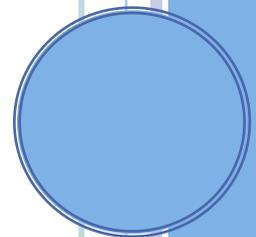


STATEWIDE STRATEGIC PLAN FOR CHILD WELFARE AND JUVENILE JUSTICE

Nebraska Children's Commission

The Nebraska Children's Commission is a high-level leadership body created by the Nebraska Legislature and has created this statewide strategic plan pursuant to and in compliance with Neb. Rev. Stat. §43-4202.

November 2017



Nebraska Children’s Commission

Mission and Goals

Mission Statement: The Nebraska Children’s Commission works as a high-level leadership body with membership from the legislative, executive, and judicial branches along with system stakeholders to improve the safety and well-being of all children and families in Nebraska.

Goals

Workforce: A strong workforce supports the well-being of children, families, and communities.

Prevention: Communities are empowered to prevent child welfare and juvenile justice involvement through strong partnerships and collaboration.

Data: Data systems are integrated and coordinated to support information exchange and transparency.

System of Care: Public and private agencies, families, and communities partner to create a statewide seamless system of care supporting well-being.

Legal Parties: The juvenile court system, including the Juvenile Code, attorneys, and court processes, improves the well-being, safety, and permanency of children.

For more information or to get involved, please visit childrens.nebraska.gov, or email necc.contact@nebraska.gov.

STATEWIDE STRATEGIC PLAN FOR CHILD WELFARE AND JUVENILE JUSTICE

Nebraska Children's Commission

Organizational Description

The Nebraska Children's Commission (Commission) was created in 2012 by the Nebraska State Legislature to provide a leadership forum for collaboration on child welfare and juvenile justice reform among the three branches of government and public and private stakeholders at the state, regional, and community levels. The leadership and vision of Commission members allows the body to take a long term view of investment in children and families to create a healthy vibrant state where all people reach their full potential.

Mission

The Nebraska Children's Commission works as a high-level leadership body with membership from the legislative, executive, and judicial branches along with system stakeholders to improve the safety and well-being of all children and families in Nebraska.

Goals

Goal 1: A strong workforce supports the well-being of children, families, and communities.

Goal 2: Communities are empowered to prevent child welfare and juvenile justice system involvement through strong partnerships and collaboration.

Goal 3: Data systems are integrated and coordinated to support information exchange and transparency.

Goal 4: Public and private agencies, families, and communities partner to create a seamless system of care supporting well-being.

Goal 5: The juvenile court system, including the Juvenile Code, attorneys, and court processes, improves the well-being, safety, and permanency of children.

Goal Number 1

A strong workforce supports the well-being of children, families, and communities.

The child welfare workforce supports children and families to build the foundation of well-being necessary to reach their full potential. A strong connection with a caseworker provides children with a stable relationship to help them face the challenges of system involvement, attain permanency, and ultimately successfully transition to adulthood. When system involved youth reach their full potential, the community and economy benefits as the youth goes on to enter the workforce and have their own stable family.

A strong workforce has been the focus of the Commission since its creation in 2012. The Legislature affirmed the importance of the workforce by requiring the Commission to analyze and make recommendations related to the child welfare workforce.

Objectives

- Recognize caseworkers and caseworker supervisors as the foundation of the child welfare system. If a strong foundation of caseworkers and supervisors is built, the state will have a strong child welfare system, regardless of structure.
- System stakeholders support caseworkers, starting with understanding the role of the caseworker and treating caseworkers with the respect they deserve.
- Caseworker is seen as a complex and difficult vocation that deeply impacts children and families, not an entry-level position.
- Caseworkers are not required to make unnecessary or duplicate data entries to report data.
- Support and listen to the Department of Health and Human Services and lead agency Nebraska Families Collaborative as they build a strong workforce.

Strategies

1. Advocate for addressing the restrictions to increasing caseworker salary and allow for caseworker salary differentials and incentives.
2. Advocate at a legislative level for a stable workforce, including ensuring that agencies have the resources and training needed.
3. Involve Nebraska Association of Public Employees/Union, Department of Health and Human Services (DHHS) - Human Resources, Department of Administrative Services, private sector human capital development, and DHHS caseworkers in the Commission's work.
4. Engage in focused conversations with key stakeholders to support agencies and their workforce.
5. Identify and engage stakeholders from the private sector to support building a healthy child welfare workforce.

6. Continue work on the statutory charges as per Neb. Rev. Stat. §43-4203(7):
 - a. Continue to review, analyze, and make recommendations related to salary analysis documents.
 - i. Caseworker salaries should be increased to attract and retain high quality caseworkers.
 - b. Continue to work with the University and the Department of Health and Human Services to support their partnership.
 - c. Continue to advocate for incentives for caseworkers
 - d. Continue to advocate for evidence based-training requirements for persons who work in the area of child welfare and their supervisors.
7. Continue to recommend that the legislature undertake a comprehensive evaluation regarding child welfare caseworker professionals and include the issues of caseworker salaries, incentives, and caseload limits.

Goal Number 2

Data systems are integrated and coordinated to support information exchange and transparency.

Data is essential to improving outcomes for children and families in Nebraska. The legislature has charged the Children's Commission with identifying the indicators needed for a thorough analysis of child welfare reform progress. The Commission is committed to serving as a forum for the identification and analysis of data to allow for the careful long-term planning for children and families in the state.

The Commission has made it a goal to utilize technological solutions to information exchange and ensure measured results across systems of care since 2012. The vision for achievement of this goal includes that all systems communicate openly and effectively, a shared information system exists, and information is used to connect families and children with resources and services.

Objectives

- University expertise supports the analysis of data in Nebraska.
- Systems and stakeholders identify and agree on population outcomes and indicators.
- Data systems and standards with external data mining are developed and utilized.
- Whole population measures are the standards, not specific measures.
- System stakeholders receive data that is timely, accurate, and necessary to have efficient child welfare and juvenile justice systems.
- Data supports quality case management by allowing case managers to access case level data to make quality decisions for children and families.
- Data is available to organizations to drive internal system changes and improvement.

- Decisions throughout all levels of the child welfare and juvenile justice systems are made based on timely and accurate information.

Strategies

1. Support and advocate for a Singular Data Repository/Warehouse. Timely and accurate information must be the basis of decisions throughout all levels of the child welfare system. The system needs mechanisms, including a singular data repository/warehouse, that allow for the gathering, tracking, analyzing, and sharing of essential information quickly.
2. Support the creation of common definitions of key measures. A data dictionary is a necessity for a singular data warehouse. This allows for a true comparison of data.
3. Continue to utilize a process for subgroups to identify and communicate data needs to the Executive Committee of the Nebraska Children's Commission.
4. Continue to receive education about data, trends and analysis, including by consulting with national experts in data analysis.
5. Achieve the Commission's statutory mandate to identify the type of information needed for a clear and thorough analysis of progress on child welfare indicators through the following action steps:
 - a. Agree on the purpose of the indicators; and
 - b. Identify long-term indicators that allow future legislators and stakeholders to determine the success and efficacy of child welfare and juvenile justice reform measures.
6. Identify gaps in data, determine barriers to data collection, and create recommendations to minimize gaps in needed data
7. Commission supports the work and recognizes the importance of the Children and Juveniles Data Feasibility Study Advisory Group.
8. Support the Department of Health and Human Services as they receive the results of the Children and Family Service Reviews.

Goal Number 3

Communities are empowered to prevent child welfare and juvenile justice system involvement through strong partnerships and collaboration.

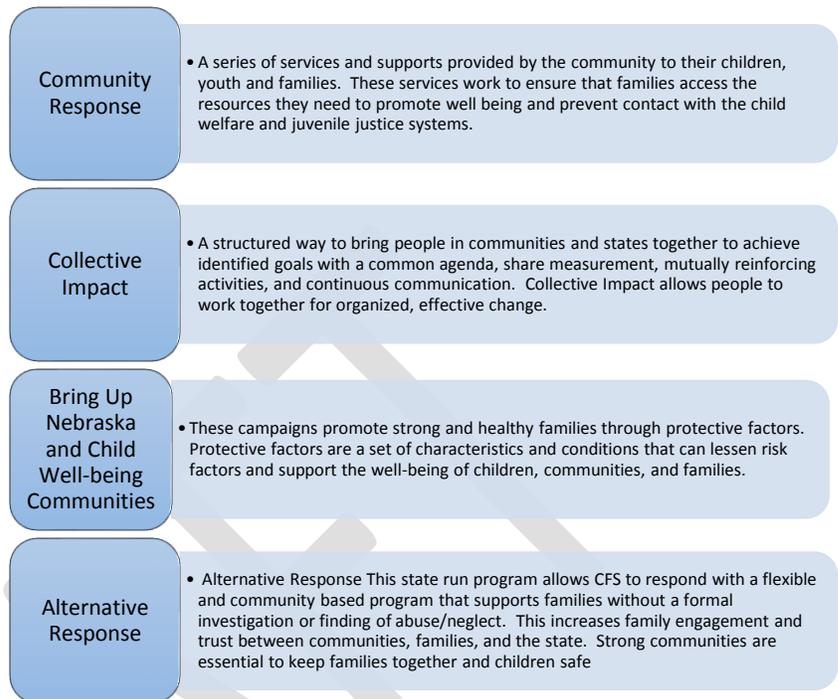
When children and families are served in their communities, they create a rich network of resources and relationships to bolster their well-being throughout their lifespans. This network allows for people to reach their full potential in their communities, which in turn allows communities to thrive with strong families and a workforce that supports a strong economy. Families can face the stressors of life and raising children that all families experience with minimal or no intervention from the state. Taking advantage of opportunities to collaborate and leverage existing resources allows communities to innovate in ways that drastically improve the social and economic health of the community.

Objectives

- Prevention is a priority and is adequately funded to improve child well-being.
- Community collaboratives act as strong networks supporting children and families in Nebraska.
- Communities understand and champion the protective factors needed for successful families.
- Families are supported by a strong partnership between communities and the Department of Health and Human Services.
- A strong neutral backbone entity is adequately funded to ensure the success of collaboration within the communities.
- Data collection and sharing supports efficient services in communities.
- Asset mapping is undertaken to establish existing resources and gaps.
- Programs use a balance of fidelity and flexibility.
- Families are supported by a strong partnership between communities and the Department of Health and Human Services.
- The State supports prevention with integrated systems and blended funding.
- Entities adopt shared language and definitions for a prevention system and the three levels of prevention strategies.

Strategies

- Support initiatives and highlight successful community prevention efforts and collaborative initiatives across the state that work across systems. This support includes highlighting successful community prevention efforts through collecting and distributing information and data on the impact of prevention on communities and child well-being.
- Encourage and support data collection among communities engaged in collaborative efforts. Data collection should include a service analysis to identify the community's resource and allow the community to leverage assets, efficiently expend resources, and encourage innovation.
- Provide assistance translating data elements in ways that are useful to communities.
- Support and highlight shared definitions for prevention. The Commission has adopted the below definitions for a Prevention System, and supports the use of the terms across the state.



Prevention System: includes coordinated services and supports to prevent children from entering higher end systems such as the child welfare, juvenile justice, behavioral health, homeless, and truancy systems and to promote protective factors and build connections and resources to build assets for sustainable family outcomes. The Prevention System includes three levels of prevention strategies:

Primary Prevention (Low Risk Universal Strategies)	Secondary Prevention (At-Risk Targeted Strategies)	Tertiary Prevention (High Need Individual Strategies)
Directed at the general population and attempt to stop maltreatment and other problems before they occur.	Focused on high-risk and offered to populations that have one or more risk factors associated with maltreatment.	Focused on families where maltreatment and/or other problems have already occurred and seeks to reduce the negative consequences and prevent recurrence.

- Listen to communities and help them identify and address barriers to prevention services, including through making legislative, policy, and practice recommendations.
- Support and promote Public Private partnerships

- a. Public-private partnerships at the community level recognize that the success of children and families is not solely the responsibility of the state, but also the private sector and communities. When these stakeholders work together, the knowledge and resources are leveraged to improve outcomes for children.
7. Support the Prevention Partnership as a state level collective impact group focused on improving the well-being of children.

Goal Number 4

Public and private agencies, families, and communities partner to create a seamless system of care supporting well-being.

Complex issues are best solved by collaboration between public and private agencies. The seamless system of care is the responsibility of the public and private agencies working together to build the well-being of children and families. Together, stakeholders support all people to reach their potential, and in the process, strengthen education, the workforce, and the economy of the entire state.

Different levels of partnership are necessary for a seamless system of care. The state works on a higher level to coordinate supports around families, just like communities bring together resources to prevent system involvement.

Objectives

- Prevention is a priority and is adequately funded to improve child well-being.
- Child welfare and juvenile justice are front and center in the System of Care Plan.
- Agencies communicate across systems.
- Barriers to cross-system communication are identified and eliminated.
- Alternative Response is expanded to serve a wider range of families across the state.
- Nebraska has a statewide shared commitment to trauma informed response.
- Operations are aligned with trauma informed care statewide.
- Decisions are made with a team-based approach.

Strategies

1. Actively engage in Division of Behavioral Health System of Care implementation to ensure that child welfare and juvenile justice are front and center, and enhance collaboration and communication between systems and agencies.
2. Support the expansion of Alternative Response and address the restrictive eligibility requirements of the current AR program to increase the number of families eligible for this program.
3. Recommend that the Legislature add the Director of the Division of Behavioral Health, Department of Health and Human Services, as an ex-officio member of the Nebraska Children's Commission.

4. Evaluate the feasibility of utilizing performance-based contracting for specific child welfare services, including the feasibility of additional contractual requirements for service providers requiring services to all children without an option to deny service.
5. Collaborate with the Division of Behavioral Health on a shared plan for a system of care that includes goal driven and outcome based services in child welfare.
6. Advocate for legislation that invests in prevention.

Goal Number 5

The juvenile court system, including the Juvenile Code, attorneys, and court processes, improves the well-being of children and families.

Juvenile Courts in Nebraska are rehabilitative in nature, and are focused on supporting the well-being of children and families, whether they are child welfare or juvenile justice involved. Children and families need competent and zealous legal counsel throughout the legal process to ensure they have access to the supports they need to reach their full potential.

Objectives

- The practice of juvenile law is a professional and desirable career path.
- The roles and responsibilities of legal parties are efficient and clearly communicated.
- The Juvenile Code, court jurisdiction and legal processes are structured to promote improved wellbeing for court-involved children and families.
- Juvenile court is rehabilitative for families and children.
- Court-involvement is beneficial and an agent for lasting change for children and families.
- Juvenile court attorneys are professional and work to attain key competencies.

Strategies

1. Research and evaluate the state Juvenile Code, court jurisdiction, and legal processes, including thorough examination of practice in other states.
2. Encourage professionalism and attainment of competencies in the practice of juvenile law by:
 - a. Increasing the amount of juvenile practice specific trainings available to legal parties and other system stakeholders.
 - b. Encouraging the Supreme Court of Nebraska to require dedicated Continuing Legal Education (CLE) hours for all attorneys who practice in juvenile court, and
 - c. Support initiatives in Nebraska law schools for students with interest in pursuing careers in juvenile practice.
3. Continue to monitor the implementation of LB180 (2017), which provides for Bridge Orders in juvenile court.

4. Work to improve the professionalism in juvenile court and the provision of legal services to parties.
5. Provide analysis of proposed legislation that may affect juvenile courts or practice.
6. Support the work being done by the Supreme Court Commission on Children in the Courts related to juvenile court guardianships.
7. Examine statutes to determine best practices in protective supervision for child welfare involved youth that does not require the youth to be a ward of the state while allowing parents to access supports and services. Identify and recommend legislative changes to support best practices.
8. Examine exception hearings, and make recommendations for legislative changes to support best practices.

DRAFT

MATRIX SUMMARY OF STRATEGIES

The Nebraska Children’s Commission has developed strategies to promote each of its five goals:

1. A strong workforce supports the well-being of children, families, and communities;
2. Communities are empowered to prevent child welfare and juvenile justice system involvement through strong partnerships and collaboration;
3. Data systems are integrated and coordinated to support information exchange and transparency;
4. Public and private agencies, families, and communities partner to create a seamless system of care supporting well-being;
5. The juvenile court system, including the Juvenile Code, attorneys, and court processes, improves the well-being of children and families.

This appendix includes the strategies groups by the corresponding goal number, with an indication of whether legislation is needed for the strategy and which goals the strategy supports.

A STRONG WORKFORCE SUPPORTS THE WELL-BEING OF CHILDREN AND FAMILIES

The child welfare workforce supports children and families to build the foundation of well-being necessary to reach their full potential. The stability of the workforce is essential to all families reaching their full potential. A strong connection with a caseworker provides children with a stable relationship to help them face the challenges of system involvement, attain permanency and ultimately successfully transition to adulthood. When system involved youth reach their full potential, the community benefits as the youth goes on to enter the workforce and have their own stable family.

WORKFORCE		
Strategy	Legislation	Goal
Advocate for addressing the restrictions to increasing caseworker salary and allow for caseworker salary differential and incentives.	Legislation	1
Advocate at a legislative level for a stable workforce, including ensuring that agencies have the resources and training needed.	Legislation	1
Involve NAPE/Union, DHHS Human Resources, DAS, private sector human capital development, and DHHS caseworkers in the Commission's work.	No	1
Engage in focused conversations with key stakeholders to support the agencies and their workforce.	No	1
Identify and engage stakeholders from the private sector to support building a healthy child welfare workforce.	No	1
Continue to review, analyze, and make recommendations related to salary analysis documents.	No	1
Continue to work with the University and the Department of Health and Human Services to support their partnership.	No	1
Continue to advocate for evidence based-training requirements for persons who work in the area of child welfare and their supervisors.	No	1
Continue to recommend that the legislature undertake a comprehensive evaluation regarding child welfare caseworker professionals and include the issues of caseworker salaries, incentives, and caseload limits.	Legislation	1

**COMMUNITIES ARE EMPOWERED TO PREVENT CHILD WELFARE AND
JUVENILE JUSTICE SYSTEM INVOLVEMENT THROUGH STRONG
PARTNERSHIPS AND COLLABORATION**

When children and families are served in their communities, they create a rich network of resources to bolster their well-being throughout their lifespans. This network allows for people to reach their full potential in their communities, which in turn allows communities to thrive with strong families and a workforce that supports a strong economy. Families can face the stressors of life and raising children that all families experience with minimal or no intervention from the state. Taking advantage of opportunities to collaborate and leverage existing resources allows communities to innovate in ways that drastically improve the social and economic health of the community.

PREVENTION		
Strategies	Legislation	Goal
Support initiatives and highlight successful community prevention efforts and collaborative initiatives across the state that work across systems. This support includes highlighting successful community prevention efforts through collecting and distributing information and data on the impact of prevention on communities and child well-being.	No	2,4
Encourage and support data collection among communities engaged in collaborative efforts. Data collection should include a service analysis to identify the community's resource and allow the community to leverage assets, efficiently expend resources, and encourage innovation.	No	2,3,4
Provide assistance translating data elements in ways that are useful to communities.	No	2,3
Support and highlight shared definitions for prevention. It is important that, as many groups begin and continue their focus on prevention, common definitions be used.	No	2,3
Listen to communities and help them identify and address barriers to prevention services, including through making legislative, policy, and practice recommendations.	Need for legislation under review	2
Support and promote public-private partnerships	No	2,4
Support the Prevention Partnership as a state level collective impact groups focused on improving the well-being of children.	No	2,4

**DATA SYSTEMS ARE INTEGRATED AND COORDINATED TO SUPPORT
INFORMATION EXCHANGE AND TRANSPARENCY**

The Commission has made it a goal to utilize technological solutions to information exchange and ensure measured results across systems of care since 2012. The vision for achievement of this goal includes that all systems communicate openly and effectively, a shared information system exists, and information is used to connect families and children with resources and services.

DATA		
Strategy	Legislation	Goal
Support and advocate for a Singular Data Repository/Warehouse.	Legislation	3
Support the creation of common definitions of key measures. A data dictionary is a necessity for a singular data warehouse. This allows for a true comparison of data.	No	3
Continue to utilize a process for subgroups to identify and communicate data needs to the Executive Committee of the Nebraska Children's Commission.	No	3
Continue to receive education about data, trends and analysis, including by consulting with national experts in data analysis.	No	3
Achieve the Commission's statutory mandate through the following action steps: a. Agree on the purpose of the indicators; and b. Identify long-term indicators that allow future legislators and stakeholders to determine the success and efficacy of reform measures.	No	3
Identify gaps in data, determine barriers to data collection, and create recommendations to minimize gaps in needed data	No	3
Support the work of the Children and Juveniles Data Feasibility Study Advisory Group.	No	3
Support the Department of Health and Human Services as they receive the results of the Children and Family Service Reviews.	No	3

**PUBLIC AND PRIVATE AGENCIES, FAMILIES, AND COMMUNITIES
PARTNER TO CREATE A SEAMLESS SYSTEM OF CARE SUPPORTING
WELL-BEING**

Complex issues are best solved by collaboration between public and private agencies. The seamless system of care is the responsibility of the public and private agencies working together to build the well-being of children and families. Together, stakeholders support all people to reach their potential, and in the process, strengthen education, the workforce, and the economy of the entire state.

SYSTEM OF CARE		
Strategy	Legislation	Goal
Engage actively in Division of Behavioral Health System of Care implementation to ensure that child welfare and juvenile justice are front and center, and enhance collaboration and communication between systems and agencies.	No	1,2,3,4
Support the expansion of Alternative Response and address the restrictive eligibility requirements of the current AR program to increase the number of families eligible for this program.	Regulation	1,2,4
Recommend that the Legislature add the Director of the Division of Behavioral Health, Department of Health and Human Services, as an ex-officio member of the Nebraska Children's Commission.	Legislation	2,4
Evaluate the feasibility of utilizing performance-based contracting for specific child welfare services, including the feasibility of additional contractual requirements for service providers requiring services to all children without an option to deny service.	Legislation not necessary to evaluate	4
Collaborate with the Division of Behavioral Health on a shared plan for a system of care that includes goal driven and outcome based services in child welfare.	No	2,4
Advocate for legislation that invests in prevention.	Legislation	2,4

THE JUVENILE JUSTICE SYSTEM, INCLUDING THE JUVENILE CODE, ATTORNEYS, AND COURT PROCESSES, IMPROVES THE WELL-BEING OF CHILDREN AND FAMILIES.

Juvenile Courts in Nebraska are rehabilitative in nature, and are focused on supporting the well-being of children and families, whether they are child welfare or juvenile justice involved. Children and families need competent and zealous legal counsel throughout the legal process to ensure they have access to the supports they need to reach their full potential.

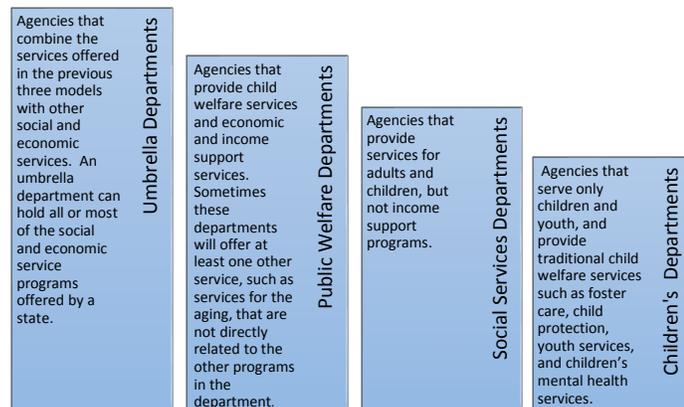
LEGAL PARTIES		
Strategy	Legislation	Goal
Research and evaluate the state Juvenile Code, court jurisdiction, and legal processes, including thorough examination of practice in other states.	Need for legislation under review	5
Increase the amount of juvenile practice specific trainings available to legal parties and other system stakeholders.	No	5
Encourage the Supreme Court of Nebraska to require dedicated Continuing Legal Education (CLE) hours for all attorneys who practice in juvenile court	No	5
Support initiatives in Nebraska law schools for students with interest in pursuing careers in juvenile practice.	No	5
Work to improve the professionalism in juvenile court and the provision of legal services to parties.	No	5
Provide analysis of proposed legislation that may affect juvenile courts or practice.	No	5
Support the work being done by the Supreme Court Commission on Children in the Courts related to juvenile court guardianships.	Need for legislation under review	5
Examine statutes to determine best practices in protective supervision for child welfare involved families.	Legislation	5
Examine exception hearings, and make recommendations for best practices.	Legislation	5

Structure and Operation of Health and Human Services

Human services agencies are essential to ensure that all Americans reach their full potential and build healthy families, economies and communities. These agencies are support mechanisms designed to help families who are exposed to many stressors across the lifespan, achieve and maintain well-being and quality of life.

All states have human service agencies, and have structured and restructured the agency in the hopes of supporting and improving population health, the economy, and the workforce. The Nebraska Children’s Commission undertook its statutory charge to examine the structure of Nebraska’s Health and Human Services agency in light of the Commission’s vision: to improve the safety and well-being of Nebraska’s children and families.

Nebraska’s Department of Health and Human Services is an Umbrella Department, meaning that the Department administers most social and economic supports. The Department holds six divisions, which include the Divisions of Behavioral Health, Children and Family Services, Developmental Disabilities, Medicaid and Long-Term Care, Public Health, and Veteran’s Homes. A CEO appointed by the governor heads the Department and Directors, also appointed by the governor, head each of the six divisions. The Directors are responsible for administering the responsibilities of their divisions. This chart shows the four Human Service agency structures.



A review of research on the comparative benefits of various agency structures revealed that structural reorganizations are often costly, disruptive to service provision, and are not necessarily linked to improved outcomes for children and families. Stakeholders must carefully plan and slowly implement reorganization. Changes in structure work best when combined with reform efforts or necessary to accomplish already identified goals and outcomes. Restructuring usually entails dividing or merging existing health and human services. Since Nebraska currently has an umbrella structure, restructuring would likely entail dividing the existing agency. The benefits to dividing include increased accountability and flexibility, while disadvantages include duplicated services and staff roles, lack of interagency cooperation, and competition between agencies for fiscal resources. Ultimately, no one structure is linked to improved outcomes for children and families, and restructuring is often costly, taking funding, staffing and focus away from program innovation and improvement.

The key to improving outcomes and achieving true reform is in leadership, no matter how an agency is structured.

The full report of the Nebraska Children’s Commission can be reviewed at: [\[link\]](#)

Lead Agency Recommendations
Pursuant to Neb. Rev. Stat. §43-4204(1)(a)

The legislature tasked the Commission with considering the potential of contracting with private nonprofit entities as lead agencies as a part of the Strategic Plan. The practice of utilizing a lead agency is commonly referred to as “privatization.” In the context of child welfare reform, privatization is often used to refer to the transfer of case management responsibility from the state to a private entity.

At the time of the writing of this strategic plan, the Eastern Service Area (Douglas and Sarpy Counties) utilizes the lead agency model. However, in April of 2010, the Department of Health and Human Services had implemented five contracts with lead agencies, and by October of the same year, three of the five contractors had terminated the contracts. This was the result of an abbreviated timeline for implementation and a lack of strategic planning for lead agency service coordination and privatization.

Following this experience with privatization, the Legislature undertook a legislative study on the effects of privatization on child welfare, LR37, which sets forth three primary findings related to contracting with a private nonprofit entity as a lead agency:

1. Child welfare reform is not synonymous with privatization, neither is privatization synonymous with child welfare reform.
2. Privatization is a tool, not an end in itself, to child welfare reform.
3. The success of states and communities in addressing child welfare is primarily predicated on ensuring that all three branches of government are involved in the development of a strategic plan and an implementation plan prior to initiating contracting with statewide lead agency.

The Commission began its statutory task related to considering the potential of lead agencies by creating the Lead Agency Taskforce. The group identified the components of an ideal child welfare system, a seamless system of care, and how a lead agency could be utilized in that context, along with broad summary recommendations.

Lead Agency Broad Summary Recommendations

1. The Lead Agency Taskforce believes the lead agency model can be effective if the seven components of a seamless system of care are present.
2. Those in authority for determining whether lead agencies will be utilized should consider the broader issues of whether or not Nebraska should delegate child welfare responsibilities.
3. Case managers and supervisors are the foundation of the child welfare system.

Lead Agency Task Force Seamless System of Care Components

Seven Components of a Seamless System of Care	
Outcomes and Accountability	Identify and agree upon clearly defined outcomes. This includes mechanisms to hold stakeholders accountable for achieving or not achieving the identified outcomes.
Clarification of Roles and Responsibility	Clarify roles and responsibilities for each specific position, agency, and stakeholder. Effective relationships are fostered when individuals understand and respect their own and each other’s roles. Roles should be designed to serve children and families as efficiently as possible.
Quality Case Management Workforce	Recognize caseworkers and supervisors as the backbone of the system. Caseworkers serve as representative to other systems, including the court. The workforce includes a component of quality oversight of caseworkers and case managers who serve as representatives to other systems, including the court.
Trust	A seamless system of care must include trust supported by follow through, consistency, and champions for the child and family. Families, judges, attorneys, providers, caseworkers, and all stakeholders must trust each other and the system.
Adaptive and Individualized to Children, Families, and Communities	The system must effectively address the unique needs and enhance existing strengths in children, families, and communities.
Coordinated and Flexible Service Delivery Model	The case manager is a primary representative to the child and the family, ensures the child receives services designed to meet their individual needs, and assist the family in accessing needed services. Service providers need the flexibility to provide the necessary services without interruption or delay. The system as a whole needs the ability to modulate the services within it. 7. Singular Data Repository/Warehouse.
Singular Data Repository/Warehouse	Timely and accurate information must be the basis for decisions throughout all levels of the child welfare system. The system needs mechanisms, including a singular data repository/warehouse, that allow for the gathering, tracking, analyzing, and sharing of essential information quickly.

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*Nebraska Children’s Commission Strategic Plan Statutory
Requirements*

Requirement	Consider realignment of service areas designated pursuant to section 81-3116 to be coterminous with the judicial districts described in section 24-301.02. [Neb. Rev. Stat. §43-4204(1)(c)]
<i>Status</i>	LB961 directed DHHS to realign the Western, Central, and Northern Service areas to be coterminous with the District Court Judicial Districts.
Requirement	Facilitated Conferencing shall be included in the strategic plan discussions. [Neb. Rev. Stat. §43-4203(3)]
<i>Status</i>	The Commission is committed to promoting the use of facilitated conferencing and provided legislative testimony in support of LB1083 regarding the use of facilitated conferencing.
Requirement	Each service area shall develop its own unique strategies to be included in the statewide strategic plan. The Department of Health and Human Services shall assist in identifying the needs of each service area. [Neb. Rev. Stat. §43-4203(1)]
<i>Status</i>	The Commission regularly receives updates on the needs and strategies of each service area. Representatives from the DHHS participated in the strategic planning and contributed strategies from the service areas.
Requirement	The Commission shall consider [...] the potential of contracting with private nonprofit entities as a lead agency. [Neb. Rev. Stat. §43-4204(1)(a)]
<i>Status</i>	Commission released a final report on the potential of contracting with private, nonprofit entities as a lead agency in 2015. See Appendix ___for more information.
Requirement	In developing the statewide strategic plan, the Commission shall consider [...] provision of leadership for strategies to support high-quality evidence-based prevention and early intervention services that reduce risk and enhance protection for children. {Neb. Rev. Stat. §43-4204(1)(b)}
<i>Status</i>	Prevention is a priority in the 2017 Strategic Plan. The Commission receives reports from DHHS Divisions and Probation regarding the use of evidence based practices.
Requirement	In developing the statewide strategic plan the Commission shall consider [...] identification of the type of information needed for a clear and thorough analysis of progress on child welfare indicators. [Neb. Rev. Stat. §43-4204(1)(d)]
<i>Status</i>	Data and Technology is a priority in the 2016 Strategic Plan. The Data, Technology, Reporting, and Accountability workgroup has identified the Children and Family Services Review (CFSR) measures as the necessary indicators. DHHS reports on these indicators on a quarterly basis. The Commission regularly consults with stakeholders and experts to gain education on data and indicators.
Requirement	The commission shall review the operations of the department regarding child welfare programs and services and recommend, as part of the strategic plan, options for attaining the legislative intent stated in

Appendix D

section 43-4201, either by the establishment of a new division within the department or the establishment of a new state agency to provide all child welfare programs and services which are the responsibility of the state. [Neb. Rev. Stat. §43-4204(3)]

Status

The Commission released its final report on HHS Structure in 2013, and remains willing to reexamine the topic at the request of the legislature, governor, or Department of Health and Human Services. See Appendix ___ for more information.

State of Nebraska Strengths

Collaboration. Communities and citizens work together to make sure that all Nebraskans reach their full potential.

Faith and Tradition. Nebraska's strong faith based community brings people together to make a difference in their communities.

Leadership. Nebraska's strong and stable leadership provides a stable base for growth and improvement in Nebraska.

Patriotism. Nebraskan's patriotic spirit and pride in their communities shows in the community engagement that supports children and families.

Teamwork. Nebraskan's teamwork and practical problem solving allows us to come together and work to solve the challenges facing children and families.

Inclusive. Nebraska's welcoming communities enjoy the cultural and economic diversity that comes with diverse populations.

Integrity. The ethics of Nebraska's leadership allows for trust between government and citizens.

Strong Economy. A diverse and stable economy, along with a low cost of living, has helped Nebraska's families to access stability and quality.

Independent Governing Structures. The unicameral non-partisan legislature, responsive executive branch and merit selection judicial systems allow for strong independent government branches.

Education. The strong public school system, community college system, and relatively high graduation rate helps youth thrive and reach their full potential.

Health. Nebraska's clean air and water, along with a large number of hospitals and medical providers, helps keep Nebraska healthy.

Sustainable. Strong infrastructure and support allows for long-term development of resources for families and children in Nebraska.

Environmental Scan

Key trends, forces, players, drivers, challenges, innovations and ways of thinking that are impacting Nebraska’s child welfare and juvenile justice systems			
HORIZON Ideas and Issues Beginning to Appear	EMERGING SWELL Ideas and Issues gaining energy	CREST Status Quo, SOP Ideas	TROUGH No Longer Relevant
Family focused case management Increase in parental substance abuse (methamphetamine and opioids) Trafficking awareness High numbers of youth suicide Impact of gang involvement and gun violence on families and communities Increased movement between judicial and social services Domestic violence Low graduation rates for foster care and special populations Strengthening Families Act Heritage Health Revenue shortfall Legislative term limits Workforce changes - Federal Department of Labor Regulations State increase in minimum wage	Mental and physical health integration MIS integrated data system Changes in institutions and YRTCs Shared parenting Collective Impact - State and community involvement Foster parent association and birth parent group collaboration Use of technology in remote areas Real progress not incremental sameness Data sharing Real time data Education focus Mental health in schools Child welfare workforce retention and recruitment Prevention as a priority	Focus on kinship and relative Care Establishment of collaborative structures DHHS is collaborative In home and voluntary services CPS Hotline # Alternative Response Trauma informed practice B2i Public private partnerships Evidence based practices Caseworker training Family finding Facilitated Conferencing Results Based Accountability Attention to lawmakers System of Care Juvenile justice community services Changes in political situation Foster care	Punitive focus of Juvenile Justice High bar for parenting Silos

Appendix G

Member Name	Member Type	Title and Organization	Representation
Vacant	Voting	,	Biological Parent Currently Or Previously Involved In The Child Welfare System or juvenile justice system
Teresa Anderson	Voting	Health Director , Central District Health Department	Community Representative - Central Service Area
Beth Baxter (Past Chair)	Voting	Administrator , Behavioral Health Region 3	Administrator of a Behavior Health Region
Jim Blue	Voting	President and CEO , CEDARS Youth Services	Child Welfare Service Agency
Holly Brandt	Voting	Executive Director , CAPstone Child Advocacy Center	Community Representative - Western Service Area
Jennifer Chrystal-Clark	Voting	Attorney , Douglas County	Prosecuting Attorney Who Practices in Juvenile Court
Vernon Davis	Voting	Young Adult Previously in Foster Care , Young Adult Previously in Foster Care	Young Adult previously in Foster Care
Misty Frazier	Voting	Director of the Dakota Tiwahe Service Unit , Santee Sioux Nation of Nebraska	Representative of a federally recognized Indian tribe residing within the State of Nebraska
Kim Hawekotte	Voting	Executive Director , Foster Care Review Office	Executive Director of the Foster Care Review Office
Felicia Nelsen	Voting	Executive Director , Nebraska Foster and Adoptive Parent Association	Community Representative - Southeast Service Area
David Newell (Chair)	Voting	President & CEO , Nebraska Families Collaborative	Community Representative - Eastern Service Area (Lead Agency)
Deb O'Brien	Voting	FCRB Member ,	Member of a Local Foster Care Review Board
Lisa Story	Voting	Community Member/Foster Parent , Community Representative of the Northern Service Area	Community Representative - Northern Service Area
Susan Thomas	Voting	CASA Volunteer , Nebraska CASA Association	Court Appointed Special Advocate Volunteer

Appendix G

Member Name	Member Type	Title and Organization	Representation
Janine Uchino	Voting	Attorney , Law Office of Janine Uchino	Guardian Ad Litem
Kelli Wacker	Voting	Director , Northeast Nebraska Child Advocacy Center	Director of a Child Advocacy Center
Paula Wells	Voting	Foster Parent ,	Foster Parent
Bill Williams	Voting	Chief Operating Officer , COMPASS	Representative Of A Child Advocacy Organization
Sen. Kate Bolz	Ex-Officio	Senator , Nebraska Legislative Council	Designee of the Chairperson of the Appropriations Committee of the Legislature
Michele Borg	Ex-Officio	Education of Systems-Involved Students (ESIS) Coordinator , Nebraska Department of Education	Designee of the Commissioner of the Department of Education
Jeanne Brandner (Vice Chair)	Ex-Officio	Deputy Administrator of the Division of Juvenile Services , Administrative Office of Probation	Appointed by the State Court Administrator
Sen. Patty Pansing Brooks	Ex-Officio	Senator , Nebraska Legislative Council	Designee of the Chairperson of the Judiciary Committee of the Legislature
Courtney Phillips	Ex-Officio	Chief Executive Officer , Nebraska Department of Health and Human Services	CEO of Nebraska Department of Health and Human Services
Judge Linda Porter	Ex-Officio	Judge , Lancaster County Juvenile Court	Appointed by the State Court Administrator
Sen. Merv Riepe	Ex-Officio	Senator , Nebraska Legislative Council	Designee of the Chairperson of the HHS Committee of the Legislature
Julie Rogers	Ex-Officio	Inspector General , Office of Inspector General of Nebraska Child Welfare	Inspector General of Nebraska Child Welfare
Deb VanDyke-Ries	Ex-Officio	Director , Nebraska Court Improvement Project	Appointed by the State Court Administrator
Matthew Wallen	Ex-Officio	Director , DHHS, Division of Children and Family Services	Director of Children and Family Services division of DHHS