

8/26/2022



Nebraska Strengthening Families Act Committee 2021- 2022 Annual Report

Report to the Nebraska Children's Commission, the Governor, the Health and Human Services Committee of the Legislature, and the Department of Health and Human Services

Submitted Pursuant to Neb. Rev. Stat. §43-4218

Background

The Nebraska Strengthening Families Act (NSFA) Committee was created as the Normalcy Task Force under the umbrella of the Nebraska Children’s Commission (Commission) to monitor and make recommendations related to Nebraska’s implementation of the Federal Preventing Sex Trafficking and Strengthening Families Act, Public Law 113-183 (referred to in this document as the “Strengthening Families Act” or “SFA”). Nebraska’s Strengthening Families Act, [§43-4702](#), implements the federal SFA and initial stakeholder recommendations. Both the federal and state SFA represent a culture shift to allow children and youth to grow and thrive in less restrictive, more family-like environments and participate in age and developmentally appropriate activities. Additional legislation related to best practices in implementation was passed as [LB225 \(2017\)](#).

STATUTORY CHARGE

The Nebraska Strengthening Families Act (NSFA) Committee shall monitor and make recommendations regarding the implementation in Nebraska of the federal Preventing Sex Trafficking and Strengthening Families Act, Public Law 113-183, as such act existed on January 1, 2017, and the Nebraska Strengthening Families Act, [Neb. Rev. Stat. §43-4701 to §43-4715].

PRIORITIES

1. Continue to monitor the implementation of the federal Strengthening Families Act.
2. Promote normalcy as the foundation to prevent trafficking, address disparate impacts on minorities, and support the successful transition to adulthood.
3. Coordinate implementation with other policy making bodies.

The Committee has met quarterly for the last year to accomplish its statutory mandates. The Committee has two active subcommittees to fulfill the detailed work of prioritized initiatives: 1) the Another Planned Permanent Living Arrangement (APPLA) Subcommittee, and 2) the Normalcy Subcommittee.

The Committee periodically creates and archives subcommittees depending on their fulfillment of assignments from the Committee. Archived NSFA subcommittees include Trafficking, Community & Family Voice, Grievance Procedure, Training, and Court Implementation. These groups may be called upon, reviewed and/or revived depending on need of the Committee and emerging issues.

For more information or to get involved, please visit our [website](#), or email necc.contact@nebraska.gov.

PRIORITIZED INITIATIVES

Summary of Activities 2021-2022

During FY2021, the NSFA Committee, with the help of three branch participation, and community representatives, made great progress continuing to advance culture changes within the child welfare and juvenile justice systems to ensure normalcy for youth in out-of-home placements, identifying victims of child sex and labor trafficking, and ensuring supports are in place for a successful transition to adulthood.

The need for the NSFA Committee to remain as a statutory body has been reviewed. Great progress has been made by the Committee, and further work remains.

The Normalcy Subcommittee reviewed Normalcy Plans and Reports submitted by child-caring agencies (pursuant to [§43-4706](#)) and is working closely with agencies to strengthen normalcy opportunities for youth.

Nebraska Department of Health and Human Services (DHHS) implemented Transition Age Youth Advocates, also referred to as Independent Living (IL) “Champions” in response to a recommendation in the SFA 2020-2021 report. A proposal for Transition Age Youth Advocates was developed by the APPLA Subcommittee and presented to DHHS in 2021. DHHS has since identified IL Champions in each service area and plans to provide specialized training along with regular meetings to focus on improving services and supports for transition age youth. We commend DHHS for acting on this recommendation to better our system for youth.

The APPLA Subcommittee reviewed a recommendation from the Bridge to Independence (b2i) Advisory Committee, also under the Nebraska Children’s Commission. The b2i Committee recommended that DHHS implement an evidence-informed, strengths-based, youth led intervention for case management that includes older youth and young adult best practices. Due to the connection between transition age youth and the b2i program, the APPLA Subcommittee reviewed this recommendation and found it to be relevant to youth in foster care as well.

The Trafficking Subcommittee is currently inactive but remains a point of contact and collaboration for youth related trafficking services, data and resources. Nebraska Children and Families Foundation (NCF) received a grant in 2021 to address Trafficking in Nebraska. The NSFA Committee will continue to monitor developments in Nebraska’s trafficking response system.

RECOMMENDATIONS

1. Normalcy should extend to youth in care in all systems as appropriate and considering parental preference. The Committee recommends the statutory requirement for Normalcy Plans and Reports pursuant to §43-4706 be amended to include facilities which provide treatment services as a component of the placement, including treatment group homes and psychiatric residential treatment facilities.
2. Stakeholders should make every effort to make decisions that enhance and maximize normalcy for children placed out of home.
3. DHHS should utilize an evidence-informed, strength-based, youth-led intervention for case management that includes older youth best practices. This intervention should incorporate a tested evaluation tool.
4. DHHS should address barriers to foster youth attaining a Driver's License.
5. Children, youth and foster caregivers should be given the opportunity to be present at every court hearing. When this is not possible, court information forms should be available in every jurisdiction and provide to youth and their foster caregivers.
6. The court forms must have a party responsible for ensuring youth and foster caregivers receive forms and have a user-friendly way to return those forms to the Court prior to the hearing ([§43-1314](#)).

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SUBCOMMITTEES

Another Planned Permanent Living Arrangement (APPLA)

Crystal Aldmeyer, Chair

The Subcommittee focuses its efforts on the provisions of the State and Federal Strengthening Families Acts related to Another Planned Permanent Living Arrangement (APPLA). This permanency goal means youth will be self-sufficient, including caring for themselves independently and providing for themselves financially, through either employment, supportive services or public financial assistance, and that reunification, adoption, and legal guardianship were attempted, but unsuccessful or not in the youth's best interest. Without a permanent family, these youth need extra support to attain their goals, achieve emotional permanency, and transition to adulthood.

Normalcy for youth transitioning out of the child welfare system includes creating a supportive network to help youth face life's challenges and develop a baseline of independent living skills.

Activities: The APPLA Subcommittee continues review Foster Care Review Office (FCRO) data and other sources related to transition age youth. Transition age youth continue to experience placement disruptions at higher rates than younger children in care and case managers face unique dynamics in preparing older youth for the transition to adulthood.

DHHS implemented Transition Age Youth Advocates, also referred to as Independent Living (IL) "Champions" in response to a recommendation in the SFA 2020-2021 report. A proposal for Transition Age Youth Advocates was developed by the APPLA Subcommittee and presented to DHHS in 2021. DHHS has since identified IL Champions in each service area and plans to provide specialized training along with regular meetings to focus on improving services and supports for transition age youth. We commend DHHS for acting on this recommendation to better our system for youth.

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RECOMMENDATIONS FOR DHHS

1. DHHS should utilize an evidence-informed, strength-based, youth-led intervention for case management that includes older youth best practices. This intervention should incorporate a tested evaluation tool.

Rationale: Outcomes for older youth in Nebraska's foster care system have historically been disappointing and have not improved significantly over time. To pursue progress for older youth, the APPLA Subcommittee recommends that DHHS invest in additional training and adopt a youth-led model for case management. As part of the case management model, DHHS should consider replacing the Ansell-Casey Independent Living Skills Assessment with another tested evaluation tool.

While case management is offered to young people in foster care, our current model fails to guide them toward stability and slow the cycle of poverty. Research often demonstrates that traditional approaches to case management do not deliver services equitably because they do not address the many barriers to sustained success that young people face. Key aspects of youth-driven, strength-based coaching models include generally smaller caseloads, coach and participant relationships lasting multiple years, youth-driven goal development, two-generation approach, high training standards for coaches/case managers, and an emphasis on developing long-term solutions to systemic barriers that prevent youth from thriving. It is necessary to create and evaluate an older youth system that advances the understanding of the skills and supportive environments all youth need to thrive.

Utilizing a tool such as Youth and Families Thrive would allow DHHS and system partners to collect consistent data on youth from ages 14-26. This longevity of data would help track youth and young adult progress over time as well as giving

insights into some of the systemic issues within our older youth system. In addition to improved data, utilizing a consistent tool would allow youth and young adults to become familiar with one tool instead of completing multiple assessments.

About Youth Thrive™

Developed by the Center for the Study of Social Policy (CSSP), Youth Thrive™ is both a research-informed framework on youth and young adult well-being and a practice model, based on that theoretical framework, designed to support healthy development and improved life outcomes for youth ages 9-26. Through a synthesis of the research on positive youth development, resiliency, neuroscience, and the impact of trauma on that development, Youth Thrive™ identifies and is based on five Protective and Promotive Factors that increase the likelihood that adolescents will develop into healthy, thriving adults. These five Protective and Promotive Factors represent a pathway to well-being and helps case management professionals assist youth to take advantage of opportunities, pursue their interests, and find support when challenges arise.

Additionally, the Youth Thrive Survey™, a tool for jurisdictions implementing the Youth Thrive™ framework is a valid and reliable youth self-report instrument that measures the presence, strength, and growth of the [Youth Thrive Protective and Promotive Factors](#) as proxy indicators of well-being. The Youth Thrive Survey measures the presence of the Protective and Promotive Factors—Youth Resilience, Social Connections, Knowledge of Adolescent Development, Concrete Support in Times of Need, and Cognitive and Social-Emotional Competence—which research indicates are core components for well-being. Unlike other surveys that focus on deficits, the Youth Thrive Survey is strengths-based and focuses on the positive attributes and experiences of young people. It does not focus on outputs, such as the number of young people who have completed high school. Instead, it brings attention to the underlying strengths and abilities young people need to thrive. The Youth Thrive Survey can also be used to improve case management practice through integration with continuous quality improvement processes and the use of data to better understand outcomes and impact. The survey collects data on young people that can be matched with administrative data or data from other sources to have more comprehensive understanding about the young people being served.

Designed by the Center for the Study of Social Policy (CSSP) with significant input from youth and young adults – including young people from Nebraska – and taking less than 15 minutes to complete, the survey can be an effective tool for informing case planning and practice, evaluation, and continuous quality improvement (CQI) purposes. The Youth Thrive Survey is free and provides an array of data reports that can be used to inform policy and practice decisions and measure positive indicators of well-being for youth and young adults at an individual-level and population-level. The Youth Thrive Survey is available in both English and Spanish. Utilizing a tool such as Youth Thrive Survey would allow DHHS, system partners, and providers of the Connected Youth Initiative (CYI), to collect consistent data on youth from ages 14-26. This longevity of data would help track youth and young adult progress over time as well as provide insights into some of the systemic issues within our older youth system. In addition to improved data, utilizing a consistent tool would allow youth and young adults to become familiar with one tool instead of completing multiple assessments.

Normalcy Subcommittee

Felicia Nelsen and Stephanie Bizzarri, Co-Chairs

Purpose: To monitor the implementation of the Strengthening Families Act, specifically to review the normalcy plans and reports pursuant to [§43-4706](#).

“Every child placed by the department in a foster home or child-care institution shall be entitled to access to reasonable opportunities to participate in age or developmentally appropriate extracurricular, enrichment, cultural, and social activities.” [Neb. Rev. Stat. §43-4704](#)

Activities: This group was reconvened after the implementation of the statutorily required Normalcy Plans and Reports (LB225 in 2017) and to issue a survey in attempt to measure progress since the initial implementation of the Nebraska Strengthening Families Act. Since completion of the survey, the Normalcy Subcommittee has continued to meet periodically to review Normalcy Reports.

Normalcy Plans and Reports:

The NSFA Committee assigned the Normalcy Subcommittee the task of reviewing the Normalcy Plans and Reports submitted by child-caring institutions to the Department of Health and Human Services pursuant to [NRS §43-4706](#). The Normalcy Subcommittee reviewed Normalcy Plans and Reports for 13 child caring institutions. These child caring institutions provide congregate, non-treatment, placement settings (group homes and shelters) for state wards and youth under the supervision of Juvenile Probation. This component of the Act was passed in 2017 and implemented in child caring institution contracts with DHHS-DCFS in 2018. The Subcommittee collaborated with the Department of Health and Human Services in the development of a standardized format to be used in the reporting process.

During the review, it was noted the statute was not interpreted to apply to congregate treatment settings (psychiatric residential treatment facilities, or treatment group homes). Also, it does not cover child caring institutions which receive placement of state wards or juveniles under contract/voucher by other entities such as Saint Francis and the Administrative Office of the Courts and Probation.

Additional information about the normalcy requirements across system partners and settings can be found here: <https://tinyurl.com/NormalcyMapping>.

During this report year, the Normalcy Subcommittee facilitated a multi-step process with agencies who are required to submit Normalcy plans and reports per [NRS §43-4706](#). The Subcommittee identified a disconnect between the work of agencies and the Normalcy Subcommittee. This subcommittee is responsible for reviewing reports but did not have any mechanism for discussion or feedback with agencies who completed reports. Through a survey, feedback was collected to identify areas of need for agencies. Survey themes suggested that there is little to no training on how to complete normalcy plans and reports. Other survey themes included a lack of knowledge of the statute behind normalcy reports/plans and the impact of COVID-19 on normalcy activities for youth.

Subcommittee members worked to identify areas of strength and weaknesses of the Normalcy Plans and Reports for each agency. In the upcoming fiscal year, subcommittee members will work to address the areas of need with agencies

RECOMMENDATIONS

1. Normalcy should extend to youth in care in all systems, including child welfare, juvenile justice, behavioral and mental health, and developmental disabilities. The Committee recommends the statutory requirement for Normalcy Plans and Reports pursuant to §43-4706 be amended to include facilities which provide treatment services as a component of the placement, including treatment group homes and psychiatric residential treatment facilities.
2. Stakeholders should make every effort to make decisions that enhance and maximize normalcy for children placed out of home.

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through further education about normalcy requirements and encouraging partnership among agencies. The Subcommittee will continue to review normalcy plans and reports and build continued collaboration with agencies with the goal of strengthening normalcy opportunities for youth in Nebraska.

DHHS should address barriers to foster youth attaining a Driver’s License.

Driver’s licensing and education is a critical employment credential and often necessary to access postsecondary education and/or career technical training for long-term economic well-being. Having a driver’s license helps youth have a job, go to school and participate in social activities. Taking driver’s education and obtaining a driver’s license is part of a normalcy for teenagers. Some preliminary research shows that youth who have a driver’s license are more likely to graduate high school and more likely to have a job.

In Nebraska, we have long discussed the importance of youth obtaining a driver’s license but have failed to address many of the practical barriers for youth and their caregivers. Access to available driver’s education and training is limited in rural and frontier areas of the state and accessing a safe vehicle, learning to drive, becoming insured, and obtaining a license can be a financial burden for young people in both urban and rural areas.

DHHS should explore models such as Florida’s “Keys To Independence” program. The Florida Keys to Independence Act was signed into law in 2014. It is targeted at youth in licensed foster care between the ages of 15 to 21. The Act created a 3-year pilot project. The Department of Children and Families selected a non-profit to operate and manage the program for the entire state. On May 1, 2017, Governor Rick Scott signed SB 60 into law. This law allowed Keys to Independence to become a permanent program. This program reimburses youth and caregivers for the costs associated with driver’s education, driver’s licenses and other costs related to getting a driver’s license as well as motor vehicle insurance.

Information about Florida’s Keys To Independence Program can be found [here](#).

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STRENGTHENING FAMILIES ACT COMMITTEE MEMBERSHIP

Member Name	Member Type	Title and Organization	Representation
Payne Ackerman	Voting	Former Foster Youth , Project Everlast	young adult currently or previously in foster care
Stephanie Bizarri	Voting	Program Accuracy Specialist , DHHS, Division of Children and Family Services	representative from a child welfare advocacy organization
Deanna Brakhage	Voting	Program Specialist, Bridge to Independence , DHHS, Division of Children and Family Services	representative of the Executive Branch of Government
Ashley Brown	Voting	Program Director , Nebraska KVC	representative from a child welfare service agency
Heather Colton	Voting	Associate Attorney/Guardian Ad Litem , Pollak & Ball, LLC	Guardian Ad Litem who practices in juvenile court
Vernon Davis	Voting	Young Adult Previously in Foster Care , Young Adult Previously in Foster Care	young adult currently or previously in foster care
Misty Flowers (Co-Chair)	Voting	Executive Director , Nebraska Indian Child Welfare Coalition	representative of a child welfare advocacy organization
Patricia Frost	Voting	Education Specialist II , Nebraska Department of Education	representative of the Department of Education (non-statutory)
Ron Giesselmann	Voting	Executive Director , Masonic-Eastern Star Home for Children	Representative of a child care institution
Brandy Gustoff	Voting	Chief Program Officer , Omaha Home for Boys (Jacobs' Place)	representative of an Independent Living Services Agency
Terri Knutson	Voting	Parent	Parent who has experience in the foster care system
Sara Riffel	Voting	Associate Vice President, Connected Youth Initiative , Nebraska Children and Families Foundation	professional who has relevant practical experience
Deb Shuck	Voting	Central Service Navigator for the Older Youth System of Care , CAPWN	representative from an agency providing independent living services
Bailey Perry	Resource	Transitional Living Manager , Omaha Home for Boys, Jacob's Place	representative of an Independent Living Services Agency
Jeremy Behrends	Ex-Officio	Juvenile Justice Program Specialist , Administrative Office of Probation, Juvenile Services Division	representative from the Juvenile Probation System
Monika Gross	Ex-Officio	Executive Director , Foster Care Review Office	Executive Director of the Foster Care Review Office
Deb VanDyke-Ries	Ex-Officio	Director , Nebraska Court Improvement Project	representative of the Judicial Branch of government