

Nebraska Children’s Commission
 Forty-Third Meeting
 April 18, 2017
 9:00 a.m. – 3:00 p.m.
 Southeast Community College, Rooms V107 & 109
 8800 O Street, Lincoln, NE 68520

I. Call to Order

Chairperson of the Nebraska Children’s Commission (Commission), Beth Baxter, called the meeting to order at 9:06 a.m.

II. Roll Call

Commission Members present (14):

Teresa Anderson (10:44)	Kim Hawekotte	Susan Thomas (9:10)
Karen Authier	Felicia Nelsen	Kelli Wacker
Beth Baxter	David Newell	Paula Wells
Holly Brandt	Deb O’Brien	Bill Williams
Vernon Davis	Lisa Story	

Commission Members absent (2):

Jennifer Chrystal-Clark	Janine Uchino
-------------------------	---------------

Ex Officio Members present (3):

Jeanne Brandner	Judge Linda Porter	Doug Weinberg
-----------------	--------------------	---------------

Ex Officio Members absent (7):

Sen. Kate Bolz	Courtney Phillips	Deb VanDyke-Ries
Michele Borg	Sen. Merve Riepe	
Sen. Patty Pansing-Brooks	Julie Rogers	

A quorum was established.

Guests in Attendance (13):

Jodie Austin.....	KVC Nebraska
Doug Beran.....	DHHS, Division of Children and Family Services
Bethany Connor Allen.....	Nebraska Children’s Commission
Manuel Escamilla.....	DHHS, Division of Children and Family Services
Amanda Felton.....	Nebraska Children’s Commission
Peg Harriott.....	Child Saving Institute
Mary Ann Harvey.....	Nebraska Court Improvement Project
Kalissa Holdcraft.....	Nebraska Court Improvement Project
Doug Kreifels.....	DHHS, Division of Children and Family Services
Nanette Simmons.....	DHHS, Division of Children and Family Services
Kristen Stiffler.....	Nebraska Legislative Council
Lindsay Stanley.....	Behaven Kids
Ivy Svoboda.....	Nebraska Alliance of Child Advocacy Centers

a. Notice of Publication

Recorder for the meeting, Amanda Felton, indicated that the notice of publication for this meeting was posted on the Nebraska Public Meetings Calendar and Nebraska Children’s Commission websites in accordance with the Nebraska Open Meetings Act. The publication would be kept as a permanent attachment with the meeting minutes.

b. *Announcement of the placement of Open Meetings Act information*

A copy of the Open Meetings Act was available for public inspection and was located on the sign in table near the entrance of the room.

III. Approval of Agenda

It was moved by Paula Wells and seconded by Deb O'Brien to approve the agenda as presented. There was no further discussion. Roll call vote as follows:

FOR (12):

Karen Authier	Kim Hawekotte	Lisa Story
Beth Baxter	Felicia Nelsen	Susan Thomas
Holly Brandt	David Newell	Kelli Wacker
Vernon Davis	Deb O'Brien	Paula Wells

AGAINST (0):

ABSENT (4):

Teresa Anderson	Janine Uchino
Jennifer Chrystal-Clark	Bill Williams

ABSTAINED (0)

MOTION CARRIED

IV. Consent Agenda

- a. *Minutes of the January 18, 2017 Nebraska Children's Commission Meeting*
b. *Bridge to Independence Advisory Committee Member Nominations*

- **Representative of the Executive Branch of government:**

- o Alyson Goedken – Administrator with DHHS, Division of Children and Family Services

It was moved by Karen Authier and seconded by Paula Wells to approve the consent agenda as presented. There was no further discussion. Roll call vote as follows:

FOR (12):

Karen Authier	Kim Hawekotte	Lisa Story
Beth Baxter	Felicia Nelsen	Susan Thomas
Holly Brandt	David Newell	Kelli Wacker
Vernon Davis	Deb O'Brien	Paula Wells

AGAINST (0):

ABSENT (4):

Teresa Anderson	Janine Uchino
Jennifer Chrystal-Clark	Bill Williams

ABSTAINED (0)

MOTION CARRIED

V. Chairperson Report

Chair Baxter began by noting that most of the bills that the Commission had provided testimony for, were derived from or supported recommendations made in the annual report. She also took an opportunity to refer the members to the [Nebraska Child Welfare Blueprint Report](#) which was included in their packet.

VI. Legislation Overview and Legislative Resolution Discussion

a. Discussion of Relevant Bills

Kristen Stiffler, Legal Counsel to the Health and Human Services Committee of the Legislature, provided a quick summary of bills including [LB225](#), [LB336](#), and [LB179](#). She expanded on LB225 noting that several bills had been amended into it to ensure their passage in the current session. Included in the bill was language to extend and expand the Alternative Response (AR) program, to establish the Children and Juveniles Data Feasibility Study Advisory Group, and language surrounding the Normalcy Task Force's name, tasks, and scope. Stiffler remarked that LB179 was still sitting in Committee, and given the large fiscal not, would most likely not make it out this session. Bethany Connor Allen, Policy Analyst with the Commission, quickly reviewed the other relevant legislation. These included LB226, LB189, and LB158.

b. Review of Commission Budget

Chair Baxter also took the opportunity to update the members on the status of the Commission budget. The hearing had taken place on March 2nd, at which point the Commission had requested funding of \$180,000 per year within the next fiscal cycle. Stiffler indicated that there would most likely be a budget bill proposed on Friday, to be discussed on the following Monday.

VII. Foster Care Reimbursement Rate Committee Update

Peg Harriott, Co-Chair of the Foster Care Reimbursement Rate Committee (FCRRC) and President of Child Saving Institute, began by giving an overview of the charge given to the group. She explained how the Treatment Family Care workgroup had worked to establish a base service array to present to the Commission for feedback prior to developing a rate for reimbursement. She then introduced Jodie Allen, Chair of the TFC Workgroup and President of KVC Nebraska.

a. Treatment Family Care Workgroup Update

Jodie Austin, Chair of the Treatment Foster Care (TFC) Workgroup and President of KVC Nebraska, began her update by discussing the basic elements. Austin noted the efforts the group to examine the existing information from the Nebraska Medicaid Regulations, Nebraska Medicaid State Plan Amendment, Treatment Foster Care Oregon, Family Focused Treatment Association (FFTA) Guidelines, and Professional Foster Care program information from Nebraska Families Collaborative. The workgroup had identified a series of [service elements](#) upon which a rate structure would be built. Austin highlighted the change in name to Treatment Family Care to ensure that it was not restrictive in who could receive treatment.

Austin went on to explain the various elements including agency licensing requirements, guidelines for program use, determination as to if treatment was clinically necessary, staffing patterns, multi-disciplinary team involvement, treatment plan, and role and support to treatment parents. It was clarified the treatment parents were not required to be stay-at-home parents, but must be available for crisis or emergency situations. Additional training would be required of the treatment parents with training looking different depending on if the placement was in the biological home, a traditional foster home, or kinship/relative foster home.

The issue of medically fragile youth came up in discussion. The workgroup had recommended that the medically fragile and the developmental delayed populations be examined under the banner of the Level of Responsibility Workgroup and contained within the Nebraska Caregiver Responsibility Tool. There was debate as to if this was the most appropriate action. Concern was raised that if these populations were not included in the TFC rates, that they would become lost within the system.

Discussion on this issue continued at length. It was argued that a holistic approach to healthcare needed to be taken that included behavioral, mental, and physical health. The group conversed on the complications regarding funding mechanisms and the use of blended funding. It was also discussed how Medicaid needed to be at the table to help navigate future work to create the necessary State Plan

Amendment. It was agreed that the System of Care needed to be involved in the discussion as Treatment Foster Care was an element that they were examining as well.

While the group still felt that the populations of medically fragile and developmentally disabled needed to be examined, it may take expanded efforts to accomplish this goal. The Level of Responsibility and the Treatment Family Care Workgroups may need to come together to examine the issue of the two additional populations. The potential of legislative involvement or a Legislative Resolution was proposed as a way ensure all parties were at the table to move the project forward.

It was moved by Vernon Davis to thank the Treatment Family Care Workgroup for their efforts and accept the draft service elements as presented with additional work to be done through a Legislative Resolution. There was no further discussion. Roll Call vote as follows:

FOR (8):

Holly Brandt	Felicia Nelsen	Kelli Wacker
Vernon Davis	Deb O'Brien	Bill Williams
Kim Hawekotte	Lisa Story	

AGAINST (5):

Karen Authier	Dave Newell	Paula Wells
Beth Baxter	Susan Thomas	

ABSENT (3):

Teresa Anderson	Jennifer Chrystal-Clark	Janine Uchino
-----------------	-------------------------	---------------

ABSTAINED (0)

MOTION CARRIED

VIII. Psychotropic Medication Committee Update

Paula Wells was given the floor to discuss the work of the Psychotropic Medication Committee. Wells shared a [handout](#) of the completed and in progress efforts of the Committee. She also commended the Informed Consent Taskforce that had been meeting regularly to address many of the issues still in progress. Wells commented that one of the biggest issues to be address is that of data sharing between the involved agencies.

IX. Normalcy Task Force Update

Vernon Davis, Co-Chair of the Normalcy Task Force and a former foster youth, shared information on the progress of the group. He then gave the floor to Kim Hawekotte, Co-Chair of the Task Force's Grievance Subcommittee.

a. Grievance Subcommittee Recommendations

Kim Hawekotte, Co-Chair of the Grievance Subcommittee and Executive Director of the Foster Care Review Office, summarized the [handout of recommendations](#) from the group. She discussed the lengthy conversation the group had had around the informal grievance process, noting that it often served as an organic way to resolve issues but was nearly impossible to track. Hawekotte also reviewed the Central Navigator position, remarking that additional data would need to be collected to determine if this position was necessary.

Hawekotte discussed the many grievance process that were already in existence among the many agencies working with system involved youth. The point was also raised that many of the grievances of the youth could, and should, be taken on by their Guardian Ad Litem (GAL). The grievance recommendations provided a framework to ensure that no matter the placement of the youth, they were provided an opportunity to be informed and utilize the grievance system to have their voice heard.

It was moved by Paula Wells and seconded by Susan Thomas to accept the report of recommendations from the Grievance Subcommittee of the Normalcy Task Force. No further discussion ensued. Roll call vote as follows:

FOR (13):

Teresa Anderson
Karen Authier
Beth Baxter
Holly Brandt
Vernon Davis

Felicia Nelsen
David Newell
Deb O'Brien
Lisa Story
Susan Thomas

Kelli Wacker
Paula Wells
Bill Williams

AGAINST (0):

ABSENT (2):

Jennifer Chrystal-Clark

Janine Uchino

ABSTAINED (1):

Kim Hawekotte

MOTION CARRIED

X. Department of Health and Human Services Update

An update for the Department of Health and Human Services (DHHS) was provided by the Director of the Division of Children and Family Services (DCFS), Doug Weinberg. Weinberg began by reviewing the efforts of DCFS. One item of note was the Community Based Prevention Initiative lead by the first lady, Susanne Shore. York planned to open a new community response site which would be coordinated with a public announcement from the Initiative. Other items under this division included a poverty screening effort at the hotline level, a pilot for family focused care management, and a brief update on Alternative Response progress.

a. Service Array Status Update

Weinberg remarked on the service array assessment indicating that the consultant's final report would be available on the website shortly. One highlight included a recommendation for family centered treatment which targeted families with a permanency plan of reunification. Outreach to providers had begun to get an idea of those interested in this program type. Other services mentioned included programs to address parental substance, peer coaching, mentoring, mother/child inpatient treatment, and programs to improve access to assessment and treatment.

Director Weinberg touched on the work of the other division within DHHS including Medicaid's long-term care redesign, completed Memorandums of Understanding between the Managed Care Organizations (MCOs) and the Division of Behavioral Health, and work on the rate rebase within the Department of Developmental Disabilities. A request was made for the number of developmentally disabled (DD) who were in congregate care. This prompted discussion on the limited resources available for DD individuals and the need to address some of the gaps faced by this population.

b. Update on Round 3 Children and Family Services Review (CFSR)

A review of the CFSR was provided by Doug Beran, Research, Planning and Evaluation Administrator with the DCFS. Beran referred members to the [handout](#) which provided data on the CFSRs. He indicated that the Division had done well so far, attaining a passing score on 6 of the 7 measures.

The issue of permanency within 12 months for youth is a struggle to attain, but could be attained. Partnership efforts between DCFS and the Court Improvement Project (CIP) was in progress to identify what steps were necessary to improve scoring in this area. Beran gave one example of a barrier in this area – a change of placement into a relative or kinship home – and the work happening to resolve it – using data to identify why the relative/kinship home was not the original placement.

Beran continued by providing a summary of what the review process looked like. A random selection of cases would be examined. The Federal review would also pull in stakeholders for interviews, several of which may be members of the Commission. Even with the struggle towards permanency, the state was doing well and making efforts toward continued improvement.

XI. Lunch

The Committee recessed for lunch at 12:00 p.m.

The meeting resumed business at 12:40 p.m.

XII. Probation Update

Jeanne Brandner, Deputy Administrator with the Administrative Office of Probation, presented an update on the work of the Juvenile Services Division of Probation. She indicated that they too were closely monitoring their budget status and still awaiting results of what the next fiscal year would look like. The focus of the division was on status youth and how their needs differed from the delinquent population. Brandner briefly mentioned a pilot project happening in Lancaster County that utilized the Juvenile Inventory for Functioning (JIFF) assessment tool. She also informed the members that Dr. Richard Wiener was nearing completion of the evaluation of the Youth Level of Service/Case Management Inventory (YLS/CMI) assessment tool. Lastly, Brandner discussed the pilot of the service recommendation matrix that helps to identify the best approach and program for probation involved youth.

XIII. Educational Discussion of Title IV-E funding

Doug Kreifels, Divisional Financial Officer with DHHS, DCFS, provided an [overview of Title IV-E funding](#). He began by introducing Nanette Simmons, Administrator with DCFS, and Manuel Escamilla, Program Specialist with DCFS. Kriefels informed the members that IV-E funds were federal social security funds accessed by DHHS to cover the costs of child welfare services. He delved into the intricacies of the eligibility requirements for funding. The conversation focused on the issue of relative and kinship homes who would not be able to access IV-E funding without taking the steps to become a licensed foster home. With the increase of these types of placements, it was felt that there may need to be a push to incentivize licensing for relative and kinship homes.

Lengthy discussion continued on how to best access IV-E funding given the eligibility barriers. Income was the top reason for ineligibility for funds. The Aid to Families with Dependent Children Eligibility in place for IV-E funds are still based on 1996 standards, which is not reflective of the current economic status of today's population. Simmons noted that work was in progress to alter the IV-E determination period for youth entering the Bridge to Independence Program. Rather than having eligibility be determined by their IV-E status as a foster youth, their income at age 19 would be used. The members felt it was important to continue to examine the ways in which IV-E funds could be better accessed, and thanked Doug, Nanette, and Manuel for their time and information.

XIV. Bridge to Independence Advisory Committee Update

Co-Chair of the Bridge to Independence (B2i) Advisory Committee, Jeanne Brandner, shared an overview of the work being done by the Committee. Brandner noted that the Evaluation and Data Collection Workgroup under the Committee had been reestablished. The group was also working with DHHS to identify ways to tackle barriers that the B2i program was facing. Other efforts of the Committee included the potential for a program evaluation and navigating how best to maximize Title IV-E funds.

XV. Juvenile Justice Home-Based Initiative

Kalissa Holdcraft, Project Coordinator for the Juvenile Justice Home-Based Initiative Grant, shared information in the effort with the Commission. She explained that the Initiative was a collaborative project between the CIP and the Juvenile Services Division of Probation. The ultimate goal was to reduce the amount of out-of-home placements in the state, specifically for juvenile justice involved youth. Holdcraft indicated that the initiative focused on two different areas: culture change through education and positive outcomes experienced by youth, families, and communities as well as an increase of in-home services available throughout the state.

There were two services in the progress of implementation throughout the state currently. They were Multisystemic Therapy and the Boys Town Ecological In-home Family Treatment Program. Both were

programs that went inside the home to target the youth, families, and communities to ensure the necessary support to keep the youth in their home and achieve positive outcomes.

XVI. Public Comment

Chair Baxter opened the floor for public comment. Introductions were given by Lindsay Stanley with Behaven Kids and Mary Ann Harvey with the Nebraska Court Improvement Project.

XVII. New Business

There was no new business to discuss.

XVIII. Upcoming Meeting Planning

Chair Baxter took a moment to remind members that July would mark a change in Executive Committee officers. She would move to the position of past Chair, Dave would move to Chair, and nominations would be taken for the position of Vice Chair. Nominations for Vice Chair would be submitted by the Structure Task Force for approval of the Commission. Acceptance of the Vice Chair role would mean a 6 year commitment to the Executive Committee of the Children's Commission. Chair Baxter encouraged anyone interested to let herself or Commission staff know.

The Chair noted that the next meeting would be the Commission's Annual retreat. The retreat would focus on strategic planning for the year ahead, since many of the goals from the previous plan were completed or in motion.

XIX. Adjourn

It was moved by Paula Wells and seconded by Holly Brandt to adjourn the meeting. Motion carried by unanimous voice vote. The meeting adjourned at 2:10 p.m.

AF