide a menu of mandated services, evidence based practices, and neural development for infants, children, youth, and parents/foster parents.
- RBA's do not have a mandated requirement to assure or provide Crisis Intervention/Mobile Resource Teams that are trauma informed and trained in De-escalation.
- DHHS does not have an integration method across all Divisions focused on Early Childhood Development (0-5), mandated Infant, Child and Adolescent Behavioral Health Evidence Based Practices, and cross Division integration of a Fidelity Wrap Around system.
- Nebraska's Tribes experience significant complexity in accessing Behavioral Health services for infants, children, youth, and parents from Indian Health services, the RBAs, and the MCOs.
- Kearney/Buffalo County has a well developed Crisis Intervention Partnership between law enforcement and a community based mental health provider based on CIT grant support that could be a model across the state. The question of sustainable funding over time is unresolved at this time.

Cultural Engagement

- For representatives of Winnebago, Santee, Ponca and Omaha tribes, common views of "community well-being" includes more community events (tournaments, dances, "carnivals"), cultural-based events and programs, and culture-centered activities, education, families, and communities.
- For these tribes represented, community well-being is important to heal past trauma/break cycle of trauma, to bring communities together and support one another, to promote cultural identity, and to promote physical, mental, environmental, spiritual and cultural well-being.
- "Building services inside the Culture" is key
- State workers need to respect and understand traditional Tribal values
- Tribes doing a lot of cultural support for families – that healing from historical and intergenerational trauma is coming from the Tribes – that culture is a protective factor.

Workforce

- High turnover in CPS workers interrupts continuity of care
- important to have Spanish speaking case workers not just interpreters
- Many concerns expressed about struggles due to staffing shortages and turnover. TSG has made a data request on behalf of Workgroup to understand trends on turnover and vacancy rates at CFS. Courts have identified impact of workforce shortages as well. Best practice in Sarpy County Court where CFS supervisor is sitting in on case throughout the process and if there are staff vacancies, supervisor can keep continuity and case progressing

Medicaid

- Access to health care – no real meaningful participation by the MCOs at the front end of the Nebraska Child Welfare system even though many of the children are on Medicaid or CHIP. Foster Parents are not aware of MCO contribution to system, including value added benefits and care coordination responsibility. Foster parents interviewed indicate they are doing most of the care coordination. One Foster Parent spoke about how she received a call a number of years back from an MCO care coordinator and she thought that was "amazing."



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- Medicaid Managed Care can also be more involved and proactive with Tribes. Not enough awareness of benefits to MCO in Tribes as well

Finance Subcommittee Highlights

- Analyzed newly published federal funding data and completed comparison.
- Continued Development of finance recommendations
 - 1. Maximization of Federal Funding**
 - Work with federal legislative representatives to pursue change to Title IV-E lookback (AFDC) amount
 - Long term agenda across states and from advocates
 - Licensing of relative caregivers / kinship homes
 - Change to general mindset regarding licensing of relatives
 - Regulation change(s) to streamline licensing requirements for relative/kinship homes
 - Waiver of non-safety related standards federally allowed
 - Continue to incentivize licensed relative/kinship homes (incentive to licensed homes only, rate differential).
 - Funding to address safety concerns / home repairs
 - Pay for childcare during training for licensing relative/kinship
 - Training modifications to expedite licensing relative/kinship homes.
 - Change to agency contracts.
 - Relative/kinship home specific contract requirements for agencies
 - Specific language related to licensing homes (give some language about approved waivers for a reason why the home can't or won't become licensed)
 - Varied administrative rate for non-licensed homes or create an incentive for licensed homes
 - Potential technology change (Nfocus) to establish pay differentials
 - Claiming for children placed through Letters of Agreement
 - Continue to improve eligibility-related documentation
 - Court order language
 - Judicial outreach and training
 - Shared Living Providers
 - Only send youth to SLPs who are DD Eligible (unlicensed)
 - Specialized License SLPs
 - Rate structure based around acuity with other wraparound supports as necessary
 - Integrate Kinship Navigation services into child placing agency (CPA) contracts
 - Claim Title IV-E Kinship Navigation for dependency cases when children are not eligible under traditional Title IV-E and/or placed with an unlicensed relative or non-relative caregiver



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- Pursue Expansion of Training & Educational Programs
 - Pathway to training for providers with varied educational backgrounds (high school, peers, bachelor's level, master's level, post-graduate, etc.)
 - Include workforce development and training of state and provider staff capable of providing evidence-based interventions
 - Leverage Title IV-E training dollars, other federal funding sources, and MCO investment
- CCWIS development
 - Alignment of programmatic and technology to support workforce efficiencies

2. Cross-System Synergy

- Title IV-E claiming for Juvenile Probation Services and high-quality legal representation of children and families
 - Require updates to the state's Title IV-E plan and Cost Allocation Plan
 - Administrative burden / cost to collect expenditure data, implement time study (Random Moment Sample), and calculate claim
 - Need to investigate and verify ROI
 - B2i
- Create blended and/or braided funding strategies to ensure Medicaid coverage for FFPSA evidence-based practices
 - Collaboration with Medicaid and MCOs to include EBPs as in-lieu-of or covered services
- Collaboration and funding staff in schools to provide early intervention, prevention, and crisis-intervention
- Community Pathway to Prevention
 - Partnership with Community Collaboratives and Tribal Nations
 - Develop approach, contractual responsibilities, create cost estimates, and determine eligible expenses for reimbursement as a Title IV-E (FFPSA) administrative costs
- Regional Behavioral Health System of Care
 - Leverage funding to create a regional system providing mobile response, crisis intervention teams, family intensive treatment
 - Involve persons with lived experience to provide peer support and connection to prevention services through the Community Pathway
- Create state legislation to eliminate or limit the "benefits cliff" for families in crisis receiving economic or concrete supports
- Create investment in provider capacity to support the provision of high-quality services through workforce development and training, recruitment, and retention
- Develop Medicaid Waiver(s) to support services to improve Social Determinates of Health (SDOH) and provide Children's MH Wraparound
- Leverage public health block grant funding / MIECHV
- Leverage TANF surplus through investment in programs, systems, and supports
 - Warm line development
 - Statewide Family Resource Navigation and Support Coordination
 - Community Pathway to Prevention
 - Concrete and economic supports to families
 - Closed loop referral system



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- Collaboration with Developmental Disabilities
 - Cross-system claiming for DD homes
 - Remove licensing related barriers
- 3. Provider Rates and Contracts**
- Claiming for Title IV-E Administrative costs
 - Child placing agency administrative cost
 - Potential for two-year retroactive claim
- Review of tribal contracts and rates to ensure equity
- Provider rate setting and claiming
 - Analyze and, if necessary, revise rates for all services
 - Strategies to capture costs, ensure eligible administrative costs are accounted for, and validate rates sufficient to support statewide service capacity
 - Equity in rates across different state systems
- Biennial rate-setting exercise to align with state budget
 - Use of a Cost-of-Living Adjustment (COLA) based on a mixed Consumer Price Index (CPI) and Employment Cost Index (ECI) to adjust rates during the interim years
- Performance-Based Contracting
 - Considerations and process for the development of agreed-upon outcome measures to be incentivized
 - Parameters for “shared risk”
- Enhanced review of placements in Tier 4 Foster Care and higher
 - Ensure need and appropriateness of placement and services through increased review / audit
- Technology enhancements to support monitoring and reporting of performance and outcomes
 - Daily cost tracking
 - Service efficiencies
 - Performance measures
 - Contractual outcomes
- Researched and developed recommendations surrounding rate setting and performance based contracting

Emerging Issues/Key Themes

- CFS Training Survey - Material/Content – Trainees understanding of the learning objectives and comprehension of the training material very high, but most did not feel that the curriculum prepared them for the daily demands of child welfare; Instructor – Answering questions, engagement, presentation, and overall effectiveness of the trainer scored high; Training – The pace of the training and time to complete was acceptable to the trainees, but the training relevance and application to the job scored low; Overall Effectiveness – The training did not meet the expectations for most of the trainees, and they did not feel competent or confident after training to do their job.



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- Prevention needs to be focus across all sectors: Substance Abuse, Mental Health, and Child Welfare; filing a petition should not be used as a way to get needed services
- Engaging and educating other entities involved in child welfare system can improve case management and reduce turnover: other parties can help provide families with support so families have more than caseworkers to turn to: schools, other legal parties to the case, law enforcement
- More focus needs to be paid to case worker safety in the field: “Everyone thinks CFS can solve all problems yet there is little support for CFS workers”
- Child care/early education access is a problem for many families and should be addressed—licensing requirements and sustainability for childcare providers are cited issues
- Creation of family/youth programs and community engagement events can help facilitate outcomes.
- There is a need for a statewide community resource page: statewide with county and community data that is streamlined, accessible with cultural translations on food banks, housing help, transportation, etc.
- Cycle of behavioral health crises in youth: children need specialized behavioral health services—access is an issue—crisis occurs and child ends up in residential placement. Law enforcement with behavioral health provider model works well to break cycle; mobile response is a great idea, but needs to be responsive, especially in rural areas.
- More collaboration needed between the agencies who are involved in the child welfare system. This includes legal parties, law enforcement, community stakeholders, probation, and education. More collaboration with all of Nebraska state services. Teamwork across the board; should be about the child and all involved.
- Engage Faith Based churches and organizations. Community Partners is working with three churches with Spanish ministries to train in Mental Health First Aid and Wellness Action Planning: we find families with mental health issues are unknown yet connected to their faith communities.
- There is a need for interpretive assistance for translators for all aspects of families involved with child welfare and, preferably, the same translator for the same case throughout the process to maximize family understanding of what is going on and what they need to do.
- Multi-Disciplinary Team concept from beginning of case to end works well, especially in rural areas where resources are scarce
- Uniform concern on enacting policies that impact entire child welfare process without real meaningful “engagement and collaboration with courts,” This theme was also heard from law enforcement and county attorneys
- Concern over relaxing of CFS drug testing policy in 2017, including practice related to substance exposed newborns in a hospital setting
- Need for Title IVE Draw down for Legal representation for parents – current gap
- Family Treatment Courts in Lancaster is a best practice where teams are collaborating together with great outcomes
- Concerns over the Alternative Response policy and system in general – “not a lot of oversight and cases go on for too long. “ “Cases often go on for 8 to 9 months and that is way too long a period of time” Courts agree with process where FFPSA Evidence Based Programs are used in most AR cases
- Sarpy Court best practice – CFS supervisor comes into court with the Intake worker and is part of the court team – helps assure continuity and speeds up process
- In past, Douglas County School system superintendents met regularly with courts to discuss issues impacting children - good model where schools are a safe place for kids
- The Education Rights Council – Attorneys who represent individual families with children with disabilities in school systems to make sure they have their rights protected are an important asset.



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- Family Peer Support is a positive resource when available to families and opportunities for same should be expanded

Planned Activities for August

1. 8/1 North Platte Community Listening Session
2. 8/2 Meeting with Department of Education Commissioner Brian Maher
3. 8/3 LB 1173 Workgroup Meeting
4. 8/3 Meeting with Lancaster County Attorney Office
5. 8/4 Meeting with Monika Gross Foster Care Review Office
6. 8/8 Nebraska Children's Commission Meeting
7. 8/10 Finance Workgroup Meeting
8. 8/11 DHHS Tribal Liaison Meeting
9. 8/17 Finance Workgroup Meeting
10. 8/24 Finance Workgroup Meeting
11. 8/31 Finance Workgroup Meeting
12. Continued research on Best Practice
13. Discussion of LB 1173 preliminary recommendations and practice model draft
14. Continued analysis of data requested on behalf of Workgroup

Issues/Risk

- No serious issues or risks projected at this time.

Project Status

On track