

Nebraska Children's Commission

Nineteenth Meeting
January 22, 2014
9:00 AM – 12:00 PM
Airport Country Inn and Suites, Platte Room
1301 West Bond Circle, Lincoln, NE 68521

Call to Order

Karen Authier called the meeting to order at 9:05 am and noted that the Open Meetings Act information was posted in the room as required by state law.

Roll Call

Commission Members present: Pam Allen, Karen Authier, Beth Baxter, Candy Kennedy-Goergen, Kim Hawekotte, Martin Klein, Norman Langemach, Andrea Miller, Jennifer Nelson, David Newell, Mary Jo Pankoke, and Becky Sorensen.

Commission Members absent: Nancy Forney, Janteice Holston, Gene Klein, John Northrop, Dale Shotkoski, and Susan Staab.

Ex Officio Members present: Hon. Linda Porter, Thomas Pristow, Julie Rogers, and Kerry Winterer.

Ex Officio Members absent: Ellen Brokofsky, Senator Colby Coash, Senator Kathy Campbell, Senator Jeremy Nordquist, and Vicky Weisz.

Also in attendance: Bethany Connor and Leesa Sorensen from the Nebraska Children's Commission.

Approval of Agenda

A motion was made by Mary Jo Pankoke to approve the agenda, as written. The motion was seconded by Beth Baxter. Voting yes: Pam Allen, Karen Authier, Beth Baxter, Candy Kennedy-Goergen, Kim Hawekotte, Martin Klein, Norman Langemach, Andrea Miller, Jennifer Nelson, David Newell, Mary Jo Pankoke, and Becky Sorensen. Voting no: none. Nancy Forney, Janteice Holston, Gene Klein, John Northrop, Dale Shotkoski, and Susan Staab were absent. Motion carried.

Approval of December 17, 2013, Minutes

A motion was made by Candy Kennedy-Goergen to approve the minutes of the December 17, 2013, meeting with a revision. A suggestion was made to add a sentence to the section on "Commission Feedback on Alternative Response Model" to state that: "Some Commission members didn't receive the e-mail because of Nebraska.gov e-mail issues." The motion to approve the minutes with revisions was seconded by Becky Sorensen. Voting yes: Karen

Authier, Beth Baxter, Candy Kennedy-Goergen, Kim Hawekotte, Martin Klein, Norman Langemach, Andrea Miller, Jennifer Nelson, David Newell, Mary Jo Pankoke, and Becky Sorensen. Voting no: none. Pam Allen abstained. Nancy Forney, Janteice Holston, Gene Klein, John Northrop, Dale Shotkoski, and Susan Staab were absent. Motion carried.

Chairperson's Report

Karen Authier provided a brief chair's report. Karen gave Commission members an update on the status of the Nebraska Children's Commission website and provided a brief overview of the items on the agenda for the day. Commission members were also provided copies of testimony from the Health and Human Services Committee hearing that was held on January 9, 2014. Testimony copies were provided from Karen Authier, Nebraska Children's Commission; Thomas Pristow, Department of Health and Human Services; Kim Hawekotte, Foster Care Review Office; and Julie Rogers, Inspector General of Nebraska Child Welfare.

Legislative Update

Bethany Connor provided Commission members with a list of Legislative Bills that had been introduced prior to the Children's Commission meeting. January 22, 2014 was the last day for legislation to be introduced, so the list did not include all bills that might be of interest to the Commission. LB660 relating to the Lead Agency would be reviewed during the meeting. It was also noted that Commission members may want to take a look at LB790 which relates to Case Manager Training. A suggestion was made that the Commission may also want to add LB143 to the list. Karen stated that Bethany would check on the status of the bill and add it to the list as necessary. The Commission members discussed other legislation on the list. Karen noted that Bethany would also spotlight items on the list that relate to the Phase I Strategic Plan. The list will be updated and provided to Commission members at the February meeting. A list of scheduled legislative hearings for the legislation of interest was also distributed.

Karen also reminded Commission members that a Legislative Report Summary document had been e-mailed to them in advance of the meeting. She further noted that the document had not been printed due to the size of the document. An updated version of the reference document will be distributed as changes are made.

Update on Lead Agency Pilot

David Newell and Carolyn Rooker provided an update on LB660. Dave provided Commission members with information entitled "NFC At-A-Glance". The document provides information on NFC, including about the staff and performance measures. The information included a support letter from Jean Stothert, City of Omaha Mayor that was sent to Senator Campbell and the Health and Human Services Committee of the Legislature. The final section of the document included Eastern Service Area CFSR measures. Dave noted that LB660 was important as it would allow the eastern service area to stay the course and would provide stability.

Carolyn Rooker also noted that LB660 was important for maintaining stability in the Eastern Service Area. Carolyn noted that the legislation would allow NFC as the Lead Agency to continue to build on the momentum that had been created to date. She also noted that changing case management at this juncture would be detrimental.

Kerry Winterer provided feedback on behalf of DHHS regarding LB660. He noted that DHHS was concerned about LB660 because it created a legal issue since the legislature through LB660 would be dictating to the executive branch the terms of a contract. He noted that the Executive Branch choice on terms of a contract transcends any issues related to the Eastern Service Area.

Commission members asked additional questions and provided input on family peer support, caseworker turnover, career ladders, and additional training that might be needed. It was also noted that the CFSR measures noted in the NFC handout might impact the work of the IT workgroup related to Whole Population discussions.

Kids Count Presentation

Carolyn Rooker, Chrissy Tonkinson, and Sarah Forrest provided a copy of the 2013 Kids Count report for Commission members. Chrissy provided highlights of the information that Commission members can find in the report. Carolyn indicated that if Commission members identify information that they would like to see added to a future Kids Count report that they should let her know.

Foster Care Reimbursement Rate Committee Report

Peg Harriott provided a written progress report on the work of the Foster Care Reimbursement Rate Committee. The committee continues to: review the ongoing results of the DHHS pilot project; identify and complete additional work with the Level of Care Assessment tool to fully operationalize the instrument; and discuss implementation implications for current foster homes, supporting agencies, DHHS, NFC, and Probation. At the January meeting the committee worked on developing a transitional process for implementing the new foster parent rates (base rate and levels of parenting) in a manner that creates a “grandfathering” process. Peg also provided a list of draft recommendations that the group will work on in February to create final recommendations.

After Peg finished her presentation, Beth Baxter made a motion to accept the Foster Care Reimbursement Rate Committee report and forward it to the Health and Human Services Committee by February 1, 2014, with a cover letter noting that the committee is moving in the right direction and that the Children’s Commission. At the February meeting the Commission will review a more specific timeline for development of deliverables for implementation of rates by July 1, 2014. The motion was seconded by Candy Kennedy-Goergen. Voting yes: Pam Allen, Karen Authier, Beth Baxter, Candy Kennedy-Goergen, Kim Hawekotte, Martin Klein, Norman Langemach, Andrea Miller, David Newell, Mary Jo Pankoke, and Becky Sorensen. Voting no: none. Jennifer Nelson was absent for the vote. Nancy Forney, Janteice Holston, Gene Klein, John Northrop, Dale Shotkoski, and Susan Staab were absent. Motion carried.

DHHS Report

Thomas Pristow provided a brief update on the unbundling of rates and the work that is being done by DHHS to comply with federal IV-E rules. Thomas also provided information on the work that is being done on Alternative Response (AR). The internal team at DHHS is reviewing the AR surveys to develop the Red Team concept that will be used when evaluating which cases will be assigned to the AR track. Thomas also provided information on the 5 AR pilot sites and the work that is being done to ensure that the statewide advisory group is in place.

Juvenile Services (OJS) Committee Report

Martin Klein, Sarah Forrest, Cindy Gans, Tony Green, Kim Hawekotte, Monica Miles Steffens, and Corey Steel provided information on the Juvenile Services (OJS) Committee report that was provided to the Judiciary Committee on December 13, 2013. The panel provided information on the key points of the report and reminded Commission members that there is additional work that is being suggested to be completed by the Juvenile Services Committee. The panel also noted that it is important that the report continue to be looked at in total and not have the recommendations implemented piecemeal. The panel indicated that the Juvenile Services Committee intends to further develop the recommendations contained in the report. The committee will also be monitoring the development of legislation that will implement parts of the report recommendations. The Commission then discussed how the report should be voted on by Commission members – as a whole or endorsed section by section.

A motion was made by Marty Klein to have the Nebraska Children's Commission accept and endorse the Juvenile Services (OJS) Committee report with a cover letter that provides a caution that stakeholders view the report as a comprehensive document and not a stand-alone set of recommendations. The motion was seconded by David Newell. Voting yes: Pam Allen, Karen Authier, Beth Baxter, Candy Kennedy-Goergen, Kim Hawekotte, Martin Klein, Norman Langemach, Andrea Miller, Jennifer Nelson, David Newell, Mary Jo Pankoke, and Becky Sorensen. Voting no: none. Nancy Forney, Janteice Holston, Gene Klein, John Northrop, Dale Shotkoski, and Susan Staab were absent. Motion carried.

Phase II Strategic Plan Next Steps Discussion

Candy Kennedy-Goergen provided an update on the System of Care grant project. A statewide assessment report is available that will be sent to Commission members by e-mail. The next stakeholders meeting for the System of Care grant planning is scheduled for January 28 in Kearney. The information to register for the event will be sent with the assessment report e-mail. Candy noted that there are 10 core teams doing the planning and that the juvenile justice recommendations report would be shared with the appropriate group.

Karen Authier then reminded Commission members that they will need to be thinking about how the Commission workgroups can begin pulling ideas together to work toward Phase II recommendations. Commission members also discussed the need to determine whole population outcomes. The whole population discussion will take place at a future commission meeting. Karen then asked Commissioners to send her any suggestions they may have for moving forward.

New Business**Next Meeting Date**

The next meeting is Wednesday, February 19, 2014, 9:00am-12:00pm. Information on the meeting location will be sent at a later date.

Adjourn

A motion was made by Mary Jo Pankoke to adjourn the meeting, seconded by Becky Sorensen. The meeting adjourned at 11:59am.

DRAFT

Nebraska Children's Commission
 103rd Legislature 2nd Session List of Bills of Interest
 As of February 18, 2014

<u>Document</u>	<u>Primary Introducer</u>	<u>Status</u>	<u>Description</u>
<u>LB143</u>	<u>Bloomfield</u>	Referral	Authorize schools to adopt a child sexual abuse policy as prescribed
<u>LB660</u>	<u>Krist</u>	General File	Provide for extension of a pilot project and a contract relating to case management
<u>LB682</u>	<u>Scheer</u>	General File	Provide for formation of allied school systems as prescribed
<u>LB689</u>	<u>Bolz</u>	Referral	Appropriate funds to the Department of Health and Human Services
<u>LB691</u>	<u>Bolz</u>	Referral	Increase a child and dependent care tax credit
<u>LB694</u>	<u>Seiler</u>	Referral	Change provisions relating to unlawful possession of a firearm at a school
<u>LB705</u>	<u>Coash</u>	General File	Change personal needs allowance under medicaid
<u>LB706</u>	<u>Harr</u>	Referral	Change provisions relating to sexual assault, child abuse, sexually explicit conduct, and child pornography and to provide for forfeiture of property as prescribed
<u>LB707</u>	<u>Conrad</u>	Referral	Change provisions and procedures relating to sexual assault, stalking, domestic assault, and use of an electronic communication device and to create the offense of harassment
<u>LB708</u>	<u>Kintner</u>	Referral	Exempt social security benefits from state income taxation
<u>LB724</u>	<u>Lautenbaugh</u>	Referral	Change provisions relating to unlawful possession of a firearm at a school
<u>LB728</u>	<u>Harms</u>	Referral	Change provisions relating to criminal history record information checks for certain employees of the Division of Developmental Disabilities of the Department of Health and Human Services
<u>LB729</u>	<u>Kolowski</u>	Referral	Create the Task Force on Expanded Learning Opportunities for School-Age Youth
<u>LB730</u>	<u>Kolowski</u>	Referral	Change reporting provisions under the Child Protection Act
<u>LB732</u>	<u>Kolowski</u>	General File	Change asset limitation for certain programs of public assistance
<u>LB748</u>	<u>Avery</u>	Referral	Change paternity provisions for a child conceived as a result of sexual assault
<u>LB754</u>	<u>Smith</u>	Referral	Provide funds for career education programs
<u>LB763</u>	<u>Janssen</u>	Referral	Require reports from state agencies on inefficient programs
<u>LB782</u>	<u>Lathrop</u>	Referral	Establish a return-to-learn protocol for students

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			who have sustained a concussion
<u>LB790</u>	<u>Howard</u>	General File	Require training for case managers as prescribed
<u>LB822</u>	<u>Lautenbaugh</u>	Referral	Change provisions relating to sexual assault of a child in the second and third degree
<u>LB826</u>	<u>McCoy</u>	Referral	Provide for a study relating to education incentives for high-need occupations
<u>LB834</u>	<u>Avery</u>	Referral	Change provisions relating to funding for school breakfast programs
<u>LB853</u>	<u>McGill</u>	Referral	Change and rename the Young Adult Voluntary Services and Support Act
<u>LB860</u>	<u>Nordquist</u>	Referral	Adopt health insurance requirements relating to dollar limits, rescissions, preexisting conditions, and dependents
<u>LB861</u>	<u>Karpisek</u>	Referral	Prohibit use and distribution of vapor products and other products derived from tobacco as prescribed and provide an exception and provide penalties
<u>LB864</u>	<u>Mello</u>	Referral	Allocate funds to the Early Childhood Education Grant Program
<u>LB872</u>	<u>Kolowski</u>	General File	Create the position of state school security director and provide duties
<u>LB877</u>	<u>Harr</u>	Referral	Change provisions relating to use of a deadly weapon to commit a felony
<u>LB879</u>	<u>Christensen</u>	Referral	Provide for a permit to carry a concealed handgun in a school
<u>LB887</u>	<u>Campbell</u>	Referral	Adopt the Wellness in Nebraska Act
<u>LB898</u>	<u>Legislative Performance Audit Committee</u>	Referral	Require reports for public benefit programs delivery system
<u>LB901</u>	<u>McGill</u>	General File	Provide for psychology internships through the Behavioral Health Education Center
<u>LB907</u>	<u>Ashford</u>	Referral	Provide for supervised release, reentry probation officers, create the Nebraska Center for Justice Research, and change presentence investigations and good time provisions
<u>LB908</u>	<u>Coash</u>	Referral	Change child guardianship, ward, and adoption for child out of wedlock provisions
<u>LB919</u>	<u>Mello</u>	Referral	Create the Open Data Advisory Board
<u>LB920</u>	<u>Coash</u>	General File	Adopt the Public Guardianship Act
<u>LB923</u>	<u>McGill</u>	Referral	Require training on suicide awareness and prevention for school personnel
<u>LB928</u>	<u>State-Tribal</u>	Referral	Change provisions of the Nebraska Indian Child

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	<u>Relations Committee</u>		Welfare Act
<u>LB931</u>	<u>Bolz</u>	Referral	Adopt the Nebraska Mental Health First Aid Training Act
<u>LB933</u>	<u>McGill</u>	Referral	Change provisions and define and redefine terms relating to labor trafficking and sex trafficking
<u>LB934</u>	<u>McGill</u>	Referral	Establish the position of Coordinator of Human Trafficking Prevention and provide duties
<u>LB936</u>	<u>Bolz</u>	Referral	Create and provide duties for the State Ward Permanency Pilot Project
<u>LB943</u>	<u>Nordquist</u>	Referral	Change the minimum wage rate
<u>LB944</u>	<u>Bolz</u>	Referral	State intent relating to funding for early childhood services
<u>LB947</u>	<u>Lathrop</u>	Referral	Change the minimum wage for persons compensated by way of gratuities
<u>LB952</u>	<u>Lautenbaugh</u>	Referral	Adopt the Working to Improve Nebraska Schools Act
<u>LB955</u>	<u>Dubas</u>	Referral	Adopt the Paid Family Medical Leave Act
<u>LB958</u>	<u>Cook</u>	Referral	Provide for appointment of a student achievement coordinator
<u>LB966</u>	<u>Davis</u>	Referral	Change provisions relating to the averaging adjustment in the state aid to schools formula
<u>LB967</u>	<u>Education Committee</u>	Referral	Change provisions relating to state aid to schools and funding for early childhood education programs
<u>LB969</u>	<u>Sullivan</u>	Referral	Change a limitation on appropriations for special education programs and support services
<u>LB972</u>	<u>Lautenbaugh</u>	Referral	Adopt the Independent Public Schools Act
<u>LB974</u>	<u>Mello</u>	Referral	Provide duties for certain divisions of the Department of Health and Human Services relating to budgeting and strategic planning
<u>LB984</u>	<u>Sullivan</u>	Referral	Change allocations from the Education Innovation Fund
<u>LB992</u>	<u>Howard</u>	Referral	Create the Early Childhood Data Governing Body
<u>LB999</u>	<u>Ashford</u>	Referral	Adopt the Criminal Justice Reentry and Data Act and create the Reentry Programming Board
<u>LB1000</u>	<u>Karpisek</u>	Referral	Change provisions relating to parenting plans
<u>LB1009</u>	<u>Haar</u>	Referral	Establish a pilot program relating to problem-based learning
<u>LB1009</u>	<u>Haar</u>	Referral	Establish a pilot program relating to problem-based learning

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<u>LB1021</u>	<u>Seiler</u>	Referral	Change provisions relating to the sealing of records of a juvenile
<u>LB1026</u>	<u>Bolz</u>	Referral	Create and provide for a Nebraska Educational Trust Fund
<u>LB1028</u>	<u>Coash</u>	Referral	Change the number of judges of the separate juvenile court as prescribed
<u>LB1034</u>	<u>McGill</u>	Referral	Change provisions and penalties relating to unlawful intrusion
<u>LB1051</u>	<u>Howard</u>	Referral	Adopt the Public Health Leadership and Development Act and appropriate funds to the Board of Regents of the University of Nebraska
<u>LB1059</u>	<u>Lautenbaugh</u>	Referral	Change membership of learning community coordinating councils
<u>LB1063</u>	<u>Lautenbaugh</u>	Referral	Require juvenile court approval to obtain a juvenile court proceeding transcript
<u>LB1064</u>	<u>Lautenbaugh</u>	Referral	Adopt the Teach for Nebraska Program Act
<u>LB1068</u>	<u>Sullivan</u>	Referral	Change provisions relating to learning communities
<u>LB1069</u>	<u>Sullivan</u>	Referral	Change provisions relating to education
<u>LB1070</u>	<u>Sullivan</u>	Referral	Change provisions relating to state aid to schools
<u>LB1077</u>	<u>Sullivan</u>	Referral	Adopt the Shared Responsibility for Access and Success Act
<u>LB1083</u>	<u>Garrett</u>	Referral	Change job training grant provisions relating to veterans
<u>LB1088</u>	<u>Conrad</u>	Referral	Change income eligibility provisions relating to federal child care assistance
<u>LB1090</u>	<u>Conrad</u>	Referral	Adopt the Healthy Families and Workplaces Act
<u>LB1093</u>	<u>Brasch</u>	Referral	Change provisions relating to juvenile facilitated conferencing and funding
<u>LB1099</u>	<u>Haar</u>	Referral	Provide for a study relating to state aid to schools
<u>LB1103</u>	<u>Education Committee</u>	Referral	Provide for a strategic planning process for education
<u>LB1106</u>	<u>McGill</u>	Referral	Change provisions relating to career academies

**Nebraska Children's Commission
Legislative Committee Hearings
As of February 18, 2014**

Legislative Committee Hearings

February 18, 2014
Education Committee
Room 1525

Document	Introducer	Description
<u>LB1106</u>	<u>McGill</u>	Change provisions relating to career academies
<u>LB826</u>	<u>McCoy</u>	Provide for a study relating to education incentives for high-need occupations
<u>LB754</u>	<u>Smith</u>	Provide funds for career education programs
<u>LB1064</u>	<u>Lautenbaugh</u>	Adopt the Teach for Nebraska Program Act
<u>LB842</u>	<u>Davis</u>	Change provisions relating to allocations to the Excellence in Teaching Cash Fund

February 24, 2013
Business and Labor
Room 2102

Document	Introducer	Description
<u>LB949</u>	<u>Business and Labor Committee</u>	Approve claims against the state
<u>LB950</u>	<u>Business and Labor Committee</u>	Deny claims against the state
<u>LB955</u>	<u>Dubas</u>	Adopt the Paid Family Medical Leave Act
<u>LB1090</u>	<u>Conrad</u>	Adopt the Healthy Families and Workplaces Act
<u>LB1036</u>	<u>Wallman</u>	Provide for biennial contracts for cities of the primary class under the Industrial Relations Act
<u>LB1073</u>	<u>Lathrop</u>	Require employers to e-verify immigration status of new employees
Appointment		Carlson, Joel - Commission of Industrial Relations

February 24, 2013
Education
Room 1525

Document Introducer Description

Appointment		Harwood, Frank - Technical Advisory Committee for Statewide Assessment
Appointment		Hain, Jim - Board of Educational Lands and Funds
<u>LB1081</u>	<u>Karpisek</u>	Change provisions relating to school-sponsored activities
<u>LB789</u>	<u>Bolz</u>	Provide for a survey relating to paraeducators
<u>LB958</u>	<u>Cook</u>	Provide for appointment of a student achievement coordinator
<u>LB834</u>	<u>Avery</u>	Change provisions relating to funding for school breakfast programs
<u>LB1009</u>	<u>Haar</u>	Establish a pilot program relating to problem-based learning

February 19, 2014

Karen Authier, Chairperson
Nebraska Children's Commission

Dear Karen Authier,

Legislative Bill 530 from the 2013 Legislative Session requires the Nebraska Children's Commission to provide to the Department of Health and Human Services (DHHS) and the Health and Human Services Committee of the Legislature a report including final recommendations regarding the adaptation or continuation of the implementation of a statewide standardized level of care assessment.

As noted in the reports provided previously, the Foster Care Reimbursement Rate Committee is diligently working to make progress on this effort. The committee has been:

- identifying additional work with the Level of Care Assessment tool to fully operationalize the instrument;
- identifying rates to recommend for the levels of care;
- Identifying additional recommendations for the implementation of the new base rates and level of care rates.

Although the committee is not at the point of having final recommendations we have established dates for future meetings and a proposed timeline for final recommendations for the July 2014 new foster parent rates (March Commission meeting). The attached report is a summation of the progress made by the Foster Care Reimbursement Rate Committee at the February 18, 2014 meeting.

A member from our committee, Sara Goscha, has resigned her position from DHHS. She served as a DHHS representative on the Foster Care Reimbursement Rate Committee. Director Pristow has recommended that Nanette Simmons, Policy Administrator with DHHS, be appointed in the vacated position. I ask that the Commission make the appointment of Ms. Simmons to the Foster Care Reimbursement Rate Committee.

Respectfully,

A handwritten signature in black ink, appearing to read "Peg Harriott". The signature is written in a cursive, flowing style.

Peg Harriott
Chairperson
Foster Care Reimbursement Rate Committee

Foster Care Reimbursement Rate Committee
Report to the Children's Commission
February 19, 2014

The Foster Care Reimbursement Rate Committee had its fifth meeting on February 18, 2014. The workgroup assigned to further advance the Level of Care Assessment tool also met on February 18, 2014 prior to the full committee meeting.

The fifth meeting addressed the following:

DHHS Foster Care Rate Implementation Plan:

- Director Pristow presented and updated the committee on DHHS's implementation plan for the new foster care rates: base rate, level of care rate, and agency support rate.
- A team from the Foster Care Reimbursement Rate Committee was invited to participate in a national third-party review of the proposed foster care rates with Director Pristow. The review will be scheduled to be completed so as to further inform the committee's recommendations for the March 2014 Commission meeting.

Advancement of the Standardized Level of Care tool:

- Review of and further support of the proposed Pre-assessment and Level of parenting (Essential, Enhanced and Intensive) rates to be used July 1st, 2014.
- Identified and made changes to the Level of Care (LOC) tool and related definitions based on pilot results.
- Reviewed the value and ability to link the SDM, CANs, and LOC tools when setting a rate for a foster placement. Based on the results of the pilot, identified the need to further assess the results of using and linking the SDM and CANS to the LOC tool during the first year of full implementation.
- Reviewed again the importance of the initial and on-going training, communication, and quality assurance plans in regards to the implementation of the LOC tool. The work group referenced the recommendations of the initial Level of Care work group as a resource for DHHS, NFC and Probation.
- Reviewed the handling of respite care in regards to foster care rates.
- In preparation for the committee's future reporting responsibilities, developed a list of data and information to be collected during the first years of implementation to fully assess the effectiveness of the new foster care rates and NCR (LOC) tool going forward.
- Recommended that NFC and Probation develop implementation plans for the new foster parent rates: base rate, level of care rate and agency support rate.

Agency Support/Services Rate: tabled until DHHS asks the committee for further input.

Next full committee meeting is tentatively scheduled for March 4, 2014.

Report completed by:



Peg Harriott
Foster Care Reimbursement Rate Committee

Workforce recruitment and stability: Key Recommendations

Staff Recruitment

- Increase requirements for frontline staff
- Recruit in and outside the state of NE
- Employ selection tool using success criteria for initial hiring

Training and Development

- Guidelines for GALs and all other collaborative entities clearly defined, communicated and strictly followed
- Stay on track with the DHHS Protection and Safety & Juvenile Services New Worker Training outline
- Develop (or adapt existing) training for specialists (at a minimum SMEs) in categories of child welfare and juvenile justice
- Increase mentors (per current DHHS plan) to get to the 51 needed across state
- Broaden education to include judges and others in training

Retention

- Follow caseload reduction plan
- Increase expectations for and accountability of supervisors
- Develop and implement retention strategy to be reviewed and measured (turnover reduction and staff development)

Salary and Compensation

- Consider new job classification to compare and increase salaries
- Continue differential for mentors
- Bigger increase for becoming supervisors

Career Trajectories

- Three to four years in the “trenches” and apply selection tool to determine supervisor readiness and success in role
- Stepped levels for caseworkers determined by achieving key competencies and excellent performance. (eg. A senior level caseworker or levels 1, 2, 3, and 4. Salary increase would be part of increasing the level.)
- Tuition reimbursement and load forgiveness with strictest guidelines for those serving in most difficult areas (language challenges, geographic challenges)
- Education incentive (eg. MSW)

Nebraska Children's Commission

February 9, 2014 Meeting

Community Ownership Workgroup

This workgroup has gathered information on community collaborative, including research and best practices. The workgroup is working to build a model based on the principles of prevention. The next step will be to review and finalize the model and look at state infrastructure.

The group identified a need for a common set of community indicators for different systems, which will require crossover with the other subcommittees. The group will identify gaps in services and look at partners in other systems. There needs to be a broad focus on array of services for children. Emergency mental Health Services are an example of a gap in services. This gap in services has resulted in taking children into State custody as the default delivery of mental health services.

The next steps of this workgroup will be to bring their model to Nebraska Children's Commission.

One item of note is the overlap between the Community Ownership and Systems of Care group. The System of Care has a team looking at services and supports, so this may be a resource for the group. The System of Care group will present to the Commission in April, and the Community Ownership group plans to present to the Commission in March. This will create an opportunity to look at the overlap between these two groups.

Information Technology Workgroup

This workgroup stated that it is actively working on its goals. The Prevention Partnership and the Legislative Planning Committee have been identified as other groups doing complimentary work to the workgroup's goals.

The group identified legal issues regarding information sharing as a barrier to the achievement of their goals. However, the group has done research indicating that the legal concerns can be effectively addressed. Leadership and a hard push may be necessary to address these concerns.

The group identified next steps as identifying possible necessary statutory changes, soliciting an Attorney General's opinion, and considering available resources to achieve their goals.

Workforce Workgroup

This group stated that it was in the process of defining salary and compensation. Additional research was to be done on starting salaries, raises and differentials. Tuition reimbursement and loan forgiveness are two additional components of salary that should be explored. The group would like to see careers and professions elevated for both case workers and court professionals. Direct service providers and supervisors should be considered. Due to the vast scope of this project, the workgroup has decided to narrow its focus to state employees, with the belief that a rising tide lifts all ships.

The group has identified cost as a challenge; however worker turnover is a cost as well. A lack of case plan impediments permanency. The group identified compensation as the issue to begin to focus on, due to the importance and benefit.

The group will need additional resources later, and anticipates progress by March, but not full completion.

Juvenile Services

This Committee has made many recommendations, and some will need statutory change. The Committee has identified priorities among these recommendations.

There is relevant legislation in the form of LB464 that has resulted from the Committee. The group suggested that the leadership of the Commission look at the model for delivery of services to the Juvenile Justice Population. There are entities involved in the Commission that may be able to implement policies without legislation.

Young Adult Voluntary Services and Support Committee

This committee indicated that it would have a status report in March for the Commission. The committee will look at the needs of the youth in the juvenile justice system.

Psychotropic Medication Committee

The Psychotropic Medication Committee is exploring a research proposal and will update the Commission on the status.

Foster Care Rate Committee

This committee is continuing its work. At this time, there is a planned third party evaluation of the rates, and the Committee had planned to have the rates for the review of the Commission in March. Note that since the time of the February Commission meeting, unforeseen circumstance has prevented the third party review of the rates as scheduled.

Nebraska Children's Commission Prioritization and Next Steps

The Commission identified next steps. In May, the Commission plans to have Deb Burnight facilitate the development of a second Strategic Plan. This will result in a product for the June meeting. The Commission does not have any further report requirements, but may wish to make further reports to the Legislature. The Commission will re-evaluate the format of meetings moving forward.

Nebraska

System of Care Planning Grant



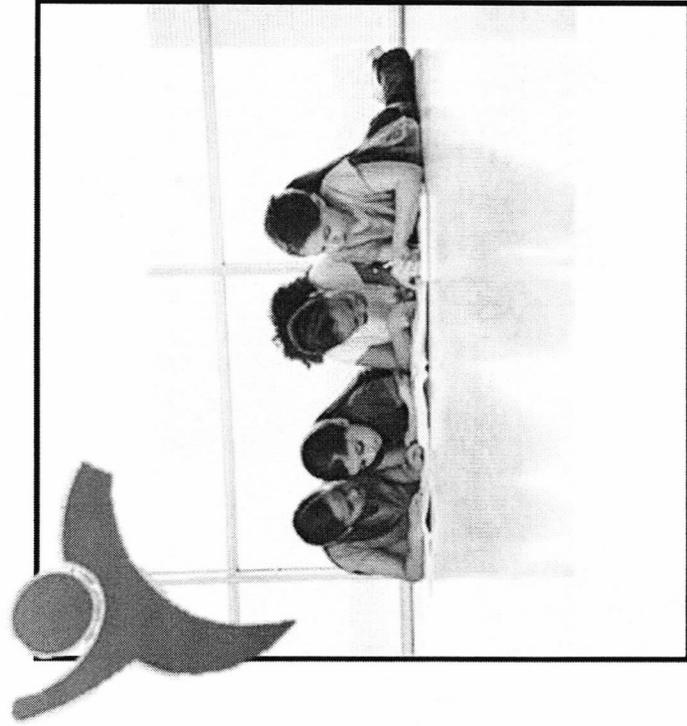
DHHS Systems of Care Planning Project
Division of Behavioral Health,
301 Centennial Mall South, Lincoln, NE 68509
402-471-9196

Email: dhhs.soc@nebraska.gov;
Web site: www.dhhs.ne.gov/soc



ABOUT THE PROJECT

Nebraska is bringing together youth, families, child-serving systems and providers and Nebraska leaders to develop a statewide comprehensive strategic plan for a prevention oriented, culturally and linguistically appropriate, and family-driven, youth-guided System of Care for children/youth with serious mental health challenges and their families. The planning year is devoted to preparing a “framework” to infuse care through a system. A system of care is not a single program, but rather coordination and integration of multiple programs and services across partnerships.



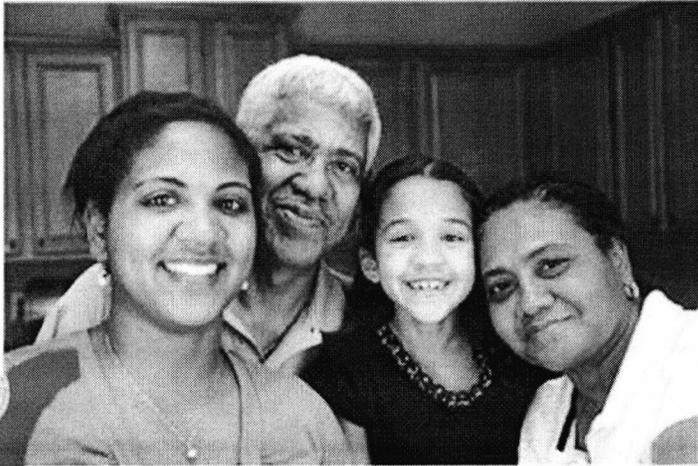
KEY COMPONENTS of a SYSTEM OF CARE

- Individualized care
- Community Coordination and Integration
- Service accessibility
- Family and youth partnership - system, program and practice levels
- Cultural competence - system, program and practice levels



Core Values

Nebraska's System of Care Will Be:

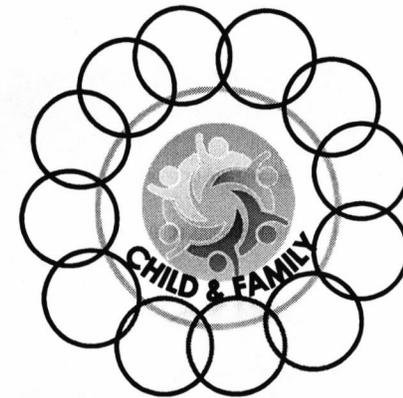
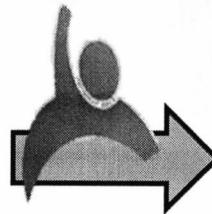
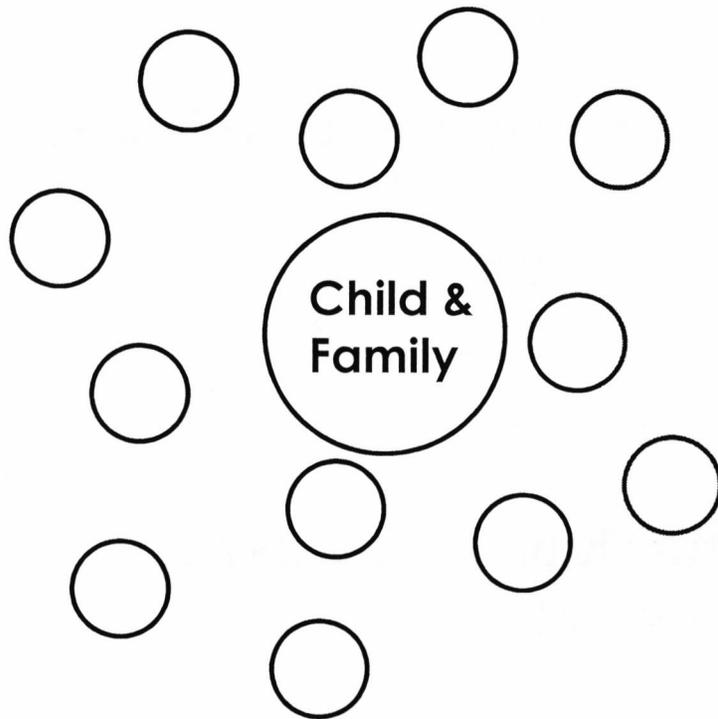


- Family Driven and Youth Guided
- Community and Partnership-based Processes and Relationships
- Culturally and Linguistically Competent



Planning Will Take Nebraska

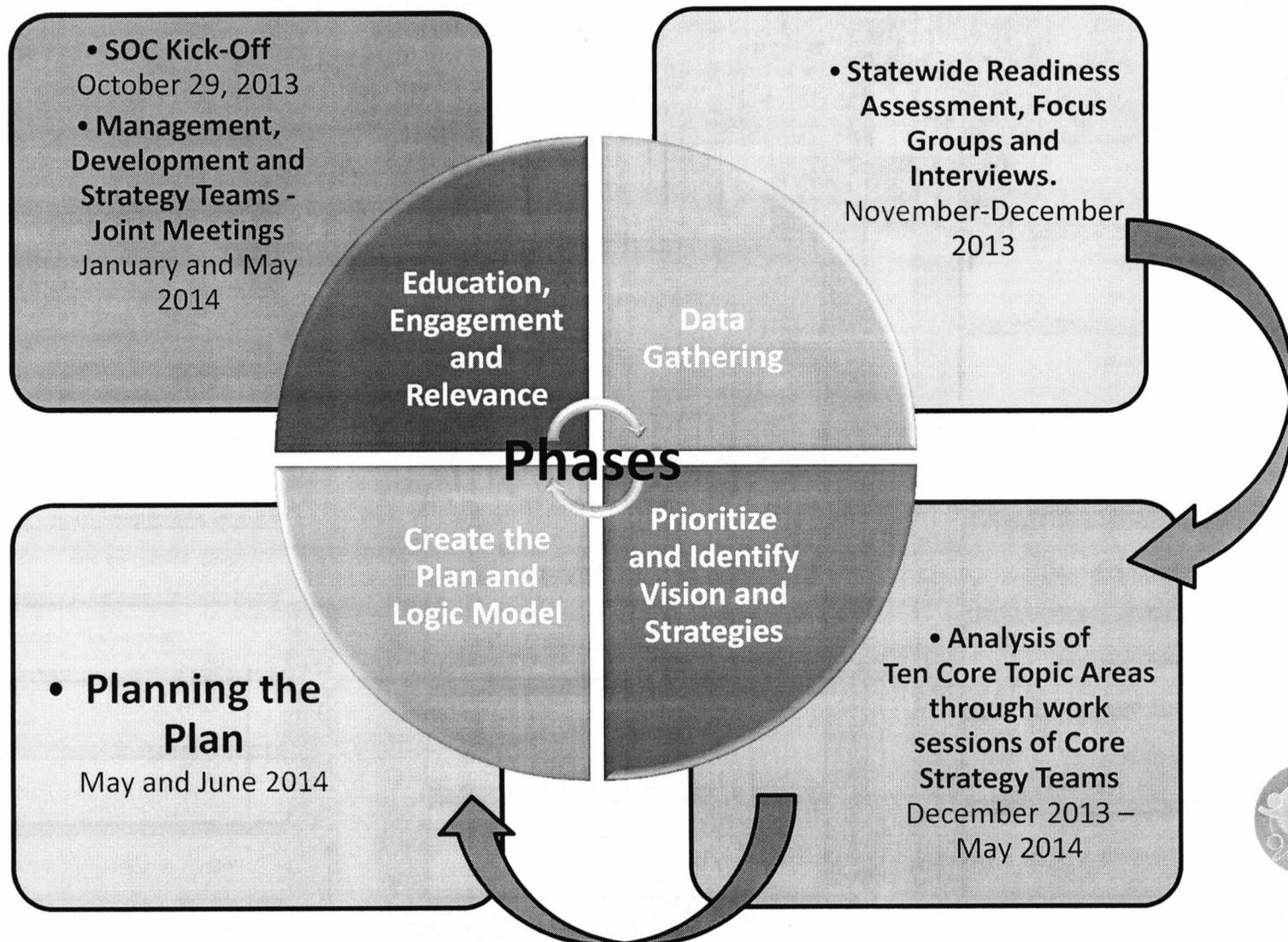
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.....to here



Work is Accomplished Through Planning Phases and Processes



System of Care Project Management Team (PMT)

- Tri-Chairs
Family, DBH, CFS
- Family/Youth Organizations
- Behavioral Health (DBH)
- Children & Family Services (CFS)
- Medicaid & Long Term Care
- Developmental Disabilities
- Public Health
- Office of Probation

System of Care Development Team (SOC-DT)

- Youth and Families
- Child-Serving Systems
- Child-Serving Providers
- Private Partners (NCCF)
- Nebraska Children's Commission
SOC Representative
- American Indian Tribes
- Consultants (TriWest/PPC)

System of Care Core Strategy Teams (CST)

- Youth and Family Partnership
- High Fidelity Wraparound /
Family Centered Practice
- Financing Strategies
- Trauma Informed
Services and Supports
- Workforce Development
- Social Marketing and Communication
- Services and Supports
- Culturally and Linguistically Appropriate
Services and Supports
- Prevention and Early Intervention
- Policy, Administrative and Regulatory



Today's Challenge

- Re-think and Re-start
 - All the moving pieces
 - Culture Change
- Teamwork is an individual skill
 - Where are you as an individual “partner”?
 - Conditioned “who’s in charge”. Give and be accountable for equal partnership
- What can I commit to in this planning and change process? What do you agree to stop doing and start doing?
 - Three levels of culture change



NEBRASKA SYSTEM OF CARE PLANNING PROJECT

Planning for Transformation through Partnership

SOC

**Draft Strategic Plan
Now Ready for Review
Consumer Feedback Welcomed!**

Visit the SOC web site at:

<http://www.dhhs.ne.gov/soc>

- ✓ Review the plan**
- ✓ Take the survey**

**Questions or other comments about the
System of Care Planning Project?**

Send them to:

dhhs.soc@nebraska.gov

**Nebraska Department of Health and Human Services
Divisions of Behavioral Health and Children & Family Services**



Research Proposal

Hailey Kimball, University of Nebraska Medical Center- College of Nursing
Margo Lorimer, University of Nebraska at Omaha- Masters in Counseling

Specific Aims

Introduction to the topic:

Research Topic:

Assessing the state of Nebraska's prescribing practices of psychotropic medications to children and adolescents across various age groups and environmental areas of care. More specifically, evaluating prescribing patterns by prescribers and the rate of psychotropic medications being prescribed within the past decade.

Research Problem (Justification):

There is limited literature on the state of Nebraska documenting the rate of psychotropic meds being prescribed to children and adolescents within the last decade. The use of psychotropic medications within the last 15 years has tripled in the United States. Many of those prescribed medications were based on *unclear* scientific evidence. Of big concern, are the prescribing practices to vulnerable populations, which include children in rural areas. The state of Nebraska needs to identify their prescribing patterns (first line, second line treatments) for children and adolescents and for which diagnosis, prescribing patterns by prescriber: general practitioner vs. psychiatrist, and explore the rural vs. urban environment comparison (specifically, due to the lack of psychiatric resources outside of Omaha/Lincoln). Limited resources may create a dependence on medications as first-line treatments (via mono-therapy), where as national best practice guidelines express a more collaborative approach using pharmacological treatments in conjunction with psycho-behavioral therapies.

Research Purpose: The purpose of this research is to gain a better understanding of how psychotropic medication is being used in the treatment of children with mental and behavioral issues in Nebraska. More specifically, we want to assess the rate of medications being prescribed to children and adolescents across rural and urban environments of care and understand how that relates to different age groups.

- **Independent Variables:** Rural and urban environments, age groups (0-18), prescribers (General Practitioners and Psychiatrists)
- **Dependent Variables:** Rate of psychotropic medication being prescribed
- **Population:** Children & Adolescents (0-18)
- **Setting:** Nebraska, USA
- **Measurable:**
- **Audience:** This research project will benefit professional direct care providers working with children and adolescents. Especially, professionals treating certain mental health diagnosis by highlighting the prescribing patterns.

Research Questions:

- What psychotropic medications are being prescribed to children and adolescents and for what indication/ diagnosis
- At what rate are these medications being prescribed to children and adolescents within the last 10 years, within the last 20 years?
- Does the living environment relate to (associate or correlate with) the amount of medications prescribed to children and adolescents (ex: home (family services), treatment group homes, residential treatment care, and foster care)? **(Which question is more feasible to answer?)**
- Does the environment (rural vs. urban comparison) affect the amount of medications prescribed due to the differences in availability of resources? **(Which question is more feasible to answer?)**
- Does age affect the number of medications children are prescribed (age groups 0-5, 6-10, 11-15, 16-18)?
- What percentage of children and adolescents are using psycho-behavioral therapies in conjunction with his/ her medications?

Background/ Significance

Significance:

Brief literature review:

Conceptual framework:

- Develop a map of the study framework
- Define concepts in the map
- Describe relationships among concepts/variables in the map
- Link concepts to study variables

Research Design & Methods

Research design:

Sample, inclusion and exclusion criteria and selection methods:

Size of sample:

Describe all the major variables in the study and how they are measured (the operational definitions). Include reliability and validity information for the questionnaires.

Step-by-step outline of the protocol/procedures:

Description of the data analysis plan for each aim (research question or hypothesis):

References