FINAL REPORT

Nebraska Child and Family Services Review

September 2002

U.S. Department of Health and Human Services
Administration for Children and Families
Administration on Children, Youth and Families
Children’s Bureau
The Child and Family Services Review (CFSR) assesses State performance during a specified time period with respect to seven child welfare outcomes in the areas of safety, permanency, and well-being and with respect to seven systemic factors. The Nebraska CFSR was conducted the week of July 15, 2002. The assessment is based on information from the following sources:

- The Statewide Assessment prepared by the State child welfare agency – the Nebraska Department of Health and Human Services System (NHHSS), Department of Services, Protection and Safety Division;
- The State Data Profile prepared by the Children’s Bureau of the U.S. Department of Health and Human Services;
- Reviews of 50 cases from three counties in the State; and
- Interviews or focus groups (conducted at all three counties and the State capital) with a wide range of stakeholders including children, parents, foster parents, various levels of State and local NHHSS personnel, collaborating agency personnel, school personnel, service providers, court personnel, legislators, and attorneys.

A key finding of the CFSR was that the State data for 2000 met the national standards with respect to the incidence of maltreatment of children in foster care and the rate of foster care re-entries. In addition, the State was found to be effective in maintaining children safely in their own homes when possible and appropriate (item 3) and in managing the risk of harm to children (item 4). Other areas of strength identified through the CFSR were the following:

- Preventing foster care re-entries (item 5).
- Placing children in close proximity to their biological families (item 11) and with their siblings (item 12) when possible and in the children's best interest.

Despite these strengths, the CFSR found that the State did not achieve substantial conformity with any of the seven safety, permanency, and well-being outcomes. One concern identified pertained to protecting children from maltreatment (safety outcome 1), and reflects the finding that in 58 percent of the applicable cases, NHHSS did not respond to reports of child maltreatment in a timely manner. Although, at present, Nebraska does not have operational policies regarding when a response to a maltreatment report must be initiated, the State has developed policies for these timeframes that were in the process of being reviewed and approved at the time of the CFSR.

Another primary concern identified pertained to the State’s effectiveness in ensuring that children have permanency and stability in their living situations (permanency outcome 1). The case reviews determined that many children in foster care do not experience placement stability (item 6) and do not achieve their permanency goals in a timely manner (items 8, 9 and 10). The State also did not meet the national standards for measures pertaining to the percentages of children achieving reunification within 12 months of entry.
into foster care or a finalized adoption within 24 months of entry into foster care. In addition, both case reviewers and stakeholders expressed concern regarding the frequent agency practice of establishing guardianship as a permanency goal for young children without fully exploring adoption as a potential permanency goal. Stakeholders suggested that this occurs because workers believe that guardianship is easier to achieve than adoption and consequently encourage foster parents to seek guardianship rather than adoption. This is consistent with the finding that the State had filed a petition to terminate parental rights for only 5 of the 17 children in the cases reviewed who had been in foster care for 15 of the past 22 months.

Another area of significant concern pertained to the State’s effectiveness in ensuring that families have enhanced capacity to provide for their children’s needs (well-being outcome 1). The case reviews revealed that in many cases, the agency did not address the service needs of children, parents, and/or foster parents (item 17) and did not involve parents and children in the case planning process (item 18). In addition, the frequency and quality of face-to-face contact between caseworkers and the children and parents in their caseloads was often insufficient to monitor children’s safety or promote attainment of case goals. Case reviewers and stakeholders attributed this problem to the fact that the State agency has no policies delineating either the expected frequency of contact with children and parents or the issues that are to be addressed during each contact. The lack of frequent visitation may provide at least a partial explanation for the lack of effectiveness in attaining permanency for children.

Finally, the CFSR also found that the State child welfare agency was inconsistent with regard to its efforts to meet children’s physical and mental health needs. In 27 percent of the applicable cases, reviewers determined that NHHSS did not adequately address children’s physical health needs and in 34 percent of the applicable cases, reviewers determined that NHHSS did not adequately address children's mental health needs. Information from the Statewide Assessment and from stakeholder interviews indicated that this problem may be due to the extreme shortages of both medical and mental health services throughout most areas of the State.

With regard to the State’s performance on the systemic factors, the CFSR determined that the State was in substantial conformity with factors related to the statewide information system; training for child welfare staff and child caregivers; and agency responsiveness to the community. However, the State was not in substantial conformity with factors pertaining to the case review system; quality assurance; the service array; or foster and adoptive parent licensing, recruitment, and retention.

Although there were several concerns pertaining to systemic issues, one of the more prominent ones pertained to the fact that the State has no policies governing caseworker visitation with children in foster care, which may result in a failure to adequately protect the safety and health of the children. Other key concerns identified were (1) an inconsistency in developing case plans and involving parents in the case planning process; (2) a lack of attention to meeting the requirements of the Adoption and Safe Families Act with respect to filing for termination of parental rights; (3) considerable gaps in services throughout the State; and (4) the fact that the State
lacks a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed.

The following is a summary of the CFSR findings regarding specific outcomes and systemic factors.

KEY FINDINGS RELATED TO OUTCOMES

I. SAFETY

Outcome S1: Children are, first and foremost, protected from abuse and neglect.

Status of Safety Outcome S1 – Not in Substantial Conformity

Nebraska did not achieve substantial conformity with Safety Outcome 1. Reviewers determined that this outcome had been substantially achieved in 77.4 percent of the cases, which is less than the 90 percent required for a rating of substantial conformity. In addition, although the State met the national standard for the incidence of maltreatment of children in foster care by foster parents or facility staff, it did not meet the national standard for the rate of maltreatment recurrence. The CFSR also found that the State is not consistent in responding to maltreatment reports in a timely manner and that the State has no written policies governing the time frames for responding to maltreatment reports, although a set of policies has been prepared and was in the approval process at the time of the CFSR review.

Item 1. Timeliness of initiating investigations of reports of child maltreatment

_____ Strength __X__ Area Needing Improvement

Item 1 was assigned an overall rating of Area Needing Improvement. Reviewers found that the agency had initiated investigations of reports of child maltreatment in a timely manner in 42 percent of the applicable cases. However, in 58 percent of applicable cases, NHHSS did not respond to reports of child maltreatment in accordance with established timeframes. Delays were found to occur in response to both low risk and high-risk maltreatment reports.

Item 2. Repeat maltreatment

_____ Strength __X__ Area Needing Improvement
Item 2 was assigned an overall rating of Area Needing Improvement. Although there were no cases in which a substantiated/indicated maltreatment report received during the period under review was within 6 months of another substantiated/indicated report, the incidence of repeat maltreatment reported in the State Data Profile was 7.6 percent, which does not meet the national standard of 6.1 percent. Both established criteria must be met in order to rate this item as a Strength.

**Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.**

**Status of Safety Outcome S2 – Not in Substantial Conformity**
Nebraska did not achieve substantial conformity with Safety Outcome 2. This determination was based on the finding that the outcome was substantially achieved in 88.6 percent of the cases reviewed, which is less than the 90 percent required for a rating of substantial conformity.

A key CFSR finding was that NHHSS generally makes diligent efforts to maintain children safely in their homes and is effective in managing the risk of harm to children. Although each of these indicators was separately rated as a Strength, there were not a sufficient number of cases in which both were rated as a Strength to attain the 90 percent requirement for substantial conformity.

**Item 3. Services to family to protect child(ren) in home and prevent removal**

__X__ Strength  ____ Area Needing Improvement
Item 3 was assigned an overall rating of Strength because in 88 percent of the cases, reviewers determined that the agency had made diligent efforts to maintain children safely in their homes. Despite positive case review findings, several stakeholders commenting on this issue noted that children often are removed from their homes unnecessarily.

**Item 4. Risk of harm to child**

__X__ Strength  ____ Area Needing Improvement
Item 4 was assigned an overall rating of Strength because reviewers determined that in 91 percent of the cases, NHHSS made sufficient efforts to reduce the risk of harm to children. Many stakeholders commenting on this issue noted that the agency is effective in (1) ensuring that families have completed necessary treatments before children are returned home, and (2) monitoring children’s safety after reunification. However, stakeholders also expressed the opinion that assessments of families and children are not always sufficiently comprehensive to identify all service needs.

II. PERMANENCY
Outcome P1: Children have permanency and stability in their living situations.

Status of Permanency Outcome 1 – Not in Substantial Conformity
Nebraska did not achieve substantial conformity with Permanency Outcome 1. This determination was based on the following:

- Although the State met the national standard for foster care re-entries the State did not meet the national standards for length of time to reunification and adoption or for stability of foster care placements.
- 45.7 percent of the cases reviewed were rated as having substantially achieved Permanency Outcome 1, which is less than the 90 percent required for substantial conformity.

The CFSR found that NHHSS is successful in preventing re-entry into foster care. However, the CFSR also revealed that many children in foster care do not have permanency and stability in their living situations and are not achieving their permanency goals in a timely manner. Concerns also were identified regarding the use of the permanency goal of guardianship for young children without consideration of adoption as a possible option.

Item 5. Foster care re-entries
__X___ Strength  ____ Area Needing Improvement
Item 5 was assigned an overall rating of Strength based on the following:
- The State’s incidence of foster care re-entry (3.5 percent) reported in the State Data Profile meets the national standard of 8.6 percent.
- In 85 percent of the applicable cases, children did not re-enter foster care within 12 months of discharge from a prior foster care episode.

Item 6. Stability of foster care placement
_____ Strength  __X__ Area Needing Improvement
Item 6 was assigned an overall rating of Area Needing Improvement. In 77 percent of applicable cases reviewers determined that children had placement stability and/or that placement changes were in the child's best interest. However, reviewers determined that in 23 percent of cases, children did not have stability in their foster care placements. Key concerns were (1) the use of shelter placements for extended periods of time, (2) lack of support for foster parents to help maintain placements, and (3) foster home shortages.

Item 7. Permanency goal for child
_____ Strength  ___X__ Area Needing Improvement
Item 7 was assigned an overall rating of Area Needing Improvement. In 54 percent of foster care cases, reviewers determined that NHHSS had established appropriate permanency goals for children in a timely manner. However, concerns were identified regarding this issue in 46 percent of foster care cases. The major concerns identified included not filing for termination of parental rights within AFSA guidelines and maintaining the goal of reunification when it was apparent that reunification was unlikely to occur. Stakeholders reported that the goal of adoption is rarely established for a child, and that the agency tends to establish guardianship rather than adoption as a case goal when children cannot be returned to their parents.

Item 8. Reunification, Guardianship or Permanent Placement with Relatives

_____ Strength          __X__ Area Needing Improvement
This item was assigned an overall rating of Area Needing Improvement. In 57 percent of the applicable cases, reviewers determined that the agency had made, or was making, diligent efforts to attain the goals of reunification, guardianship or permanent placement with relatives. However, in 43 percent of applicable cases reviewers determined that NHHSS had not made concerted efforts to achieve these permanency goals in a timely manner. In addition, the State Data Profile indicates that the State's percentage of reunifications occurring within 12 months of entry into foster care (44.5%) does not meet the national standard of 76.2 percent. Stakeholders expressed the opinion that some reunifications may be delayed because caseworkers will wait until the next scheduled court hearing before reunifying families or because non-custodial parents are not being considered as potential placements.

Item 9. Adoption

_____ Strength          __X__ Area Needing Improvement
Item 9 was assigned an overall rating of Area Needing Improvement. Reviewers identified unnecessary delays in attaining finalized adoptions in all of the applicable cases. A key concern was that these delays were due to ineffective casework practice rather than external factors. Reviewers and stakeholders identified delays in (1) filing for TPR, (2) transferring cases to adoption workers, (3) conducting home studies, and (4) obtaining adoption finalizations. In addition, the Statewide Assessment indicated that children were not being registered on the State or national adoption exchanges when parental rights had been terminated. Finally, the State Data Profile indicates that the State's percentage of finalized adoptions in FY 2000 that occurred within 24 months of removal from home (17.9%) does not meet the national standard of 32 percent.

Item 10. Permanency goal of other planned permanent living arrangement

_____ Strength          __X__ Area Needing Improvement
Item 10 was assigned an overall rating of Area Needing Improvement. In 50 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to assist children in attaining the goal of emancipation. However, in 50 percent of applicable cases, reviewers determined that diligent efforts were not made to support this goal. Stakeholders commenting on this issue expressed
concern that children are not being adequately prepared for emancipation and that service providers and foster parents are not provided with sufficient resources to help children make a successful transition from foster care to independent living.

**Outcome P2: The continuity of family relationships and connections is preserved for children.**

**Status of Permanency Outcome 2 – Not in Substantial Conformity**
Nebraska did not achieve substantial conformity with Permanency Outcome 2. This determination was based on the finding that the outcome was rated as substantially achieved in 65.7 percent of the cases, which is less than the 90 percent required for substantial conformity. Although the State did not reach the required 90 percent achievement required for substantial conformity, there were some areas of strength. For example, almost all children in the foster care cases reviewed were placed with siblings when appropriate, and almost all children were placed in close proximity to their parents and communities of origin when relevant. In contrast, NHHSS was inconsistent in its efforts to search for relatives, particularly paternal relatives, as potential placement resources and to promote visitation and bonding with mothers and fathers.

**Item 11. Proximity of foster care placement**

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Item 11 was assigned an overall rating of Strength because, in 97 percent of the applicable cases, reviewers determined that children had been placed in foster care homes that were in close proximity to their parents or, when children were placed far away from parents, the placement was necessary to meet the children’s special needs.

**Item 12. Placement with siblings**

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Item 12 was assigned an overall rating of Strength based on the finding that, in 87 percent of the applicable cases, siblings were either placed together or there was a justifiable reason for their separation.

**Item 13. Visiting with parents and siblings in foster care**

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Item 13 was assigned an overall rating of Area Needing Improvement. In 71 percent of the applicable cases, reviewers determined that NHHSS had made, or was making, concerted efforts to facilitate visitation. However, in 29 percent of the applicable cases, reviewers determined that NHHSS had not made concerted efforts to facilitate visitation. A key concern was the inconsistency of the agency’s efforts to promote visitation between children and their fathers.
Item 14. Preserving connections

_____ Strength  __X__ Area Needing Improvement

Item 14 was assigned an overall rating of Area Needing Improvement. In 71 percent of the applicable foster care cases, reviewers determined that NHHSS made diligent efforts to preserve children's connections. However, in 29 percent of the cases, reviewers determined that children's connections to extended biological family and/or to their heritage had not been preserved in foster care. A key issue identified is that there is no clear State policy identifying the parties responsible for tribal notification when a Native American child is placed in foster care.

Item 15. Relative placement

_____ Strength  __X__ Area Needing Improvement

Item 15 was assigned an overall rating of Area Needing Improvement. In 67 percent of cases, reviewers determined that the agency made diligent efforts to locate and assess relatives as potential placement resources. However, there were concerns related to this issue in 33 percent of cases. In these cases, reviewers found that the agency had made no efforts to explore the possibility of relative placements or had conducted only a limited exploration of potential relative placements, such as seeking and assessing only maternal relatives.

Item 16. Relationship of child in care with parents

_____ Strength  __X__ Area Needing Improvement

Item 16 was assigned an overall rating of Area Needing Improvement. In 55 percent of the applicable cases, reviewers determined that NHHSS made efforts to support the parent-child relationship of children in foster care. However, concerns related to this issue were identified in 45 percent of applicable cases. Case review findings varied, with clear indication of agency support in some cases and lack of efforts in others. Lack of effort was particularly problematic regarding efforts to promote visitation and bonding of children with their fathers.

III. WELL-BEING

Outcome WB1: Families have enhanced capacity to provide for their children's needs.

Status of Well-Being Outcome 1 – Not in Substantial Conformity

Nebraska did not achieve substantial conformity with Well-Being Outcome 1. This determination was based on the finding that the outcome was rated as substantially achieved in 32 percent of the cases reviewed, which is less than the 90 percent required for a determination of substantial conformity. The CFSR process found that NHHSS is not consistent in its efforts to identify and provide for the service needs of families or to involve them in case planning. In many cases, there was evidence of infrequent face-to-face
contact between caseworkers and the children and parents in their cases. A summary of findings for specific items assessed as relevant to this outcome is presented below.

**Item 17. Needs and services of child, parents, foster parents**

_____ Strength  __X__ Area Needing Improvement

Item 17 was assigned an overall rating of Area Needing Improvement. In 56 percent of the cases, reviewers determined that the needs and services of children, parents, and/or foster parents had been, or were being, adequately addressed by NHHSS. However, in 44 percent of the cases, reviewers determined that NHHSS was not adequately addressing the needs and services of children, parents, and/or foster parents. Key concerns included (1) incomplete assessments, (2) lack of assessment of fathers or of all children in the home, and (3) lack of service provision to meet identified child or family needs or to support foster parents.

**Item 18. Child and family involvement in case planning**

_____ Strength  __X__ Area Needing Improvement

Item 18 was assigned an overall rating of Area Needing Improvement. In 26 percent of the applicable case records, reviewers determined that NHHSS appropriately involved parents or children in the case planning process. However, in 74 percent of the applicable cases, reviewers determined that parents and/or children had not been appropriately involved in the case planning process. Most stakeholders commenting on this issue expressed the opinion that the agency is not effective in involving parents in the case planning process.

**Item 19. Worker visits with child**

_____ Strength  __X__ Area Needing Improvement

Item 19 was assigned an overall rating of Area Needing Improvement. In 60 percent of the cases, reviewers determined that the frequency of caseworker visits with children was sufficient to ensure adequate monitoring of children’s safety or to otherwise meet their needs. However, in 40 percent of the cases, reviewers determined that the frequency and quality of caseworker visits with children was not sufficient to monitor children’s safety or to promote attainment of case goals. For example, caseworker visits with children occurred less than monthly in 54 percent of the cases reviewed. Stakeholders commenting on this issue expressed the opinion that the lack of contact prohibits the development of a bond or positive relationship between caseworkers and children. A key concern was that the agency does not have written policy pertaining to either the frequency or quality of worker visits with children.

**Item 20. Worker visits with parents**

_____ Strength  __X__ Area Needing Improvement

This item was assigned an overall rating of Area Needing Improvement. In 44 percent of the cases, reviewers determined that visits with parents were sufficiently frequent or of adequate quality to promote the safety and well-being of the child and enhance attainment
of case goals. However, in 56 percent of cases, reviewers determined that visits were not sufficiently frequent or of adequate quality to meet the needs of parents and children or that the father was not included in worker visits. Both high caseloads and the absence of agency policy pertaining to caseworker visitation with parents were identified as potential reasons for the lack of contact with parents in so many cases.

**Outcome WB2: Children receive appropriate services to meet their educational needs.**

**Status of Well-Being Outcome WB2 – Not in Substantial Conformity**
Nebraska did not achieve substantial conformity with Well-Being Outcome 2. This determination is based on the finding that 86.1 percent of the cases reviewed were found to have substantially achieved this outcome, which is less than the 90 percent required for substantial conformity. Although a general finding of the CFSR case review process was that NHHSS was effective in meeting the educational needs of the majority of the children in the cases reviewed, there were cases in which NHHSS efforts were not consistent.

**Item 21. Educational needs of the child.**

_____ Strength  __X__ Area Needing Improvement

Item 21 was assigned an overall rating of Area Needing Improvement. Although in 86 percent of the cases, reviewers determined that NHHSS was effective in meeting children's educational needs, this did not meet the 90 percent required for substantial conformity for the outcome. According to the Statewide Assessment, an area of concern for the State is the inadequate support by the educational system for children in State custody, especially youth with special needs.

**Outcome WB3: Children receive adequate services to meet their physical and mental health needs.**

**Status Of Well-Being Outcome 3 - Not in Substantial Conformity**
Nebraska did not achieve substantial conformity with Well-Being Outcome 3. The outcome was rated as substantially achieved in 55.3 percent of the applicable cases, which is less than the 90 percent required for a determination of substantial conformity.

The CFSR revealed inconsistencies with regard to NHHSS’ efforts to meet the physical and mental health needs of children. Although in some cases, extensive efforts were made to meet children’s physical and mental health needs, in other cases, there was a notable lack of effort with regard to this issue. Stakeholders and the Statewide Assessment attributed this problem to a lack of available medical services throughout most areas of the State. A summary of findings for the specific items assessed for this outcome is presented below.

**Item 22. Physical health of the child**
Item 22 was assigned an overall rating of Area Needing Improvement. In 73 percent of the applicable cases, reviewers determined that NHHSS adequately addressed children's health needs. However, reviewers determined that these needs were not adequately met in 27 percent of applicable cases. A key concern noted in these cases was that children did not receive regular preventive physical health and/or dental services. In addition, many stakeholders commenting on this issue expressed the opinion that children’s health screenings are not thorough or comprehensive.

Item 23. Mental health of the child

Item 23 was assigned an overall rating of Area Needing Improvement. In 66 percent of the applicable cases, reviewers determined that NHHSS adequately addressed children's mental health needs. However, in 34 percent of the applicable cases, reviewers determined that mental health needs were not adequately addressed either because mental health service needs were not assessed or needed services were not provided.

KEY FINDINGS RELATING TO SYSTEMIC FACTORS

IV. STATEWIDE INFORMATION SYSTEM

Status of Statewide Information System – Substantial Conformity
Nebraska is in substantial conformity with this factor.

Item 24. The State is operating a Statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care.

Item 24 was rated as a Strength because the State is operating a statewide information system that meets the necessary requirements. Stakeholders commenting on this issue reported that agency staff uses the Statewide information system on a regular basis and that the system can identify information such as the location, goals, status, and demographic characteristics of all children in foster care.

V. CASE REVIEW SYSTEM

Status of Case Review System – Not in Substantial Conformity
Nebraska is not in substantial conformity with the factor of Case Review System.

**Item 25. Provides a process that ensures that each child has a written case plan to be developed jointly with the child’s parent(s) that includes the required provisions.**

_____ Strength  __X__ Area Needing Improvement

Item 25 was rated as an Area Needing Improvement. Although the State has a process to ensure that each child has a written case plan, case plans are not present for all children. In addition parents are not active participants in the case planning process.

**Item 26. Provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review.**

__X__ Strength  ____ Area Needing Improvement

Item 26 was rated as a Strength because the Nebraska Administrative Code (NAC) requires that the Foster Care Review Board (FCRB) and the courts review cases at least every 6 months. Stakeholders commenting on this issue were in agreement that FCRB and judicial reviews are held at least every 6 months and sometimes within 3 months.

**Item 27. Provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.**

__X__ Strength  ____ Area Needing Improvement

Item 27 was rated as a Strength because the NAC requires 12-month permanency hearings. According to the Statewide Assessment, the State conducts court reviews in compliance with both ASFA and State statute.

**Item 28. Provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act.**

_____ Strength  __X__ Area Needing Improvement

Item 28 was rated as an Area Needing Improvement. Although the State provides a process for termination of parental rights (TPR), practice does not follow this process. The Statewide Assessment identified several barriers to TPR, including county attorneys who are hesitant to file, lack of financial resources, Tribal preferences, lack of concurrent planning, and caseworker turnover.

**Item 29. Provides a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child.**

_____ Strength  __X__ Area Needing Improvement
Item 29 is rated as an Area Needing Improvement because foster parents, preadoptive parents, and relative caregivers are not automatically notified of judicial reviews. Foster parents must inform the court that they want to be notified of court hearings before they receive notice.

VI. QUALITY ASSURANCE SYSTEM

Status of Quality Assurance System—Not in Substantial Conformity
Nebraska is not in substantial conformity with the factor of Quality Assurance System. Findings relevant to the specific items assessed for this factor are presented below.

Item 30. The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children.

_____ Strength  __X__ Area Needing Improvement

Item 30 was rated as an Area Needing Improvement. Although standards have been developed and implemented to protect children in foster care, there is no policy that requires supervisory visits of children in foster homes. The State acknowledged in their Statewide Assessment that child welfare agency caseworkers are not visiting children in out-of-home placements with sufficient frequency. This was confirmed in the case reviews indicating that in 31 percent of the foster care cases reviewed, reviewers noted that the frequency of caseworker visits with children was not sufficient to monitor their safety and achieve case goals.

Item 31. The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the CFSP are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented.

_____ Strength  __X__ Area Needing Improvement

Item 31 was assigned a rating of Area Needing Improvement. Although the State has some components of a quality assurance system, there is not a comprehensive, statewide approach to quality assurance. The Statewide Assessment notes that efforts are needed to integrate the current disjointed approach to quality assurance into a seamless evaluation system that can be used to measure the quality of care provided and outcomes realized.

VII. TRAINING

Status of Training—Substantial Conformity
Nebraska is in substantial conformity with the systemic factor of Training. Findings relevant to the specific items assessed for this factor are presented below.

**Item 32. The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services.**

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Item 32 was rated as a Strength because new workers participate in training for 15 to 17 weeks and must obtain acceptable levels of performance. Stakeholders commenting on this issue reported that training is provided prior to workers receiving a caseload and that the State hires extra workers so that vacancies are filled with trained staff to avoid uncovered caseloads.

**Item 33. The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP.**

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Item 33 was rated as an Area Needing Improvement because, although there are provisions for ongoing training, the training does not address professional growth and skills development.

**Item 34. The State provides training for current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.**

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Item 34 is rated as a Strength because foster parents are required to obtain at least 21 hours of pre-service training. They are also required to obtain 12 hours of in-service training per year. Facility staff also is required to have a minimum number of training hours each year.

**VIII. SERVICE ARRAY**

**Status of Service Array-Not in Substantial Conformity**

Nebraska is not in substantial conformity with the factor of Service Array. Findings relevant to the specific items assessed for this factor are presented below.

**Item 35. The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment,**
enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency.

_____ Strength __X__ Area Needing Improvement

Item 35 is rated as an Area Needing Improvement because there are many gaps in services in the State. The Statewide Assessment and stakeholders identified gaps in services such as parent education, family support, substance abuse treatment, foster care placements, services for developmentally disabled children, dental care, culturally and linguistically competent providers, independent living services, residential treatment, community-based services, juvenile justice services, and services for sexual offenders and sexual abuse victims.

Item 36. The services in item 35 are accessible to families and children in all political jurisdictions covered in the State’s CFSP.

_____ Strength __X__ Area Needing Improvement

Item 36 is rated as an Area Needing Improvement because services are not consistently available statewide. When services are available, there are frequently long waiting lists. Stakeholders noted that key concerns pertain to gaps or waiting lists for inpatient substance abuse treatment services and home-based services.

Item 37. The services in item 35 can be individualized to meet the unique needs of children and families served by the agency.

_____ Strength __X__ Area Needing Improvement

Item 37 was assigned a rating of Area Needing Improvement because, due to service gaps, children and families do not receive services that are individualized to meet their needs.

IX. AGENCY RESPONSIVENESS TO THE COMMUNITY

Status of Agency Responsiveness To The Community- Substantial Conformity

Nebraska is in substantial conformity with the factor of Agency Responsiveness to the Community. Findings relevant to the specific items assessed for this outcome are presented below.

Item 38. In implementing the provisions of the CFSP, the State engages in ongoing consultation with tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP.

__X__ Strength _______ Area Needing Improvement
Item 38 was assigned a rating of Strength because Nebraska has sought extensive input from tribal representatives, consumers, service providers, and others, in the development of the Nebraska Family Portrait and in the CFSP process. Stakeholders commenting on this issue expressed the opinion that the relationship between community providers and the NHHSS has greatly improved.

Item 39. The agency develops, in consultation with these representatives, annual reports of progress and services delivered.

_X_ Strength ______ Area Needing Improvement

Item 39 is rated as a Strength because Nebraska has involved community stakeholders in the development of reports.

Item 40. The State’s services under the CFSP are coordinated with services or benefits of other Federal or federally assisted programs serving the same population.

_X_ Strength ______ Area Needing Improvement

Item 40 is rated as a Strength because many of the Federal or Federally assisted programs have been re-organized into the comprehensive Nebraska Health and Human Services System. Additional collaboration has occurred with SAMHSA, the Court Systems and domestic violence initiatives.

X. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

**Status of Foster and Adoptive Parent Licensing, Recruitment, and Retention- Not in Substantial Conformity**

Nebraska is not in substantial conformity with the factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention.

Findings relevant to the specific items assessed for this outcome are presented below.

Item 41. The State has implemented standards for foster family homes and childcare institutions, which are reasonably in accord with recommended national standards.

_X_ Strength ______ Area Needing Improvement

Item 41 was assigned a rating of Strength because Nebraska Code provides standards for approval and licensing for all settings providing out-of-home care for State wards.

Item 42. The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.

_X_ Strength ______ Area Needing Improvement

Item 42 was assigned a rating of Strength because licensing standards are applied to all licensed or approved foster family homes or child care institutions. Stakeholders reported that all foster homes are held to the same standards and relatives can be licensed as
foster parents, although not all are. However, some stakeholders raised concerns regarding the quality of foster homes and expressed the opinion that agency-based homes are of higher quality and are better supported than private contractor homes.

**Item 43. The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children.**

_____ Strength  ____X__ Area Needing Improvement

Item 43 was assigned a rating of Area Needing Improvement because, although the State requires criminal background checks, these are not consistently implemented.

**Item 44. The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed.**

_____ Strength  ____X__ Area Needing Improvement

Item 44 was assigned a rating of Area Needing Improvement although Nebraska has a Foster Care Parent Recruitment and Retention Marketing Plan, it is not scheduled to be implemented until July 2003. Stakeholders commented that there is very little or no recruitment of foster homes and that the agency does not have available staff to dedicate to recruitment at the local levels.

**Item 45. The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children.**

_____ Strength  ____X__ Area Needing Improvement

Item 45 was assigned a rating of Area Needing Improvement because adoption exchanges are not being used to promote the adoption of children who are free for adoption. Only 21 of the 315 children free for adoption as of 10/31/2001 were listed on either the State or National exchange.
INTRODUCTION

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Nebraska. The Nebraska on-site review was conducted the week of July 15, 2000. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment prepared by the State child welfare agency – the Nebraska Department of Health and Human Services System (NHHSS), Department of Services, Protection and Safety Division;
- The State Data Profile prepared by the Children’s Bureau of the U.S. Department of Health and Human Services;
- Reviews of 50 case records at three sites throughout the State; and
- Interviews or focus groups (conducted at all three sites) with State and local stakeholders including children, parents, foster parents, all levels of child welfare agency personnel, collaborating agency personnel, school personnel, service providers, court personnel, legislators, and attorneys.

The key characteristics of the 50 cases reviewed are the following:

- 20 cases were reviewed in Douglas County (Omaha), 15 in Dawson County, and 15 in Madison County.
- All 50 cases had been open cases at some time during the period under review.
- 35 of the cases were “foster care cases” (cases in which children were in the care and custody of the State child welfare agency and in an out-of-home placement at some time during the period under review), and 15 were “in-home services cases” (cases in which families received services from the child welfare agency while children remained in their homes).
- 10 of the 35 foster care cases and 1 of the in-home services cases were juvenile justice cases.
- In 29 cases, all children in the family were Caucasian; in 8 cases, all children in the family were African American; in 8 cases, all children in the family were Hispanic; in 3 cases, all the children in the family were Alaska Native/American Indian; and in 1 case, the children were two or more races. In 1 case, reviewers did not identify the race/ethnicity of the children.
- Of the 50 case records reviewed, the primary reasons for opening the child welfare agency cases were the following:
  - Child in juvenile justice system – 11 cases (22%)
  - Physical abuse – 11 cases (22%)
  - Child’s behavior – 10 cases (20%)
  - Neglect (not including medical neglect) – 7 cases (14%)
  - Other – 3 cases (6%)
  - Substance abuse by parent – 2 cases (4%)
  - Mental/physical health of parent – 2 cases (4%)
  - Sexual abuse – 2 cases (4%)
  - Domestic violence in child’s home – 2 cases (4%)

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Among all reasons identified for children coming to the attention of the child welfare agency, physical abuse was cited in 15 (30%) cases, child’s behavior was cited in 13 (26%) cases, neglect (not including medical neglect) was cited in 13 (26%) cases, child in the juvenile justice system was cited in 11 (22%) cases, and substance abuse by parents was cited in 8 (16%) cases.

For 15 of the 35 foster care cases, the children entered foster care prior to the period under review and remained in foster care during the entire period under review; for 9 of the 15 in-home services cases, the case had been opened prior to the period under review.

The first section of the report presents the CFSR findings relevant to the State’s performance in achieving specific outcomes for children in the areas of safety, permanency, and well-being. For each outcome, there is a table presenting key findings, a discussion of the State’s status with regard to the outcome, and a presentation and discussion of each item (indicator) assessed. The second section of the report provides an assessment and discussion of the systemic factors relevant to the child welfare agency’s ability to achieve positive outcomes for children.
SECTION 1: OUTCOMES

I. SAFETY

Safety Outcome 1

Outcome S1: Children are, first and foremost, protected from abuse and neglect.

Number of cases reviewed by the team according to degree of outcome achievement:

<table>
<thead>
<tr>
<th>Outcome Achieved</th>
<th>Dawson</th>
<th>Douglas</th>
<th>Madison</th>
<th>Total Number</th>
<th>Total Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substantially Achieved</td>
<td>4</td>
<td>14</td>
<td>6</td>
<td>24</td>
<td>77.4</td>
</tr>
<tr>
<td>Partially Achieved</td>
<td>0</td>
<td>2</td>
<td>3</td>
<td>5</td>
<td>16.1</td>
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<tr>
<td>Not Achieved or Addressed</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>5</td>
<td>6.5</td>
</tr>
<tr>
<td>Not Applicable</td>
<td>11</td>
<td>4</td>
<td>4</td>
<td>19</td>
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</tr>
</tbody>
</table>

Conformity of Statewide data indicators with national standards:

<table>
<thead>
<tr>
<th>National Standard (percentage)</th>
<th>State’s Percentage</th>
<th>Meets Standard</th>
<th>Does Not Meet Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repeat maltreatment</td>
<td>6.1</td>
<td>7.6</td>
<td>X</td>
</tr>
<tr>
<td>Maltreatment of children in foster care</td>
<td>0.57</td>
<td>.04</td>
<td>X</td>
</tr>
</tbody>
</table>

STATUS OF SAFETY OUTCOME 1:

Nebraska did not achieve substantial conformity for Safety Outcome 1. This determination was based on the following findings:

- 77.4 percent of the cases reviewed were rated as having substantially achieved this outcome, which is less than the 90 percent required for a rating of substantial conformity.
- The State did not meet the national standard for the percentage of children experiencing more than one substantiated or indicated child maltreatment report within a 6-month period.

According to the State Data Profile, Nebraska met the national standard for the percentages of children experiencing maltreatment from caretakers, with only .04 percent of children experiencing abuse or neglect by foster parents or facility employees. Nebraska did
not meet the standard for the rate of maltreatment recurrence, although there was no repeat maltreatment during the period under review in any of the cases reviewed. However, the case reviews revealed that NHHSS is not consistent in responding to reports of child maltreatment in a timely manner.

The findings pertaining to the specific items assessed under Safety Outcome 1 are presented below.

**Item 1: Timeliness of initiating investigations of reports of child maltreatment**

| _____ Strength | _X_ Area Needing Improvement |

**Review Findings:** The assessment of item 1 was applicable for 12 of the 50 cases. Thirty-eight cases were not applicable because they did not involve reports of child maltreatment during the period under review. In assessing item 1, reviewers were to determine whether the response to a maltreatment report occurring during the period under review had been initiated in accordance with child welfare agency policy. Although Nebraska does not have a policy establishing timeframes for the initiation of investigations of maltreatment reports, the standard used for review purposes was that investigation of reports designated “high risk” should be initiated within 24 hours of receipt. For all other reports, investigations should begin within 5 days of receipt. Selection of these timeframes was based on generally accepted practice standards as well as the State’s pending policies regarding the timeframes for initiating investigations of maltreatment reports. The results of the assessment were the following:

- Item 1 was rated as a Strength in 5 (42%) of the 12 applicable cases (3 of which were foster care cases).
- Item 1 was rated as an Area Needing Improvement in 7 (58%) of the 12 applicable cases (3 of which were foster care cases).

This item was rated as a Strength in all cases in which the initiation of an investigation of a child maltreatment report occurring during the period under review was in accordance with review-established guidelines. For the seven cases rated as an Area Needing Improvement, NHHSS did not respond to reports of child maltreatment in accordance with established timeframes as referenced in the previous paragraph. Of the seven cases, five reports were designated as low risk and two as high risk. In the 2 high-risk cases, investigations were initiated 4 days and 28 days after receipt of the report.

Many stakeholders commenting on this issue expressed the opinion that timeliness of initiating investigations is a problem for the State. Some stakeholders noted that there are delays in assigning low risk cases to assessment staff. Many Stakeholders reported that NHHSS is currently developing written guidelines for response times and redesigning its approach to assigning priorities.
**Determination and Discussion:** Item 1 was assigned an overall rating of Area Needing Improvement based on the finding that in 58 percent of the applicable cases, reviewers determined that NHHSS did not initiate an investigation of maltreatment reports in a timely manner.

**Item 2. Repeat maltreatment**

_____ Strength  ___X__ Area Needing Improvement

**Review Findings:** The assessment of item 2 was applicable for 29 of the 50 cases. Cases were considered not applicable for assessment if the child or family had never had a maltreatment report. In assessing this item, reviewers were to determine whether there had been at least one substantiated or indicated maltreatment report during the period under review, and if so, whether another substantiated or indicated report occurred within 6 months of that report. The results of the assessment were that the item was rated as Strength in all 29 (100%) applicable cases (20 of which were foster care cases).

Although item 2 was rated as a Strength in 100 percent of the 29 applicable cases, many of these were either foster care cases in which the child entered foster care prior to the period under review (14 cases), or in-home cases for which there were no substantiated or indicated child maltreatment reports during the period under review (7 cases). There were only 5 cases in which there was at least one substantiated or indicated maltreatment report during the period under review.

The case review process found that in the majority of cases reviewed, there were multiple maltreatment reports over the life of the case. Of the 29 applicable cases, 18 had 3 or more reports over the life of the case, although not all reports were substantiated or indicated. Three foster care cases had 10 or more reports over the life of the case prior to the children’s entry into foster care.

The case review process also found that not all new maltreatment reports were entered into N-FOCUS (the State’s Automated Information System), although case records contained information that would constitute a new report. This practice may result in under-reporting of repeat maltreatment.

**Determination and Discussion:** Item 2 was assigned an overall rating of Area Needing Improvement. Although there was no recurrence of maltreatment in 100 percent of the cases, the State Data Profile indicates that the incidence of repeat maltreatment was 7.6 percent, which does not meet the national standard of 6.1 percent. It is necessary for both measures to meet the established standards or criteria for a rating of Strength to be assigned to this item.
Safety Outcome 2

Safety Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.

Number of cases reviewed by the team according to degree of outcome achievement:

<table>
<thead>
<tr>
<th></th>
<th>Dawson</th>
<th>Douglas</th>
<th>Madison</th>
<th>Total Number</th>
<th>Total Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substantially Achieved:</td>
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<td>13</td>
<td>11</td>
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<tr>
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<td>0</td>
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<td>4</td>
<td>3</td>
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<td></td>
</tr>
</tbody>
</table>

STATUS OF SAFETY OUTCOME 2

Nebraska did not achieve substantial conformity with Safety Outcome 2. This determination was based on the finding that the outcome was substantially achieved in 88.6 percent of the cases reviewed, which is less than the 90 percent required for a rating of substantial conformity.

A general finding of the CFSR was that for the most part NHHSS makes diligent efforts to maintain children safely in their homes and is effective in managing the risk of harm to children. Although separately, each of these indicators was rated as a Strength for NHHSS, there was not a sufficient number of cases in which both were rated as a Strength to attain the 90 percent substantially achieved requirement.

Findings pertaining to the specific items assessed under Safety Outcome 2 are presented and discussed below.

Item 3. Services to family to protect child (ren) in home and prevent removal

__X__ Strength  _____ Area Needing Improvement

Review Findings: There were 17 cases for which an assessment of item 3 was applicable. Thirty-three cases were excluded from this assessment because there were no substantiated maltreatment reports or identified risks of harm to children in the home during the
period under review, or because the target child entered foster care prior to the PUR and there were no other children in the home who were at risk of maltreatment. For this item, reviewers were to assess whether, in responding to a substantiated or indicated maltreatment report or risk of harm, the agency made diligent efforts to provide services to families to prevent removal of children from their homes while at the same time ensuring their safety. The results of this assessment were the following:

- Item 3 was rated as a Strength in 15 (88%) of the 17 applicable cases (8 of which were foster care cases).
- Item 3 was rated as an Area Needing Improvement in 2 (12%) of the 17 applicable cases (both of which were in-home services cases).

This item was rated as a Strength when reviewers determined that NHHSS assessed the family’s service needs appropriately and provided or referred the family for services to meet those needs to prevent removal (6 cases). In 3 cases, families received appropriate services after reunification. In 6 cases, NHHSS appropriately removed the child from the home. The services provided included substance abuse assessment and treatment, in-home services, counseling, lice treatment, mental health evaluations, medication, intensive therapy, transportation, child care, financial services, and intensive family preservation services.

In one of the two cases rated as an Area Needing Improvement reviewers determined that there was an excessive delay in offering services to the family (over 4 months from the time that the investigation was initiated), and in the other case, reviewers determined that needed services were not offered.

Several stakeholders commenting on this issue noted that children often are removed from their homes that do not need to be removed. This was attributed to (1) a “community culture” in the State that tends to view removing children as the most appropriate response to a maltreatment incident, and (2) the fact that police sometimes remove children who could have remained in their homes without contacting NHHSS. In one site, stakeholders suggested that prevention services often are not considered because of a lack of funds available for in-home services and the long waiting lists for services available in the community.

**Determination and Discussion:** This item was assigned an overall rating of Strength because in 88 percent of the cases, reviewers determined that NHHSS made diligent efforts to provide services to prevent children’s placement in foster care. According to the Statewide assessment, the State has emphasized building preventive and community-based services using Federal grant funds to improve accessibility, availability, and quality of services. The Statewide Assessment also notes, however, that there are service gaps in many areas, which impacts the ability of families to access needed care and treatment. In fact, the majority of Nebraska’s 93 counties are designated medical and mental health professional shortage areas, with only 22 counties covered by a statutorily defined Public Health Department.
**Item 4. Risk of harm to child**

__X__ Strength  _____ Area Needing Improvement

**Review Findings:** An assessment of item 4 was applicable for 35 of 50 cases reviewed. Cases were not applicable for assessment if there was no current or prior risk of harm to the children in the family. The assessment of item 4 required reviewers to determine whether NHHSS had made, or was making, diligent efforts to reduce the risk of harm to the children involved in each case. The assessment resulted in the following findings:

- Item 4 was rated as a Strength in 32 (91%) of the 35 applicable cases. (22 of which were foster care cases)
- Item 4 was rated as an Area Needing Improvement in 3 (9%) of the 35 applicable cases. (All 3 were in-home services cases)

This item was rated as a Strength when reviewers identified the following:

- The risk of harm to children was appropriately addressed by removing the children from their homes and providing services to parents to address risk issues (20 cases).
- The risk of harm to children was appropriately addressed by removing the children from their homes and seeking TPR prior to or during the period under review (2 cases).
- The risk of harm to children was appropriately managed by providing services to families to address risk concerns while the children remained in the home (9 cases).
- The risk of harm was addressed by providing post-reunification services (1 case).

The item was rated as an Area Needing Improvement when reviewers determined the following:

- The parents did not follow through with services and the children remained at risk (1 case).
- The families’ needs were not fully assessed, so that services provided were not sufficient to reduce risk of harm (2 cases).

Many stakeholders commenting on this issue noted that NHHSS is effective in (1) ensuring that families have completed necessary treatments before children are returned home, and (2) monitoring children’s safety after reunification. However, stakeholders also expressed the opinion that the assessments of families and children residing in the home are not sufficiently comprehensive to identify all service needs and ensure children’s safety, particularly the safety of siblings who remain in the home. In one site, stakeholders expressed concern that because investigations often are not completed in a timely manner, there can be extensive delays in providing services to families. These stakeholders noted that a barrier to reducing the risk of harm to children is the general NHHSS practice of not providing services to a family until an investigation is completed and the case is transferred to a treatment worker.
**Determination and Discussion:** This item was assigned an overall rating of Strength because in 91 percent of the applicable cases reviewers determined that NHHSS made sufficient efforts to reduce risk of harm to children. According to the Statewide Assessment, NHHSS has increased the use of placements in out-of-home care as an approach to reducing the risk of harm to children. It was suggested that this increase might be due to the lack of medical and mental health treatment resources in the community. The Statewide Assessment also notes, however, that in some locations in the State, there are Child Advocacy Centers that provide safe and nurturing settings for children and non-perpetrating family members during an investigation for cases involving sexual abuse, severe physical abuse, or witnesses to homicides.

**II. PERMANENCY**

**Permanency Outcome 1**

<table>
<thead>
<tr>
<th>Outcome P1: Children have permanency and stability in their living situations.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of cases reviewed by the team according to degree of outcome achievement:</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Substantially Achieved:</td>
</tr>
<tr>
<td>Partially Achieved:</td>
</tr>
<tr>
<td>Not Achieved or Addressed:</td>
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<td>Not Applicable:</td>
</tr>
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</table>

**Conformity of Statewide data indicators with national standards:**

<table>
<thead>
<tr>
<th></th>
<th>National Standard (percentage)</th>
<th>State’s Data (percentage)</th>
<th>Meets Standard</th>
<th>Does Not Meet Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster care re-entries</td>
<td>8.6</td>
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</tr>
<tr>
<td>Length of time to achieve reunification</td>
<td>76.2</td>
<td>44.5</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Length of time to achieve adoption</td>
<td>32.0</td>
<td>17.9</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Stability of foster care placements</td>
<td>86.7</td>
<td>83.5</td>
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<tr>
<td>Length of stay in foster care*</td>
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<td>14.4</td>
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</tr>
</tbody>
</table>

*Not used to determine substantial conformity.
STATUS OF PERMANENCY OUTCOME P1

Nebraska did not achieve substantial conformity with Permanency Outcome 1. This determination was based on the following findings:

- 45.7 percent of the cases were rated as having substantially achieved Permanency Outcome 1, which is less than the 90 percent required for an overall rating of substantial conformity;
- The State did not meet the national standard for the percentage of (1) reunifications achieved within 12 months of entry into foster care or (2) adoptions achieved within 24 months of entry into foster care; and
- The State did not meet the national standard for the percentage of children experiencing two or fewer placements during their first 12 months in foster care.

In general, the CFSR process indicated that most children in the foster care cases reviewed did not have permanency and stability in their living situations. Establishing appropriate permanency goals and achieving adoptions in a timely manner were identified as critical problems, with reviewers rating "adoption" as an Area Needing Improvement in 100 percent of the applicable cases. An additional concern pertained to the finding that few children had adoption as a case goal, even when they had been in foster care for long periods of time. This may be attributed to the finding that DFYS tends to establish a goal of guardianship for children, even very young children, without fully exploring the possibility of adoption as a permanency goal.

Findings pertaining to the specific items assessed under Permanency Outcome 1 are presented below.

**Item 5. Foster care re-entries**

__X__ Strength _____ Area Needing Improvement

**Review Findings:** Thirteen of the 35 foster care cases were applicable to an assessment of item 5 because they involved children who entered foster care at some time during the period under review. In assessing this item, reviewers were to determine whether the entry into foster care during the period under review had occurred within 12 months of discharge from a prior foster care episode. The results of this assessment were the following:

- Item 5 was rated as a Strength in 11 (85%) of the 13 applicable cases.
- Item 5 was rated as an Area Needing Improvement in 2 (15%) of the 13 applicable cases.
A rating of Area Needing Improvement for this item was assigned to 2 cases in which there was an entry into foster care during the period under review that was within 12 months of discharge from a prior foster care episode. In the two cases, the children returned to foster care 5 months after discharge from a prior foster care episode.

A range of concerns were provided by stakeholders. Although some stakeholders commenting on this issue reported that NHHSS does not rush reunification and ensures that the family has completed treatment before children are reunified, other stakeholders expressed the opinion that children are returned home too soon and consequently, re-enter foster care. Most stakeholders agreed, however, that NHHSS provides post-reunification services to support families.

**Determination and Discussion:** Item 5 was assigned an overall rating of Strength based on the following:
- The State’s incidence of foster care re-entry (3.5 percent) reported in the State Data Profile meets the national standard of 8.6 percent.
- In 85 percent of the applicable cases, children did not re-enter foster care within 12 months of discharge from a prior foster care episode.

**Item 6. Stability of foster care placement**

___ Strength ___X__ Area Needing Improvement

**Review Findings:** All 35 foster care cases were applicable for an assessment of Item 6. In assessing this item, reviewers were to determine whether the child experienced multiple placement settings during the period under review and, if so, whether the changes in placement settings were necessary to achieve the child's permanency goal or meet the child's service needs. The findings of this assessment were the following:
- Item 6 was rated as a Strength in 27 (77%) of the 35 applicable cases.
- Item 6 was rated as an Area Needing Improvement in 8 (23%) of the 35 applicable cases.

The case review found the following:
- Children in 13 cases experienced only one placement during the period under review.
- Children in 18 cases experienced between 2 to 4 placements during the period under review.
- Children in 4 cases experienced 5 or more placements during the period under review.
This item was rated as a Strength when reviewers determined that children did not experience a placement change during the period under review, or that placement changes were necessary to meet children’s needs or promote attainment of their permanency goals (such as movement from a residential treatment center to a therapeutic foster home).

A rating of Area Needing Improvement for this item was assigned when reviewers made the following determinations:

- In cases in which foster family placement disruptions occurred, there was no indication that the NHHSS caseworker had made efforts to prevent the disruptions (2 cases).
- Children were in emergency shelters for 3 months or longer prior to placement in an appropriate setting (2 cases).
- Children experienced multiple placements during the period under review, and changes in at least one of the placements did not reflect efforts to promote goal attainment or meet the child's service needs (4 cases).

Stakeholders commenting on this issue expressed the opinion that children in foster care in the State generally do not experience stability in their placements. Some stakeholders attributed this to the fact that many children enter emergency shelters at the time of removal from the home and remain there for extended time periods ranging from 30 to 60 days. Other stakeholders noted that placement instability is due in part to a scarcity of foster family homes, particularly therapeutic foster homes, and in part to the fact that foster parents receive little support from NHHSS.

**Determination and Discussion:** Item 6 was rated as an Area Needing Improvement based on the following findings:

- In 23 percent of the applicable cases, reviewers determined that placement changes were not in the best interests of the child.
- The State Data Profile indicates that 83.5 percent of children in foster care in the State for 12 months or less during FY 2000 had no more than two placement settings, which does not meet the national standard of 86.7 percent.

The Statewide Assessment noted the following factors as contributing to the movement of children in foster care:

- The numbers of State ward juvenile offenders requiring multiple placements to address offense and treatment needs.
- The numbers of children and youth with severe and special needs, e.g. medical issues, substance abuse issues, and psychiatric issues – with fewer foster care providers willing or able to care for these children over an extended time – and an identified lack of community-based resources (medical and mental health care, including substance abuse treatment) on a statewide basis.
- Lack of readily accessible personal and financial supports to foster parents to prevent “burn-out.”
- Large caseloads that inhibit the ability of caseworkers to spend needed time with foster care providers in face-to-face contact.
- The number of children with conduct disorders who are initially placed in group settings, but who require a subsequent placement in a more individualized setting in order to meet their needs.
- A lack of foster homes that results in an inability to appropriately match a child and foster caregiver.
A lack of timely identification of the non-custodial biological parent or other relatives who may be potential placement resources.

**Item 7. Permanency goal for child**

___ Strength ___X__ Area Needing Improvement

*Review Findings:* All 35 foster care cases were applicable for an assessment of item 7. In assessing this item, reviewers were to determine whether NHHSS had established an appropriate permanency goal for the child in a timely manner, including filing termination of parental rights (TPR) petitions when relevant. The results of this assessment were the following:

- Item 7 was rated as a Strength in 19 (54%) of the 35 applicable cases.
- Item 7 was rated as an Area Needing Improvement in 16 (46%) of the 35 applicable cases.

The assessment identified the following permanency goals for the 35 children in foster care:

- 22 children had a goal of reunification with parents or relatives (2 with a concurrent goal of guardianship, and 1 with a concurrent goal of emancipation);
- 6 children had a goal of guardianship;
- 4 children had a goal of adoption (1 with a concurrent goal of guardianship, and 1 with concurrent goals of guardianship and long-term foster care); and
- 3 children had a goal of long-term foster care.

Children in 17 of the 35 applicable cases had been in care for 15 of the past 22 months. NHHSS had filed for TPR for 5 of these children and attained TPR for all of them. For the 12 children for whom TPR had not been filed, there were only 2 cases in which compelling reasons were noted in the case file; in one of these cases, reunification was scheduled for the next month.

Cases were assigned a rating of Strength for this item when reviewers determined that NHHSS had established an appropriate permanency goal in a timely manner. Cases rated as an Area Needing Improvement included six cases in which the goal was guardianship, four cases in which the goal was reunification, three cases in which the goal was long-term foster care, and three cases in which the goal was adoption. The rating of ANI was assigned when reviewers observed one or more of the following:

- The goal of reunification was not changed in a timely manner when it was apparent that reunification was unlikely to occur (8 cases).
• NHHSS did not file for TPR when the child had been in foster care for 15 of the past 22 months and no compelling reasons were noted in the case file (10 cases).
• The goal established for the child was inappropriate (4 cases).

Stakeholders commenting on this issue noted that it is rare that NHHSS will seek TPR for a child, although parents will sometimes voluntarily relinquish their parental rights. Correspondingly, stakeholders also reported that the goal of adoption is rarely established for a child and that NHHSS tends to establish guardianship rather than adoption as a case goal when children cannot be returned to their parents. While some stakeholders suggested that concurrent planning is being implemented and has been effective in expediting permanency, other stakeholders expressed the opinion that caseworkers do not understand concurrent planning and implement it too late in the case; for example, they will start “concurrent planning” when reunification does not appear to be working rather than implementing a concurrent plan at the time the child enters foster care. A few stakeholders expressed concern that NHHSS does not routinely reassess goals for their appropriateness.

**Determination and Discussion:** Item 7 was assigned an overall rating of Area Needing Improvement based on the finding that in 46 percent of the applicable cases, reviewers determined that NHHSS had not established an appropriate permanency goal in a timely manner. Key concerns pertained to the use of guardianship as a goal rather than adoption, even for young children, and the lack of compliance with requirements of the Adoption and Safe Families Act (ASFA) pertaining to filing for TPR.

According to the Statewide Assessment, more than half (54.1%) of the children in care did not have case plan permanency goals established as of September 30, 2000 (although this may be a data entry issue). The Statewide Assessment notes that NHHSS has recently implemented several strategies to promote more timely achievement of children’s permanency goals.

**Item 8. Reunification, Guardianship, or Permanent Placement with Relatives**

| _____ Strength | ___X__ Area Needing Improvement |

**Review Findings:** Item 8 was applicable for 30 cases. In assessing these cases, reviewers were to determine whether NHHSS had achieved children’s goals of reunification or guardianship in a timely manner or, if goals had not been achieved in a timely manner, whether NHHSS had made diligent efforts to achieve the goals. The results of this assessment were the following:

• Item 8 was rated as a Strength for 17 (57%) of the 30 applicable cases.
• Item 8 was rated as an Area Needing Improvement for 13 (43%) of the 30 applicable cases.
Of the 30 applicable cases, 22 had a goal of reunification and 8 had a goal of guardianship. The permanency goal of reunification was achieved for 13 cases. In 7 of those cases, reunification was achieved within 12 months. A rating of Strength was assigned to 11 cases in which the goal of reunification had been achieved or was scheduled to be achieved; 1 case in which the goal of guardianship was scheduled; and 5 cases in which services were in place to promote reunification. A rating of Area Needing Improvement was assigned to thirteen cases because reviewers determined that NHHSS had not made concerted efforts to achieve permanency goals in a timely manner.

Stakeholders commenting on this issue expressed the opinion that some delays in reunification occur because workers wait until the next scheduled court hearing before reunifying families, even when the family is ready for reunification. Some stakeholders also suggested that children remain in foster care for too long because non-custodial parents are not being considered as potential placements.

Another concern raised during the review process pertained to the practice of establishing guardianship as a permanency goal for young children. Reviewers noted that there were cases in which guardianship to foster parents was the permanency goal, but no reason was provided as to why TPR and adoption were not being pursued. Stakeholders commented that often guardianship is “quicker to achieve” than adoption, and that foster parents are sometimes more willing to assume guardianship over a child with special needs than to adopt that child. Some stakeholders indicated that foster parents often are “counseled” by NHHSS staff to assume guardianship over a child with special needs rather than adopt because the foster parents may require State assistance in the future to meet the child’s care requirements.

**Determination and Discussion:** This item was assigned an overall rating of Area Needing Improvement for the following reasons: The State Data Profile indicates that the State’s percentage of reunifications occurring within 12 months of entry into foster care (44.5%) does not meet the national standard of 76.2 percent.

In 43 percent of the cases reviewed, reviewers determined that NHHSS had not made, or was not making, diligent efforts to attain the goals of reunification or guardianship.

As noted in the Statewide Assessment, one primary issue affecting performance in this area is believed to be the large population (21.3 percent) of State wards who are juvenile offenders, and the fact that these children tend to be in out-of-home care for longer periods of time than other children because of their treatment needs or because their offense requires a court ordered stay. The Statewide Assessment also notes that the State’s Management Information System, N-FOCUS, does not capture when a child in State custody has been reunified with a relative other than the biological parent.
Item 9. Adoption

___ Strength     __X__ Area Needing Improvement

**Review Findings:** Four of the foster care cases were applicable for an assessment of item 9. In assessing this item, reviewers were to determine whether appropriate and timely efforts had been, or were being, undertaken to achieve finalized adoptions. The result was that the item was rated as an Area Needing Improvement in all (100%) applicable cases.

The case review also found that in 1 of the 4 applicable cases, adoption had been finalized, but not within 24 months of the child's entry into foster care. One of the three other children with a goal of adoption was in an adoptive placement with foster parents at the time of the CFSR onsite review.

The item was rated as an Area Needing Improvement when reviewers determined that NHHSS had not made diligent efforts to achieve a finalized adoption in a timely manner. Reviewers determined that delays were the result of casework practice rather than external factors. For example, in one case, a pre-adoptive placement disrupted after two weeks because of sexual abuse perpetrated by the pre-adoptive mother's new husband. No criminal background check had been done on the new husband. In another case, the child had been in foster care 28 months, but a petition to terminate the father's parental rights had not been filed. In addition, there were delays of up to 6 months in transferring the cases to the adoption workers. Once the case was transferred there were long periods of time before the adoption worker made contact with the child. These actions occurred even when the foster parents had been identified as a potential resource for the child.

Some stakeholders commenting on this issue noted that the major barrier to adoption is that NHHSS is not filing for TPR in a timely manner. Other barriers to timely adoptions identified by stakeholders were (1) the unwillingness on the part of NHHSS to consider open adoptions, (2) delays in conducting home-studies, and (3) delays in obtaining finalizations. In addition, Stakeholders in one site expressed concern that potential adoptive families in that site are exploring adopting children from other States because children in that site are not being freed for adoption in a timely manner.

**Determination and Discussion:** This item was assigned an overall rating of Area Needing Improvement for the following reasons:

- In 100 percent of the applicable cases, reviewers determined that NHHSS had not made diligent efforts to achieve adoptions in a timely manner.
• The State Data Profile indicates that the State's percentage of finalized adoptions in FY 2000 that occurred within 24 months of removal from home (17.9%) does not meet the national standard of 32 percent.

According to the Statewide Assessment, the number of children in foster care who were discharged to adoption has increased from 138 children in 1999 to 179 children in 2000. However, the Statewide Assessment also indicates that children are not being registered on the State or national adoption exchanges when parental rights are terminated.

**Item 10. Permanency goal of other planned permanent living arrangement**

___ Strength __X__ Area Needing Improvement

**Review Findings:** Four of the foster care cases were assessed for item 10. In assessing these cases, reviewers were to determine if NHHSS had made, or was making diligent efforts to assist children in attaining their goals related to other planned permanent living arrangements. The results of this assessment were the following:

• Item 10 was rated as a Strength for 2 (50%) of the 4 applicable cases.
• Item 10 was rated as an Area Needing Improvement for 2 (50%) of the 4 applicable cases.

In the two cases assigned a rating of Strength, reviewers determined that appropriate services were provided to support the goal of long-term foster care. In the two cases assigned a rating of Area Needing Improvement, reviewers determined that diligent efforts were not made to support a goal of long-term foster care.

Stakeholders commenting on this issue expressed concern that children are not being adequately prepared for emancipation and that service providers and foster parents are not provided with sufficient resources to help children make a successful transition from foster care to independent living. For example, stakeholders in one site commented that foster care contractors are asked to provide independent living services but are not given extra resources to do this. In addition, foster parents are expected to assess children’s need for life skills training but are not trained on how to make these assessments. Some stakeholders in one area reported that there are repeated situations in which foster care providers have been instructed by NHHSS to take youth to adult shelters at age 19 and leave them there, without having provided them with any services to prepare for independent living.
**Determination and Discussion:** This item was assigned an overall rating of Area Needing Improvement because in 50 percent of the applicable cases, reviewers determined that NHHSS had not made diligent efforts to support children in the goal of long-term foster care leading to emancipation/independent living.

**Permanency Outcome 2**

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<thead>
<tr>
<th>Outcome P2: The continuity of family relationships and connections is preserved for children.</th>
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<tr>
<td>Number of cases reviewed by the team according to degree of outcome achievement:</td>
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<td>Dawson</td>
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<tr>
<td>Substantially Achieved:</td>
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<tr>
<td>Partially Achieved:</td>
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<tr>
<td>Not Achieved or Addressed:</td>
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<tr>
<td>Not Applicable:</td>
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**STATUS OF PERMANENCY OUTCOME P2:**

Nebraska did not achieve substantial conformity with Permanency Outcome 2. This determination was based on the finding that the outcome was rated as substantially achieved in 65.7 percent of the cases, which is less than the 90 percent required for substantial conformity.

Although the State did not reach the required 90 percent achievement required for substantial conformity, there were some areas of strength. For example, almost all children in the foster care cases reviewed were placed with siblings when appropriate, and almost all children were placed in close proximity to their communities of origin when relevant. In contrast, NHHSS was inconsistent in its efforts to search for relatives, particularly paternal relatives, as potential placement resources. In addition, concerns were identified regarding NHHSS’ efforts to promote visitation and bonding with fathers. Stakeholders indicated that there are times when siblings are separated due to the lack of foster homes that can accommodate sibling groups.

More specific findings pertaining to the items assessed under Permanency Outcome 2 are presented and discussed below.
Item 11. Proximity of foster care placement

__X__ Strength       ____ Area Needing Improvement

*Review Findings:* Of the 35 foster care cases, 31 were applicable for an assessment of item 11. Cases determined to be not applicable were those in which TPR had been attained prior to the period under review, or in which contact with parents was not considered to be in the child's best interest. In assessing item 11, reviewers were to determine whether the child's foster care setting was in close proximity to the child's parents or close relatives. This assessment resulted in the following findings:

- Item 11 was rated as a Strength in 30 (97%) of the 31 applicable cases.
- Item 11 was rated as an Area Needing Improvement in 1 (3%) of the 31 applicable cases.

In the 30 cases rated as a Strength, reviewers determined that children were placed in the same community or county as parents or relatives (14 cases), or that the reason for out-of-area placement was justifiable on the basis of the children's needs (16 cases). In the one case rated as an Area Needing Improvement, reviewers determined that the child’s placement outside of the county created a barrier to reunification, although that placement was the only placement available for female youth offenders.

Stakeholders commenting on this issue reported that out-of-State placements are the result of a lack of resources for children with special service needs, such as developmentally disabled children or sexual offenders. Stakeholders also noted that a number of children are placed out-of-State in order to place them with relatives or adoptive families.

*Determination and Discussion:* Item 11 was assigned an overall rating of Strength because in 97 percent of applicable cases, reviewers determined that children were placed in close proximity to parents or relatives, or that the separation was necessary to meet the child’s needs.

Item 12. Placement with siblings

__X__ Strength       ____ Area Needing Improvement

*Review Findings:* Fifteen of the 35 foster care cases involved a child with siblings who also were in foster care. In assessing item 12, reviewers were to determine whether siblings were, or had been, placed together and, if not, whether separation was necessary to meet the needs (service or safety needs) of one or more of the children. This assessment resulted in the following findings:
• Item 12 was rated as a Strength in 13 (87%) of the 15 applicable cases.
• Item 12 was rated as an Area Needing Improvement in 2 (13%) of the 15 applicable cases.

In 4 of the 15 applicable cases, the child was in the same placement setting as at least one other sibling, and in 2 of these cases, the child was in the same placement setting as all of his or her siblings.

In 11 of the 13 cases in which the child was separated from some or all siblings, reviewers determined that the separation was in the best interest of the siblings. In the two cases rated as an Area Needing Improvement for this item, reviewers determined that the children were placed separately due to lack of placement resources.

Stakeholders commenting on this issue expressed the opinion that NHHSS makes concerted efforts to place siblings together and that siblings are separated only when necessary.

**Determination and Discussion:** Item 12 was assigned an overall rating of Strength based on the finding that in 87 percent of the cases, reviewers determined that siblings either were placed together or their separation was necessary to meet the needs of one or more of the siblings or to achieve relative placements for one or more of the siblings.

**Item 13. Visiting with parents and siblings in foster care**

_____ Strength _______X____ Area Needing Improvement

**Review Findings:** An assessment of item 13 was applicable for all 35 foster care cases. Cases were not applicable for assessment if the child had no siblings in foster care, if the parents could not be located, and/or if visitation with parents was considered not in the best interests of the child. In assessing this item, reviewers were to determine (1) whether NHHSS had made, or was making, diligent efforts to facilitate visitation between children in foster care and their parents and siblings in foster care, and (2) whether these visits typically occurred with sufficient frequency to meet the needs of children and families. The findings of this assessment were the following:

• Item 13 was rated as a Strength in 25 (71%) of the 35 applicable cases.
• Item 13 was rated as an Area Needing Improvement in 10 (29%) of the 35 applicable cases.
The analysis of case reviews revealed the following frequencies for visits between children and their mothers:
- Weekly visits in 16 cases.
- Twice a month visits in 5 cases.
- Monthly visits in 1 case.
- Less than monthly visits in 5 cases.
- No visits in 4 cases.
- Visitation was not applicable in 4 cases (mother deceased or parental rights terminated and no longer involved in planning for the child).

For 5 of the 9 cases in which there were either no visits with the mother or visits took place less frequently than once a month, reviewers determined that NHHSS had not made diligent efforts to promote and support visitation.

Typical visitation patterns for children and their fathers were the following:
- Weekly visits in 11 cases.
- Twice a month visits in 3 cases.
- Less than monthly visits in 2 cases.
- No visits in 16 cases.
- Visitation was not applicable in 3 cases (father was deceased or parental rights terminated).

In 9 of the 18 cases in which there were either no visits with the father or visits took place less frequently than once a month, reviewers determined that NHHSS had not made concerted efforts to promote or support visitation with fathers.

Visitation between children and their siblings in foster care (15 cases) typically took place with the following frequency:
- Weekly visits in 4 cases.
- Twice a month visits in 2 cases.
- Monthly visits in 3 cases.
- Less than monthly visits in 3 cases.
- No visits in 1 case.
- Visitation was not applicable in 2 cases in which the children were placed with all siblings.
Stakeholders commenting on this issue expressed the opinion that for most cases, visitation plans with parents and siblings are in place and are appropriate. However, stakeholders also noted that caseworkers frequently do not observe children and parents during visitation. Consequently they have no knowledge of the quality of that relationship.

**Determination and Discussion:** Item 13 was assigned an overall rating of Area Needing Improvement because in 29 percent of the applicable cases, reviewers determined that NHHSS had not made concerted efforts to facilitate visitation. In one county, reviewers noted that if parents miss a visit, no efforts are made to engage them to promote more consistent visitation. In another county, reviewers expressed concern regarding the content, quality, and duration of visits. The Statewide Assessment notes that according to policy, foster care providers are to provide written documentation regarding a foster child’s contact with parents and other family members. Although foster parents are not responsible for visitation, if they do supervise visits or provide transportation, they are required to complete a report.

**Item 14. Preserving connections**

___ Strength ___X__ Area Needing Improvement

**Review Findings:** Item 14 was applicable for assessment in 34 of the 35 foster care cases. In assessing item 14, reviewers were to determine whether NHHSS had made, or was making, diligent efforts to preserve the child's connections to family, neighborhood, community, heritage, family, faith, and friends while the child was in foster care. The assessment resulted in the following findings:
- Item 14 was rated as a Strength in 24 (71%) of the 34 applicable cases.
- Item 14 was rated as an Area Needing Improvement in 10 (29%) of the 34 applicable cases.

Case reviewers determined that in 19 of the 34 cases, children's primary connections had been "significantly" preserved while they were in foster care; in 13 of the 34 cases, children’s primary connections had been "partially" preserved; and in 3 cases, children’s primary connections had been "not at all" preserved. For two cases involving Native American children, reviewers determined that in one case, the Tribe had been appropriately notified about NHHSS contact at the onset of the case. In the other case, however, the Tribe was not notified.

Cases were rated as a Strength for this item when reviewers determined that critical primary connections were at least partially preserved. Cases were rated as an Area Needing Improvement for this item when reviewers determined that NHHSS had not made diligent efforts to preserve children’s connections to their heritage (3 cases), mothers and/or siblings (3 cases), and their extended
family members (2 cases). Two cases were rated as an Area Needing Improvement because the children experienced so many placement changes in foster care that they were unable to establish any connections to community, friends, schools, or even care providers. The lack of connection to heritage involved cases in which children were placed in homes in which the foster parents were from a different heritage than the children and they did not make efforts to keep the children connected to their cultural beliefs, customs, and traditions.

Several stakeholders addressed the issue of NHHSS compliance with the Indian Child Welfare Act (ICWA), with some stakeholders expressing the opinion that compliance is high, while others noting that there is room for improvement. Stakeholders at one site stated that the court did not pay attention to ICWA requirements and placed children in foster care and adoptive homes without notifying the Tribe. A key issue identified is that it is unclear who in NHHSS or the judicial system is responsible for tribal notification.

**Determination and Discussion:** Item 14 was assigned an overall rating of Area Needing Improvement because in 31 percent of the cases, reviewers determined that children's connections to family and their heritage had not been preserved while the child was in foster care. With regard to ICWA compliance, the Statewide Assessment notes that Nebraska has no written procedures for caseworkers to use in determining a child’s membership or eligibility for membership in a Tribe. However, caseworkers receive instruction on eligibility determination practices during pre-service training and the State MIS (N-FOCUS) includes contact information for all Tribes in the United States.

**Item 15. Relative placement**

_____ Strength _____ Area Needing Improvement

**Review Findings:** Item 15 was applicable for assessment in 27 of the 35 foster care cases. Eight cases were determined to be not applicable for assessment because the children needed specialized care and/or the child’s placement was court-ordered. In assessing this item, reviewers were to determine whether NHHSS had made diligent efforts to locate and assess relatives (both maternal and paternal relatives) as potential placement resources for children in foster care. The results of this assessment were the following:

- Item 15 was rated as a Strength in 18 (67%) of the 27 applicable cases.
- Item 15 was rated as an Area Needing Improvement in 9 (33%) of the 27 applicable cases.

This item was rated as a Strength when reviewers determined that (1) children were placed with relatives (3 cases), (2) children were not placed with relatives but NHHSS had made diligent efforts to seek relatives and assess them as a placement resource (8 cases), or
(3) placement in a relative home was not appropriate for the child’s needs (7 cases). Of the three children placed with relatives, one was placed with a maternal grandparent, one with a maternal aunt/uncle, and one with a paternal grandparent.

Cases were rated as an Area Needing Improvement when reviewers determined that NHHSS had made no efforts to explore the possibility of relative placements (6 cases), or when NHHSS had conducted only a limited exploration of potential relative placements, such as seeking and assessing maternal but not paternal, relatives (3 cases).

Although most stakeholders commented that there is support for relative placement in NHHSS and it is being used, some stakeholders expressed the opinion that NHHSS does not search for non-custodial fathers and their relatives.

**Determination and Discussion:** This item was assigned an overall rating of Area Needing Improvement because reviewers determined that in 33 percent of the cases, NHHSS had not made diligent efforts to locate and assess relatives as potential placement resources.

**Item 16. Relationship of child in care with parents**

___ Strength __X__ Area Needing Improvement

**Review Findings:** An assessment of item 16 was applicable for 31 of the 35 foster care cases. A case was considered not applicable for assessment if parental rights had been terminated and parents were no longer involved with the child or if a relationship with the parents was considered to be not in the child’s best interests. In assessing this item, reviewers were to determine whether NHHSS had made diligent efforts to support or maintain the bond between the child and both of his/her parents through visitation and provision of services that promote bonding. The results of this assessment were the following:

- Item 16 was rated as a Strength in 17 (55%) of the 31 applicable cases.
- Item 16 was rated as an Area Needing Improvement in 14 (45%) of the 31 applicable cases.

Reviewers assigned a rating of Strength for this item when there was evidence of the following: (1) regular visitation and positive interactions between parent and child, or (2) no visitation or no evidence of a bond between parent and child, but evidence of efforts on the part of NHHSS to promote visitation and support bonding. Reviewers identified several examples of NHHSS attempts to promote bonding and visitation, including providing telephone calling cards, providing transportation for visitation, and promoting visitation even after TPR.
Reviewers assigned a rating of Area Needing Improvement to this item when they determined one or more of the following:

- NHHSS had not made diligent efforts to support the child’s relationship with the father (10 cases). For example, no efforts were made to locate the father, include him in visitation, or to identify the father.
- NHHSS had not made diligent efforts to support the child’s relationship with the mother (9 cases). For example, little effort was made to promote frequent visitation, to provide services to enhance the mother-child bond when it was not strong, and, in two cases, to locate the mother.

**Determination and Discussion:** Item 16 was assigned an overall rating of Area Needing Improvement because reviewers determined that in 45 percent of cases, NHHSS had not made efforts to support the parent-child relationships of children in foster care. However, case review findings varied, with clear indication of NHHSS support in some cases and lack of effort in others. Lack of effort was particularly problematic regarding promoting visitation and bonding between children and their fathers.

### III. CHILD AND FAMILY WELL-BEING

#### Child Well-Being Outcome 1

<table>
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<tr>
<th>Outcome WB1: <strong>Families have enhanced capacity to provide for their children’s needs.</strong></th>
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<td>Number of cases reviewed by the team according to degree of outcome achievement:</td>
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<tr>
<td>Substantially Achieved:</td>
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<tr>
<td>Not Achieved or Addressed:</td>
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<td>Not Applicable:</td>
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**STATUS OF CHILD AND FAMILY WELL-BEING OUTCOME 1**

Nebraska did not achieve substantial conformity with Well-Being Outcome 1. This determination was based on the finding that the outcome was rated as substantially achieved for 32 percent of the cases reviewed, which is less than the 90 percent required for a determination of substantial conformity.
The CFSR process found that NHHSS is not consistent in its efforts to identify and provide for the service needs of families or to involve them in case planning. In many cases, there was evidence of infrequent face-to-face contact between NHHSS workers and the children and parents in their cases.

Findings pertaining to the specific items assessed under Well-Being Outcome 1 are presented and discussed below.

**Item 17. Needs and services of child, parents, foster parents**

___ Strength ___X_ Area Needing Improvement

**Review Findings:** An assessment of item 17 was applicable for all 50 cases. In assessing the item, reviewers were to determine whether the NHHSS had (1) adequately assessed the needs of children, parents, and foster parents; and (2) provided the services necessary to meet those needs. The results were the following:

- Item 17 was rated as a Strength in 28 (56%) of the 50 applicable cases (20 of which were foster care cases).
- Item 17 was rated as an Area Needing Improvement in 22 (44%) of the 50 applicable cases (15 of which were foster care cases).

The analysis of data from the case review process revealed the following determinations:

- Children's needs were not assessed in 8 of the 50 applicable cases, and services were not provided in 5 of those cases. In 2 cases, reviewers determined that the services provided did not meet the children's needs.
- Mothers' needs were not assessed and services were not provided in 7 of the 48 cases in which an assessment of mothers' needs was determined to be applicable. Services were not provided to mothers in 6 of the applicable cases.
- Fathers' needs were not assessed and services were not provided in 18 of the 43 cases in which an assessment of fathers' needs was determined to be applicable. Services were not provided to fathers in 12 of the applicable cases.
- Foster parents' needs were not assessed in 7 of the applicable 20 foster care cases, and services were not provided in 2 of these cases.

In general, cases were rated as a Strength for this item when reviewers determined that there were no unmet assessment or service needs for children, parents, or foster parents.

A rating of Area Needing Improvement was assigned to cases in which reviewers made the following determinations:
• Children, parents, or kinship caregivers did not have their needs assessed or had identified services needs that were not met during the period under review (8 cases).
• Fathers were not included in the assessment of family needs (4 cases).
• Foster parents did not receive sufficient supportive services from NHHSS (3 cases).
• Assessments and/or services focused only on one child in the home (5 cases).
• Assessments were not completed on all family members (2 cases).

Some stakeholders commenting on this issue noted that services to parents are not readily available. Other stakeholders indicated that caseworkers do not always facilitate the parents’ connection to services, but expect them to access services on their own. However, several stakeholders suggested that too much attention is paid to meeting the parents’ needs and not enough attention is given to the children. Finally, some stakeholders reported that independent living services are not routinely offered by NHHSS because caseworkers believe that it is the foster parents’ responsibility to provide these services.

_Determination and Discussion:_ Item 17 was assigned an overall rating of Area Needing Improvement because in 44 percent of the cases, reviewers determined that NHHSS was not adequately addressing the needs and services of children, parents, and/or foster parents. According to the Statewide Assessment, the major barrier to providing services to families is that in rural areas there is a shortage of providers, which results in families having to travel long distances to access services.

**Item 18. Child and family involvement in case planning**

_____ Strength _____X__ Area Needing Improvement

_Review Findings:_ An assessment of item 18 was applicable for all 50 cases. In assessing this item, reviewers were to determine whether parents (including pre-adoptive parents or permanent caregivers) and children (if age-appropriate) had been involved in the case planning process, and if not, whether their involvement was contrary to the child's best interest. A determination of involvement in case planning required that a parent (or child) had actively participated in identifying the services and goals included in the case plan. This assessment produced the following findings:
• Item 18 was rated as a Strength in 13 (26%) of the 50 applicable cases (7 of which were foster care cases).
• Item 18 was rated as an Area Needing Improvement in 37 (74%) of the 50 applicable cases (28 of which were foster care cases).

Specific findings of the review process were the following:
• Mothers were appropriately involved in the case planning process in 18 cases. In 26 cases, mothers should have been involved, but were not. There were 2 cases in which mothers were not available to participate and 4 cases in which the mothers’ participation was considered to be contrary to the child's best interest.

• Fathers were appropriately involved in the case planning process in 9 cases. In 31 cases, fathers should have been involved, but were not. There were 6 cases in which fathers were not available to participate and 3 cases in which fathers’ participation was considered to be contrary to the child's best interest.

• Children were appropriately involved in the case planning process in 22 cases. There were 18 cases in which reviewers determined that the children were old enough to participate in the case planning process, but were not involved. There were 10 cases in which reviewers determined that the children were not old enough to participate in the case planning process.

Cases were assigned a rating of Strength for this item when reviewers determined that all relevant parties had actively participated in the case planning process. Cases were assigned a rating of Area Needing Improvement when reviewers determined that one or more of the key parties had not been involved in the case planning process.

Most stakeholders commenting on this issue expressed the opinion that NHHSS is not effective in involving parents in the case planning process. Stakeholders also noted that case plans often are missing or are incomplete and some contain factual errors.

**Determination and Discussion:** Item 18 was assigned an overall rating of Area Needing Improvement because in 74 percent of the applicable cases, reviewers determined that NHHSS had not appropriately involved parents or children in the case planning process. According to the Statewide Assessment, although NHHSS policy requires that parents be involved in the case planning process, there is a need for strengthened efforts to occur in order to fully engage parents in case planning activities. The Statewide Assessment also notes that NHHSS is beginning to use family group conferencing on a limited basis to promote greater parent involvement.

**Item 19. Worker visits with child**

_____ Strength  ____X__ Area Needing Improvement

**Review Findings:** All 50 cases were applicable for an assessment of item 19. In conducting this assessment, reviewers were to determine whether the frequency of visits between caseworkers and children was sufficient to ensure adequate monitoring of the child's safety and well-being, and whether visits focused on issues pertinent to case planning, service delivery, and goal attainment. The results of the assessment were the following:
• Item 19 was rated as a Strength in 30 (60%) of the 50 applicable cases (24 of which were foster care cases).
• Item 19 was rated as an Area Needing Improvement in 20 (40%) of the 50 applicable cases (11 of which were foster care cases).

Reviewers noted the following with respect to typical patterns of caseworker visits with children:
• In 2 cases, visits typically occurred once a week.
• In 2 cases, visits typically occurred twice a month.
• In 19 cases, visits typically occurred on a monthly basis.
• In 27 cases, visits typically occurred on a less than monthly basis.

This item was rated as a Strength when reviewers determined that the frequency and quality of visits between workers and children were sufficient to ensure adequate monitoring of the child's safety and well-being and promote attainment of case goals. Cases were rated as an Area Needing Improvement when reviewers determined that the frequency of visits was not sufficient to meet the child's needs and/or monitor the child’s safety.

Stakeholders commenting on this issue expressed the opinion that in many instances, there is insufficient contact between caseworkers and children and that often caseworkers do not establish a relationship or bond with the children in their cases. Stakeholders also voiced concerns about the fact that NHHSS has not established policies that delineate both the amount of contact that caseworkers should be maintaining with the children in their caseloads and the focus and concerns that must be addressed each time contact is established.

**Determination and Discussion:** Item 19 was assigned an overall rating of Area Needing Improvement because in 40 percent of the cases, reviewers determined that the frequency of caseworker visits with children was not sufficient to ensure adequate monitoring of the child's safety and well-being or to promote attainment of the case goals. According to the Statewide Assessment, an area of concern identified during the self-assessment process was the need for caseworkers to visit children in out-of-home placements more frequently. The Statewide Assessment noted that NHHSS is currently in the process of developing policy and procedures governing caseworker contacts with children and families.

**Item 20. Worker visits with parents**

_____ Strength  ____X__ Area Needing Improvement
**Review Findings:** An assessment of item 20 was applicable for 48 of the 50 applicable cases. Cases that were considered not applicable for an assessment of this item were those in which (1) parental rights had been terminated and the parents were no longer involved in planning for the child; or (2) the parents could not be located despite diligent efforts by NHHSS. Reviewers were to assess whether the caseworker had sufficient face-to-face contact with mothers and fathers to promote attainment of their children’s permanency goal and to ensure their children's safety and well-being. The results of this assessment were the following:

- Item 20 was rated as a Strength in 21 (44%) of the 48 applicable cases (15 of which were foster care cases).
- Item 20 was rated as an Area Needing Improvement in 27 (56%) of the 48 applicable cases (18 of which were foster care cases).

Specific findings regarding visits for the 44 cases for which contact with mothers was applicable were the following:

- Mothers were visited once a week in 1 case.
- Mothers were visited twice a month in 3 cases.
- Mothers were visited once a month in 10 cases.
- Mothers were visited less frequently than once a month in 29 cases.
- Mothers received no visits in 1 case.

Specific findings regarding visits for the 43 cases for which contact with fathers was applicable were the following:

- Fathers were visited once a week in 1 case.
- Fathers were visited twice a month in 1 case.
- Fathers were visited once a month in 7 cases.
- Fathers were visited less frequently than once a month in 24 cases.
- Fathers received no visits in 10 cases.

Cases were rated as a Strength when reviewers determined that visits were sufficiently frequent to address the parents' needs for visits and focused on issues pertaining to case planning, service delivery, and goal attainment. Cases were rated as an Area Needing Improvement when reviewers determined one or more of the following:

- Visits were not sufficiently frequent to meet the needs of parents and children (24 cases).
- The father was not located or included in worker visits (11 cases).
- Visits did not focus on substantive issues pertaining to the case (3 cases).

Stakeholders commenting on this issue were in agreement that caseworkers do not have sufficient face-to-face contact with parents and tend to rely on telephone contacts. Although some stakeholders attributed this problem to high caseloads, other stakeholders
suggested it was due to the absence of NHHSS policies delineating the minimum amount of contact that caseworkers are to establish with the parents in their caseloads and the issues that must be addressed at each contact.

*Determination and Discussion:* This item was assigned an overall rating of Area Needing Improvement because in 56 percent of the cases, reviewers determined that visits with parents were not sufficiently frequent or of sufficient quality to promote the safety and well-being of the child or enhance attainment of the child’s permanency goals. As noted for item 19, according to the Statewide Assessment, NHHSS is in the process of developing policy and written procedures for worker contacts with families and children.
Well-Being Outcome 2

Outcome WB2: Children receive appropriate services to meet their educational needs.

Number of cases reviewed by the team according to degree of outcome achievement:

<table>
<thead>
<tr>
<th></th>
<th>Dawson</th>
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<th>Madison</th>
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STATUS OF WELL-BEING OUTCOME 2

Nebraska did not achieve substantial conformity with Well-Being Outcome 2 based on the finding that 86.1 percent of the cases reviewed were determined to have substantially achieved this outcome. This is less than the 90 percent required for substantial conformity.

The CFSR case review finding was that NHHSS was generally effective in meeting the educational needs of the majority of the children in the cases reviewed, but that some inconsistencies were identified with regard to this issue.

The findings for the single item subsumed under this outcome are presented below.

Item 21. Educational needs of the child

_____ Strength  _____X__ Area Needing Improvement

Review Findings: An assessment of item 21 was applicable for 43 of the 50 cases reviewed. Cases that were not applicable for assessment were foster care cases in which the children were too young to be enrolled in school or preschool, or in-home services cases in which children did not have needs pertaining to education-related issues. In assessing this item, reviewers were to determine whether children's educational needs were appropriately assessed and whether services were provided to meet those needs. The results of this assessment were the following:
Item 21 was rated as a Strength in 37 (86%) of the 43 applicable cases (30 of which were foster care cases).
- Item 21 was rated as an Area Needing Improvement in 6 (14%) of the 43 applicable cases (4 of which were foster care cases).

Reviewers reported the following findings with respect to this item:
- Educational needs were assessed in 36 cases, were not assessed in 5 cases, and were not applicable for assessment in 9 cases.
- Services were provided to meet educational needs in 29 cases, services were not provided in 5 cases, and service provision was not applicable in 16 cases.
- 7 of the 35 foster care cases that should have had school records in the case file did not.
- 4 of the 35 foster parents or relative caretakers that should have received school records at the time of placement did not.
- Children in 13 cases experienced multiple school changes as a result of placement changes while in foster care.

Foster care cases were rated as a Strength for this item when reviewers determined that there was evidence that NHHSS had assessed the children’s educational needs, provided services to meet those needs (if necessary), included school records in the case file, and provided school information to foster parents at the time of placement. In-home services cases were rated as a Strength for this item when reviewers determined that NHHSS caseworkers had assessed potential education-related needs and assisted families in accessing services to meet those needs when relevant.

Cases were assigned a rating of Area Needing Improvement for this item when reviewers determined that an appropriate assessment of a child's education-related needs had not been conducted, and/or educational services were not provided for identified needs.

Stakeholders commenting on this issue reported the following problems:
- When children are placed in foster care, it is difficult to re-instate them in their original school.
- There is a lack of advocacy on the part of NHHSS with the school system for children in foster care.
- Individual Education Plans are not being completed for children with behavioral problems.
- Interagency disagreements regarding funding have led to problems accessing educational services.
- Foster parents have difficulty advocating for, or accessing, education services without parental consent.
- Educational records are not consistently documented in the case records.

**Determination and Discussion:** Item 21 was assigned an overall rating of Area Needing Improvement because although in 86 percent of the cases, reviewers determined that the educational needs of children were effectively and appropriately addressed, this was less than the 90 percent required for substantial conformity. However, some of the concerns addressed by stakeholders raise questions regarding the overall effectiveness of NHHSS in addressing educational issues for children in foster care. According to the Statewide...
Assessment, an area of concern for the State is the inadequate support by the educational system for children in State custody, especially youth with special needs.

**Child Well-Being Outcome 3**

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**STATUS OF WELL-BEING OUTCOME 3**

Nebraska did not achieve substantial conformity with Well-Being Outcome 3. This determination was based on the finding that the outcome was rated as substantially achieved in 55.3 percent of the applicable cases, which is less than the 90 percent required for a determination of substantial conformity.

The CFSR revealed inconsistencies with regard to NHHSS’ efforts to meet the physical and mental health needs of children. Although in some cases, extensive efforts were made to meet children’s physical and mental health needs, in other cases, there was a notable lack of effort with regard to this issue. Stakeholders and the Statewide Assessment attributed this problem to a lack of available medical services throughout most areas of the State.

Findings pertaining to the specific items assessed under Well-Being Outcome 3 are presented and discussed below.

**Item 22. Physical health of the child**

___ Strength ___X__ Area Needing Improvement
**Review Findings:** An assessment of item 22 was applicable for 41 of the 50 cases reviewed. Cases that were not applicable for this assessment were in-home services cases for which no physical health issues were identified. All cases involving children in foster care were applicable for an assessment of item 22. In assessing this item, reviewers were to determine whether (1) children's physical health needs had been appropriately assessed, and (2) the services designed to meet those needs had been, or were being, provided. The findings of this assessment were the following:

- Item 22 was rated as a Strength in 30 (73%) of the 41 applicable cases (26 of which were foster care cases).
- Item 22 was rated an Area Needing Improvement in 11 (27%) of the 41 applicable cases (9 of which were foster care cases).

In general, cases were rated as a Strength when children's health needs were being routinely assessed and services provided as needed. Cases were rated as an Area Needing Improvement when reviewers determined the following:

- The child did not receive a comprehensive health assessment at entry into foster care and there was a critical need for that assessment (e.g., there was suspected Fetal Alcohol Syndrome) (1 case).
- The child did not receive needed physical health and/or dental care (9 cases).
- The child’s medical records were not included in the case file (1 case).

Many stakeholders commenting on this issue expressed the opinion that children’s health screenings are not thorough or comprehensive. A few stakeholders suggested that preventive health and dental services are not routinely provided and that children’s health and dental needs are addressed only if there is a problem. In one site, stakeholders reported that the county does not have sufficient specialized medical services, dentists who accept Medicaid, or substance abuse treatment services.

**Determination and Discussion:** Item 22 was assigned an overall rating of Area Needing Improvement based on the finding that in 27 percent of the applicable cases, reviewers determined that NHHSS did not adequately address children’s physical health needs. This finding is contrary to NHHSS policy according to the Statewide Assessment. NHHSS policy requires that all children in foster care be provided with routine preventive medical and dental services on an annual basis. The Statewide Assessment also notes that the foster care providers are responsible for arranging for routine and emergency medical care for the child and for advising caseworkers regarding children’s medical needs.

**Item 23. Mental health of the child**

___ Strength __X__ Area Needing Improvement
**Review Findings:** An assessment of item 23 was applicable for 44 of the 50 cases reviewed. Cases that were not applicable were foster care cases in which the child was too young for an assessment of mental health needs, and in-home services cases in which the children's mental health needs were not an issue. In assessing this item, reviewers were to determine whether (1) mental health needs had been appropriately assessed and, (2) services to address those needs had been offered or provided. The findings of this assessment were the following:

- Item 23 was rated as a Strength in 29 (66%) of the 44 applicable cases (25 of which were foster care cases).
- Item 23 was rated as an Area Needing Improvement in 15 (34%) of the 44 applicable cases (9 of which were foster care cases).

For the 44 applicable cases, reviewers noted that children's mental health needs were "significantly assessed" in 34 cases, “partially assessed” in 7 cases, and “not at all assessed” in 3 cases. Reviewers also reported that mental health services (when relevant) were “significantly met” for 29 cases, “partially met” for 11 cases, and “not at all” met for 2 cases.

Cases were assigned a rating of Strength if mental health needs were "significantly" assessed and the children's mental health services were "significantly" met. The item was rated as an Area Needing Improvement when reviewers determined that assessments and services were provided only partially or not at all. Some examples of cases rated as an Area Needing Improvement are the following:

- Services needs were identified but not met (6 cases).
- Assessments of children’s needs were not completed, or were inadequate to identify needs (3 cases).
- NHHSS did not follow up to ensure that services were adequate or medication was taken (2 cases).
- The mental health needs of all of the children in the home (in-home services cases) were not assessed or addressed (2 cases).
- Children were in placements that were not appropriate given their mental health services needs (2 cases).

**Determination and Discussion:** Item 23 was assigned an overall rating of Area Needing Improvement because in 34 percent of the applicable cases, reviewers determined that NHHSS did not adequately address children's mental health needs. The Statewide Assessment notes that there is a lack of community-based resources available to low and moderate-income parents and mental health evaluations are not always completed in a timely manner.
Section 2: Systemic Factors

IV. Statewide Information System

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Nebraska is in substantial conformity with the factor of Statewide Information System. Findings pertaining to the item assessed for this factor are provided below.

**Item 24. State is operating a Statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care.**

Item 24 was assigned a rating of Strength because the State is operating a statewide information system that meets the requirement for substantial conformity.

As noted in the Statewide Assessment, the Nebraska Family Online Client User System (N-FOCUS) (the Statewide information system) is capable of collecting and reporting data for the Federal data systems—AFCARS and NCANDS—as well as other information and electronic communications that are useful for supervisory and administrative staff responsible for decision-making and quality assurance. Data collection and tracking capacity include information on intake, screening, investigation and assessment (including a Safety Evaluation, Safety Plan and Assessment), service/case plan, resource management, court processing, financial management, administration, and reporting. Numerous reports are available through N-FOCUS. Comprehensive pre-service and ongoing periodic training on N-FOCUS is provided to all Protection and Safety Staff in direct service, supervisory, and administrative position.

According to the Statewide Assessment, the Federal HHS Regional Office completed a SACWIS/AFCARS Combined Review in June 2000 and made the following recommendations for improvements: (1) increase the training, knowledge, skills and abilities of staff
who input and use the data; (2) expand reporting capabilities; and (3) improve support for the Case Review and Evaluation Process. In addition, the State has identified a number of other needs related to N-FOCUS:

- Develop strategies to ensure more complete and timely data entry.
- Further develop the system’s functional abilities.
- Upgrade computer hardware across the State.
- Establish faster Internet connectivity for some computers, especially in rural areas.
- Fully integrate Office of Juvenile Services data requirements with N-FOCUS operations.
- Establish additional interfaces with other systems, including Probation, Education, and child death data systems (vital Statistics and child Death Review Team tracking).
- Continue to eliminate statutory and other barriers to sharing data with key stakeholders.

Stakeholders commenting on this issue reported that agency staff uses the Statewide information system on a regular basis. They noted that the State’s SACWIS can identify information such as the location, goals, status, and demographic characteristics of children. Workers can access information on other services being provided to families (e.g. TANF, Medicaid), as well as the CPS history of families. Stakeholders also expressed the opinion that N-FOCUS is a useful management tool, and that the system is continuously improving. The problems with the system identified by Stakeholders were: (1) incomplete or inaccurate information, (2) time-consuming data entry, (3) slow access, (4) insufficient technical support, and (5) the fact that the information system does not capture all of the information that pertains to juvenile justice issues for which the agency is given custody. Stakeholders noted that N-Focus does capture the required information for AFCARS.

V. Case Review System

<table>
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<th>Rating of Review Team Regarding Substantial Conformity</th>
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</tr>
<tr>
<td>Rating</td>
</tr>
</tbody>
</table>

Nebraska is not in substantial conformity with the factor of Case Review System. Findings pertaining to the items assessed for this factor are provided below.
Item 25. Provides a process that ensures that each child has a written case plan to be developed jointly with the child’s parent(s) that includes the required provisions.

Item 25 was rated as an Area Needing Improvement. Although the State has a process to ensure that each child has a written case plan, case plans are not present for all children. In addition parents and children are not active participants in the case planning process.

According to the Statewide Assessment, Nebraska Administrative Code (NAC) describes the case plan policy as follows: “Workers will provide the child and family with opportunities for change by helping them to identify positive outcomes and to set goals that address the problems that place the child at risk of maltreatment, re-offend, and which also address the issues that brought the child or family to the attention of the agency. The overall goal in child welfare cases is to reduce or eliminate the risk of maltreatment so that parents can protect their children and meet their developmental needs. The overall goal in juvenile services cases is to reduce or eliminate the risk of re-offending consistent with community safety.”

As noted in the Statewide Assessment, written case plans are to be developed following an assessment of family and child strengths and needs, and workers are to seek active involvement of the family and service providers in identifying those strengths, needs, and case goals. Case plan evaluation and revision is to occur at least every 6 months or as circumstances warrant – such as when there is a placement change or a change in legal status change. The Statewide Assessment also notes, however, that although policy sets forth the expectation for parental involvement in case planning, actual practice does not always meet these expectations. This perception is consistent with the findings of the CFSR case review process, with reviewers determining that parents and/or children were not involved in case planning in 74 percent of the cases.

To improve family involvement, DHHS has piloted Family Group Conferencing (FGC) in 3 of Nebraska’s 93 counties with plans for expansion in the future. In July 2001, contracts were initiated with providers in each of the service areas to provide Family Group Conferencing Services.

A Federal review of the AFCARS and SACWIS system in 2000 revealed that frontline workers were not entering case plans in the N-FOCUS system. As a result of the findings, changes to the Case Plan and Court Report were made to comply with ASFA requirements. A directive also was made that all staff enter their Case Plans on N-FOCUS.
Problems related to the case plan identified in the Statewide Assessment were the following: (1) frontline workers are not entering case plans in N-FOCUS in a timely manner (and sometimes are not entering them at all); (2) case plans are not always complete in that they do not clearly establish actions and timeframes for service provision; (3) safety plans that are being used in lieu of a complete case plan in some situations are inadequate and need to be redesigned; (4) case plans are not being updated on an ongoing basis, and (4) families, foster parents, service providers and advocates instrumental to case plan development are not consistently included in the planning process. The results of a study conducted by the Foster Care Review Board (FCRB) found that during the year 2000, 2,031 of the 3,648 children reviewed by the FCRB (55.7%) had complete written permanency plans. Of the 1,617 children without complete permanency plans, the local FCRBs found that 699 children had no current plan, 129 children had only verbal plans, 24 children had more than one plan, and 765 had incomplete written plans missing one or more essential elements. The case review process conducted by the FCRB also cited the lack of permanency goals in child records. According to the Statewide Assessment, many of these problems can be attributed to the turnover in caseworker positions and their high caseloads.

Other issues identified during the Statewide Assessment process include:
- Providers do not receive copies of the child’s case plan.
- Tribes are not given children’s case plans.
- Courts receive case plans that are often “boiler-plate” and do not share enough case-specific information for the judiciary to make informed decisions.
- Staff and providers would benefit from more training on wraparound services and Family Group Conferencing to support the planning process.

Some stakeholders commenting on this issue expressed the opinion that most children do have case plans, while others reported that at least 20 percent of children do not have case plans. All stakeholders were in agreement that parents and children are not consistently involved in case plan development.

**Item 26. Provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review.**

Item 26 is rated as a Strength because the Nebraska Administrative Code requires that cases be reviewed by the Foster Care Review Board and the courts at least every 6 months.

As noted in the Statewide Assessment, Nebraska Administrative Code (NAC) requires all child welfare cases to be reviewed at least once every 6 months. For juvenile services cases, classification (the assignment of a level of care and services needed) is completed
every 3 months and connects to the overall case plan. The FCRB is the agency designated to conduct IV-E reviews every 6 months for children in out-of-home care. Membership on the FCRB includes at least one person who is not responsible for service delivery for the family, in accordance with NAC. According to the Statewide Assessment, FCRB data indicate that the percentage of IV-E eligible children reviewed on a timely basis is currently in the 96 percent range.

The Statewide Assessment also notes that in addition to FCRB reviews, the courts are required by NAC to review children’s cases every 6 months. Whenever possible, the FCRB coordinates its review date with the court review date so that the FCRB’s formal recommendation report is sent to the Court prior to the court review hearing.

According to the Statewide Assessment, the State’s self-assessment identified the following issues pertaining to the timeliness of case reviews:

- Although in the past some courts were not conducting hearings in a timely manner, as of 1/9/02 all courts were meeting both Federal and State hearing requirements;
- The FCRB has implemented improved case review processes that promote more timely completion of the reviews;
- FCRB and NHHSS have different data and tracking systems, which NHHSS believes should be combined into one shared system but the FCRB believes should be kept separate.
- The absence of complete case plans in child records thwarts efforts to use the case review process for improving permanency outcomes for children.

Stakeholders commenting on this issue were in agreement that judicial reviews are held at least every 6 months and sometimes within 3 months. They reported that the Guardians ad Litem, sometimes the foster parents, the parents, and therapists attend these court hearings. Parents are accompanied by an attorney in abuse cases.

Although court hearings are attended, stakeholders reported that caseworkers, Guardians ad Litems, and foster parents do not always attend FCRB reviews. However, they are given the opportunity to submit reports or call the FCRB to provide input. Consequently they are not always aware of the findings of the reviews although it is reported that these individuals do receive written reports from the FCRB. The FCRB usually meets prior to the court hearings. The Board then submits a report to the court that outlines their case plans for the child. Several stakeholders suggested that FCRB reports are not always seen as helpful to resolve issues or change the direction of the case. A few stakeholder interviews revealed that in some areas of the State, there is tension between the FCRB and the agency, which may be one reason why the FCRB reviews are not always effective in moving cases toward permanency.
Item 27. Provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

Item 27 was assigned a rating of Strength because the NAC requires 12-month permanency hearings.

According to the Statewide Assessment, the State conducts court reviews in compliance with both ASFA and State statute. Within the past year, the State Court Administrator’s Office worked with NHSS and the Court Improvement Project personnel to construct a “Suggested ASFA Language for Court Orders” guide to assist the court process with regard to the following activities: (1) initial orders dealing with child removal, (2) follow-up court review occurring within 60 days after actual child removal from the home, (3) hearings held within 30 days of finding that no reasonable efforts are required (such as when termination of parental (TPR) rights occurs), (4) permanency hearings occurring within 12 months of the child entering foster care (and annually thereafter), and (5) hearings required to occur within 30 days of the date at which the child has been in foster care for 15 of the last 22 months (15/22 hearings).

According to the Statewide Assessment, tracking hearing outcomes is managed largely through N-FOCUS. Workers input/update file information resulting from the hearing as provided in official Court Orders. The updated information prompts a new schedule of worker and supervisor alerts to monitor progress toward permanency goal attainment. Also, reports are generated and disseminated to applicable parties (county attorneys, P&S supervisors) to assist in timely hearings and movement of the child through the system.

Although the Statewide Assessment indicates that permanency planning hearings are being held in a timely manner, several stakeholders commenting on this issue expressed the opinion that the courts are not consistently meeting the 12-month permanency hearing requirements, due primarily to the frequent practice of granting continuances. However, stakeholders in one site reported that children are given a full hearing on permanency that is thorough and covers all issues, including safety.

Item 28. Provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act.

Item 28 was assigned a rating of Area Needing Improvement. Although the State provides a process for termination of parental rights (TPR), agency practice does not always follow this process.
According to the Statewide Assessment, Nebraska passed legislation in 1988 that fully complies with ASFA requirements, including provisions for TPR, and establishes situations when reasonable efforts are not required. The Statewide Assessment notes that Nebraska has seen a surge in TPR trials since the new laws went into effect.

NHHSS also implemented the following measures to ensure that there is a process for TPR proceedings in accordance with the provisions of the Adoption and Safe Families Act.

- An N-FOCUS report was developed that generates information on children that have been in care for 15 of the last 22 months.
- Funding was allocated to hire additional attorneys in Douglas and Lancaster counties.
- Efforts were implemented to handle cases through a One-Judge, One-Case practice.

The Statewide Assessment identified the following barriers to conformance with ASFA TPR requirements:

- County attorneys in some areas of the State are still hesitant to file for termination.
- Some smaller counties do not have the financial resources for long, involved termination hearings and appeals.
- Tribal preferences for long-term kinship care or guardianship over adoption may affect TPR filings in some jurisdictions.
- A lack of concurrent planning for reunification and adoption may extend the TPR timeframe in some areas.
- Child welfare agency staff turnover at the local level has delayed timely TPR in some cases.

Stakeholders commenting on this issue expressed the opinion that there is process in place for TPR, but petitions are not being filed according to ASFA guidelines. Also, exceptions and compelling reasons for not filing are not being consistently documented. Stakeholders in one site commented that judges order TPR in a timely manner, but the county attorney is slow to respond. Several stakeholders commented that delays in TPR could be attributed to the agency’s lack of willingness to consider open adoption. Stakeholders also noted that although the percentage of appeals is small (approximately 10%), the process can be very lengthy (at least 1 year) and contributes to delays in permanency. In general, stakeholder comments are consistent with case review findings that TPR had been filed for 5 of 17 children who were in foster care for 15 of the past 22 months, and compelling reasons were noted in the case files for only 2 children.

**Item 29. Provides a process for foster parents, preadoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child.**

Item 29 was rated as an Area Needing Improvement because foster parents, preadoptive parents, and relative caregivers are not automatically notified of judicial reviews. Foster parents must advise the court that they want to be notified of court hearings before they receive notice.
According to the Statewide Assessment, the FCRB mails out an informational letter containing explanations of the importance of foster parent participation in FCRB case reviews to all foster parents of children in the State’s custody. Foster parents are asked to share case information/concerns on questionnaires mailed to them before each review. The questionnaires request updated information on children’s physical care, educational status, and special needs; services provided to the foster parents; sibling and parental visitation; and other matters of concern to the foster parents. Toll-free and direct telephone numbers are provided for foster parent inquiries concerning case reviews. The Statewide Assessment also notes that caseworkers are to notify case review stakeholders regarding upcoming reviews via telephone or during face-to-face meetings. The worker helps the placement caregiver to access any services necessary to assist them in attending scheduled reviews or hearings, including respite services, child care, and/or transportation.

Despite these efforts, the Statewide Assessment indicates that information about upcoming reviews is not always disseminated to the concerned parties in a timely manner, and placement caregivers’ work schedules do not always permit them to attend reviews.

Stakeholders commenting on this issue expressed differing opinions regarding the effectiveness of NHHSS in notifying foster parents about reviews and hearings. Stakeholders in one site reported that foster parents only receive notice from courts regarding hearings if they request it. However, in another site, stakeholders said that foster parents are routinely notified of all hearings. Some stakeholders noted that foster parents receive notice of court hearings but not of FCRB reviews. In addition, while some stakeholders said that foster parents are given the opportunity to speak at a hearing, other stakeholders noted that this depends on the presiding judge.

VI. Quality Assurance System

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Nebraska is not in substantial conformity with the factor of Quality Assurance System. Findings pertaining to the items assessed for this factor are provided below.
Item 30. The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children.

Item 30 was assigned a rating of Area Needing Improvement. Although standards have been developed and implemented to protect children in foster care, there is no policy that requires supervisory visits of children in foster homes.

According to the Statewide Assessment, standards and procedures for out-of-home placements are provided in the Nebraska Administrative Code and in the Partnership for the Protections of Children (PFPC) Out-of-Home Care Guidebook. Assessments are completed on all persons who are interested in becoming foster or adoptive parents. The assessment includes: home visits; interviews with all applicants, their children, and other persons living in the home; written home studies; a self-study completed by the applicants; reference checks from at least three persons; adult and child abuse central registry checks; criminal records checks; and medical summaries for adult family members. Foster parents also must complete 21 hours of pre-service training prior to being licensed.

The Statewide Assessment notes that the Nebraska Administrative Code also details the licensing process for individuals, agencies, and facilities that provide temporary care and/or shelter or children in out-of-home placements. Included are staffing qualifications, training requirements, and minimum health and safety requirements for the children. Health and safety requirements are mandated for all the child caring agencies. The roles and responsibilities of foster care providers are outlined in code to help ensure that the child’s health and safety needs are met during placement.

Areas of concern identified during the Statewide Assessment include:
- Child welfare agency caseworkers are not visiting children in out-of-home placements with sufficient frequency.
- There often are problems obtaining complete criminal background information.
- There is a need to enhance ongoing foster parent training so that they are better prepared to provide safe and healthy environments.
- There is an increasing number of children with special physical and mental health care needs entering the system and a lack of foster homes willing to take these children.
- Foster Parent Support Plans are not being completed to the extent necessary.
- There are limited resources to monitor quality foster care services beyond a small representative sampling.
- There is a lack of recognition/reward for placement providers to pursue ongoing training/education.
- Requirements for health exams and evaluations are not being completed in a timely manner.
Stakeholders commenting on this issue noted that the State has licensing standards in place.

**Item 31.** The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the CFSP are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented.

Item 31 was assigned a rating of Area Needing Improvement. Although the State has some components of a quality assurance system, there is not a comprehensive, statewide approach to quality assurance.

The Statewide Assessment notes that although Nebraska currently has quality assurance pieces in place, efforts are needed to integrate the disjointed approach into a seamless evaluation system that can be used to measure the quality of care provided and outcomes realized. The FCRB is one essential piece of Nebraska’s quality assurance system. The statutorily defined purpose of the FCRB as an independent review entity is intended to measure the efficiency and effectiveness of services for children and families involved in protection and safety services.

According to the Statewide Assessment, several methods are currently used to obtain information about the quality of services being provided, including:

- **Performance Accountability Reports** – As a part of the contracts with service providers, they are to provide periodic reports on performance measures.
- **Surveys** – Surveys were conducted of community-based direct care providers, supportive community service programs, Protection and Safety Workers, Youth Rehabilitation Treatment Center staff, judges, and adolescent State wards to solicit opinions on the system/service strengths and weaknesses related to independent living.
- **Central Register Findings Reviews** – NHHSS contracted with Action for the Protection of Children to conduct two case reviews for “unfounded” and “inconclusive” findings on reports of maltreatment.
- **Citizen Reviews** – The Foster Care Review Board conducts citizen reviews of child welfare cases using the local boards. Through the review process information is obtained regarding the effectiveness of service delivery in meeting the child and family’s needs and goals.
- **Case Reads** – the Southeast Service Area began conducting case reads to identify quality assurance issues.
- **In-house Work Group – Planning Teams** – The work groups established for the development of the Nebraska Family Portrait identified the need for a more formalized quality assurance system.
Interdisciplinary Treatment and Investigative Teams - The legislature enacted a bill mandating the development of local teams of community professionals to deal with investigation and treatment of child abuse and neglect. Input from the local teams that are functioning is used to identify quality service delivery strengths and weaknesses.

Stakeholders commenting on this issue reported that there is no single Statewide quality assurance system currently in operation. A quality assurance case review was implemented in June 2002 and a contractor in each service area will be doing case reviews in the future. Stakeholders in two sites noted that case records are read on a regular basis and administrators meet monthly to discuss safety issues and review the appropriateness of out-of-home placements.

VII. Staff and Provider Training

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Nebraska is in substantial conformity with the factor of Staff and Provider Training. Findings pertaining to the items assessed for this factor are provided below.

**Item 32. The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services.**

Item 32 was rated as a Strength because new workers participate in training for 15 to 17 weeks and must attain acceptable levels of performance.

According to the Statewide Assessment, the majority of staff training is contracted to the Center on Children, Families, and the Law (CCFL) within the University of Nebraska-Lincoln system. New workers participate in training for 15 to 17 weeks and receive both classroom and field learning experiences. The workers must attain acceptable levels of performance in 17 critical dimensions before
training is completed. Training is conducted in four sites in the State. In addition to classroom pre-service training, a model of individual instruction is used for the more remote rural areas where travel to a classroom site is not practical.

The Statewide Assessment notes that NHHSS currently is working to address training needs identified by staff. Some of the activities include:

- Establishing Field Training Units comprised of P&S Trainees until competency is demonstrated.
- Establishing a sequential family-centered curriculum to follow the case process.
- Developing local office self-instruction field guides.
- Delivering pre-service classroom training in alternate sites.
- Researching the use of IV-E matching funds for tuition stipends.
- Developing pre-tests for workers to demonstrate competency in lieu of classroom pre-service training.
- Establishing minimum mandatory in-service training hours (24 hours now required) and a tracking system to monitor completion.
- Developing an annual training calendar.
- Implementing use of the CWLA Diversity Evaluation Tool and online access to the Valuing Diversity and Service Delivery components related to staff cultural competency.
- Implementing the 360 Degree Assessment process in all service areas; the 360 Degree Assessment seeks input from supervisors, co-workers, and clients to evaluate and make recommendations for individual worker and organization-wide improvements and assesses the following areas of performance: Leadership, Empowerment, Performance Management, Integrity/Initiative, Communication, Teamwork, Quality, Innovation/Creativity, Adaptability/Diversity, Managing Conflict, Problem-Solving, Customer Service and Technical Ability related to P&S work.
- Providing consistent and ongoing supervisor training.
- Anticipating use of the Muskie Institute’s supervisory training program.
- Developing relationships with post-secondary institutions to prepare and recruit graduates for protection and safety work.
- Providing training to supervisors in contract management issues.
- Providing specific juvenile services training to field staff.

According to information from the Statewide Assessment, satisfaction with staff training varies across the State. A concern expressed is that the current pre-service training is not meeting the “real world” demands of child welfare work.
Stakeholders commenting on this issue reported that training is provided prior to workers receiving a caseload and that the State hires extra workers so that vacancies are filled with trained staff to avoid uncovered caseloads. Stakeholders also noted that NHHSS developed an individualized training curriculum to meet the needs of rural areas when they have new staff. Some stakeholders, however, expressed concern that the training program focuses on theory and there is no hands-on skill building. They suggested that training is not preparing workers for the realities of their jobs or teaching them how to do their jobs. A few stakeholders noted that there is no regular supervisory training.

Item 33. The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP.

Item 33 was rated as an Area Needing Improvement because although staff is required to complete 24 hours of training each year, there is a lack of specific training targeting professional growth and skills development.

According to the Statewide Assessment, in-service training is regionalized, with each service area encouraged to schedule at least 12 hours of monthly in-service training for staff. In addition, a Statewide training plan based on findings and recommendations of the Nebraska Family Portrait is being established.

The Statewide Assessment identified the following concerns regarding in-service training:
- Supervisory training is lacking.
- Staff members lack time necessary to attend training.
- Lack of specific training to further professional growth and development.
- Certain types of training need to be enhanced or developed – specifically, legal, IV-E and IV-B, strength-based approaches to case planning, etc.
- Lack of financial resources to support additional training.
- There continues to be a lack of communication between NHHSS and Tribes, and caseworkers would benefit from additional training in tribal codes and cultural standards.

As noted under item 32 above, according to the Statewide Assessment, the agency is currently in the process of implementing training enhancements.
Stakeholders reported that ongoing training opportunities are available monthly and they believe that in-service training is improving and topics are appropriate. However, stakeholders expressed concern that the training does not provide opportunities to learn new skills.

**Item 34. The State provides training for current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.**

Item 34 is rated as a Strength because foster parents are required to obtain at least 21 hours of pre-service training. They are also required to obtain 12 hours of in-service training per year. The PRIDE curriculum is provided for pre-service training. Various training topics and means of obtaining in-service training are available to the foster and adoptive parents. Facility staff is also required to have a minimum number of training hours each year.

According to the Statewide Assessment, foster and pre-adoptive families are required by the Nebraska Administrative Code to participate in 21 hours of preparatory training prior to licensing as a foster or adoptive home and 12 hours of in-service training annually, within the effective dates of the license. Training is available through various forums approved by the State licensing specialist and may include NHHSS-sponsored training, workshops, training sponsored by professional organizations or educational institutions, NHHSS-approved self-study materials, college courses, and videotape materials. The Statewide Assessment also notes that Nebraska is currently in the process of implementing PRIDE training.

As indicated in the Statewide Assessment, NHHSS sponsors an annual Foster and Adoptive Parent Summer Conference, which provides caregivers with 12 hours of in-service training. In 2001, three such conferences were held in different regions of the State, with total attendance exceeding 800 individuals. NHHSS reimburses foster and adoptive parents up to $50 annually for registration fees and other expenses to attend approved trainings. Additionally, licensed foster parents who attend the annual conference are eligible to receive reimbursement for respite/child care, mileage, lodging, and receive their meals and educational materials at no cost.

The Statewide Assessment notes that licensing approval for group homes, child caring and child placing agencies requires that each staff member, including volunteers who provide direct care of children, obtain 21 - 24 clock hours of NHHSS-approved pre-service training before assuming his/her duties and at least 12 –15 hours of approved in-service training annually within the effective dates of the license depending on the level of care given by the facility. Each licensed multi-placement facility is required to have a written plan in place for pre-service training activities at a minimum.
Stakeholders commenting on this issue reported that NHHSS currently provides training for foster parents using the PRIDE model and that foster parents receive ongoing training at least once a year. Some stakeholders noted that adoptive parents receive training developed by Spaulding (an adoption agency and resource center). However, stakeholders indicated that there are not sufficient ongoing training opportunities and that the State has told foster parents that due to budget cuts, in-service training availability will be reduced.

**VIII. Service Array**

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Nebraska is not in substantial conformity with the factor of Service Array. Findings pertaining to the items assessed for this factor are provided below.

**Item 35. The State has in place an array of services that assesses the strengths and needs of children and families and determines other service needs, addresses the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency.**

Item 35 is rated as an Area Needing Improvement because there are many gaps in services in the State.

The Statewide Assessment acknowledges that there are many gaps in services in the State and that children and families often are provided services that are available, rather than services that most appropriately meet their unique needs. In July 2000, the State’s Array Work Team Final Report identified several services that need to be expanded. These include (1) parent education, support, and family support; (2) substance abuse services; and (3) foster care. Service gaps also were identified for special needs populations, particularly for children with developmental disabilities and mental health needs, sexual offenders, and substance abusers. Additional gaps were identified for oral health care providers willing to accept Medicaid; culturally and linguistically competent providers; specialized foster care providers; resources for youth who are aging out of the system and have high-risk behaviors; and residential
treatment for juvenile offenders. Although the Statewide Assessment notes that some improvements have been made since these service needs were identified, significant service gaps remain.

According to the Statewide Assessment, Nebraska has made strides in the past few years to improve mental health services for children and families. NHHSS funds outpatient treatment and middle-intensity services including day treatment, respite care, and wraparound service approaches. In addition, the Array Work Team found that there was adequate capacity for several services, including treatment-level residential treatment, non-treatment type group care, and emergency shelter services. However, the Array Work Team also noted that although these services are available, they are not always based in the community. The State also has contracts with 22 community-based domestic violence/sexual assault crisis centers. Flexible funding is available in each Service Area for the purpose of helping families remain united and reducing out-of-home placements. Independent Living services are provided through contracts using the Preparation for Adult Living Services (PALS) program.

The Statewide Assessment notes that workers and providers are using several models of service and practice approaches that reflect the ‘wraparound’ approach, including Family Group Conferencing, Intensive Family Preservation, Mediation, Integrated Care Coordination Units (a team process to identify children’s mental health needs), Families First and Foremost (for juveniles with offender issues at risk of removal from their homes), and Multi-Systemic Therapy (a community-based treatment modality that considers the youth’s entire social environment).

Stakeholders commenting on the issue of service array suggested that there is an adequate array of services in some areas, and noted that services such as family support services, electronic monitoring services, counseling, transportation services, mediation, and Family Group Conferencing are readily available. However, services gaps were noted with regard to substance abuse and mental health treatment, community-based services, dental care, juvenile justice services, independent living services, services for juvenile sex offenders, services for developmentally disabled children, and sexual abuse services. In addition, stakeholders reported that there are insufficient placement options.

Some stakeholders questioned the effectiveness and quality of services and others noted that there is a need for culturally responsive services and service providers that reflect the diversity of families. One stakeholder commented that the agency does not focus on cultural competency regarding foster families. For example, in communities in which there is a large Hispanic population, the agency does not recruit bilingual staff and does not provide foster parent forms in Spanish. However, a stakeholder in one county noted that the county is developing parenting classes to meet the needs of Sudanese and Latino populations.
Item 36. The services in item 35 are accessible to families and children in all political jurisdictions covered in the State’s CFSP.

Item 36 is rated as an Area Needing Improvement because services are not consistently available statewide. When services are available, there are frequently long waiting lists.

The Statewide Assessment notes that necessary services are not consistently available statewide. Not only are services lacking in some geographic areas, but in urban centers where they do exist there often are long waiting periods for services, particularly for substance abuse treatment services. According to the Statewide Assessment, as a result of service gaps, children and families often are provided services that are available, rather than services that most appropriately meet their unique needs. The Statewide Assessment also notes that the NHHSS rate of reimbursement for providers is inadequate and inflexible and contributes to the shortage of services for child welfare families.

As reported in the Statewide Assessment, 45 Nebraska counties (48% of all counties) are Federally-designated primary health care professional shortage areas in whole or in part; 66 counties (71%) are Federally-designated mental health professional shortage areas; and 15 counties (16%) are dental health professional shortage areas in whole, in part, or for special population groups – such as Medicaid-eligible and/or Native American Tribes.

Stakeholders commented that accessibility of services varies in different areas of the State with providers typically located in the urban areas and rural areas being underserved. Stakeholders noted that key concerns pertain to gaps or waiting lists for inpatient substance abuse treatment services and home-based services.

Item 37. The services in item 35 can be individualized to meet the unique needs of children and families served by the agency.

Item 37 was assigned a rating of Area Needing Improvement because, due to service gaps, children and families do not receive services that are individualized to meet their needs.

As noted previously, the Statewide Assessment acknowledges that, because of service gaps, children and families often are provided services that are available rather than those that meet their unique needs. However, the Statewide Assessment also notes, that NHHSS has implemented practices, such as Family Group Conferencing, family team meetings and the ‘wraparound’ approach, in order to identify a family’s unique service needs.
Stakeholders commenting on this issue noted that many case plans are “boiler plate” and do not address family’s unique needs or strengths. Although some stakeholders suggested that efforts were being made to individualize services, others reported that no efforts were being made in this direction.

IX. Agency Responsiveness to Community

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Nebraska is in substantial conformity with the factor of Agency Responsiveness to Community. Findings pertaining to the items assessed for this factor are provided below.

**Item 38. In implementing the provisions of the CFSP, the state engages in ongoing consultation with tribal representatives, consumer, service providers, foster care providers, the juvenile court, and other public and private child-and-family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP.**

Item 38 was assigned a rating of Strength because Nebraska has sought extensive input from tribal representatives, consumers, service providers, and others, in the development of the Nebraska Family Portrait and in the CFSP process.

According to the Statewide Assessment, extensive input has been sought from external community stakeholders in the development of the CFSP in the form of the Nebraska Family Portrait. Persons involved in the development of the plan included family members, youth, the provider community, foster parents, and legislative and executive task force groups. In addition, transitional and independent living needs of youth were assessed and planned for by the Chafee Planning Team, which included youth, foster parents, service providers, the four Federally recognized Native American Tribes, and agency staff. Other groups providing input included the Federation of Families for Children’s Mental Health and the Nebraska Foster and Adoptive Parent Association. Over 300 individuals outside the agency lent their expert guidance to the development of the Nebraska Family Portrait.
The Statewide Assessment also notes that the agency has garnered input from minority communities across the State via focus groups, team membership representation, and data reviews assessing minority-specific protection and safety issues. Communication channels to provide continuous input from the Tribes are established by identifying persons to work directly with the Tribes; maintaining staffing contracts with three of the four Tribes for on-site workers and supervisors; including Tribal youth on the Governor’s Youth Advisory Council; and coordinating with the Tribes to create the “Circle of Nations,” which is a youth development effort.

In addition, LB1184 teams were created by the legislature to deal with community-based issues affecting child abuse and neglect. These teams facilitate coordination among local agencies. However, these teams are not functional in all counties as prescribed by the legislation.

Stakeholders commenting on this issue expressed the opinion that the relationship between community providers and the NHHSS has greatly improved. Although this relationship has been primarily adversarial in the past, it is now more of a partnership. Some stakeholders also reported that NHHSS has positive working relationships with county attorneys and the courts, and that the county agencies have developed working relationships with domestic violence agencies. Despite these positive aspects, a few stakeholders expressed the opinion that the agency engages providers in the planning process, but does not really consider their input in the final plan that is developed and is more “defensive” than responsive to the community.

**Item 39. The agency develops, in consultation with these representatives, annual reports of progress and services delivered pursuant to the CFSP.**

Item 39 is rated as a Strength because Nebraska has involved community stakeholders in the development of reports.

According to the Statewide Assessment, Nebraska sought extensive input from external community stakeholders in the development of the CFSP. Eleven work groups/planning teams were charged with identifying strengths, concerns, and recommended actions in all CFSP Statewide Assessment Review categories. The results of their work were incorporated into the final CFSP.

**Item 40. The State’s services under the CFSP are coordinated with services or benefits of other Federal or Federally assisted programs serving the same population.**
Item 40 is rated as a Strength because many of the Federal or Federally assisted programs have been re-organized into the comprehensive Nebraska Health and Human Services System. Additional collaboration has occurred with SAMHSA, the Court Systems and domestic violence initiatives.

According to the Statewide Assessment, the Nebraska Partnership for Health and Human Services Act (LB1044) re-organized five State agencies into the comprehensive Nebraska Health and Human Services System. When the merger occurred, the Office of Juvenile Services was incorporated into the Office of Protection & Safety. Realizing the interconnectedness between child welfare and juvenile justice issues, Nebraska viewed this change as a positive step forward in its ability to appropriately and effectively care for youth adjudicated as status or juvenile offenders and placed in the State’s custody. The merger also joined other health and human services such as TANF, Medicaid, Employment First, Developmental Disabilities, mental health and substance abuse, and child care.

Other examples of collaboration include:
- The development of the Integrated Care Coordination Units as an outgrowth of a Federal Substance Abuse and Mental Health Services Administration (SAMHSA) grant.
- The development of the Families First and Foremost program also in conjunction with SAMHSA.
- Contracting with 22 community-based domestic violence/sexual assault crisis centers, in collaboration with the courts.
- The Collaborations Between Child Welfare Agencies and Court Systems to Facilitate Timely Permanency project to facilitate timely adoptions.

Stakeholders commenting on this issue mentioned the Omaha Community Partnership, which is a collaboration of schools, the county attorney, and the prosecutor, which seeks to improve system collaboration and response to juvenile justice issues.

X. Foster and Adoptive Home Licensing/Approval/Recruitment, and Retention

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Nebraska is not in substantial conformity with the factor of Foster and Adoptive Home Licensing/Approval, Recruitment, and Retention. Findings pertaining to the items assessed for this factor are provided below.

**Item 41. The State has implemented standards for foster family homes and child care institutions which are reasonably in accord with recommended national standards.**

Item 41 was assigned a rating of Strength because Nebraska Code provides standards for approval and licensing for all settings providing out-of-home care for State wards.

According to the Statewide Assessment, Nebraska Code provides standards for approval and licensing for all settings providing out-of-home care for State wards. A Licensing Process Summary is completed for both initial and renewed licenses. Major areas in the summary include a Health Information Report, a fire safety inspection, a sanitation inspection report (if required based on the type of license being issued), and an evaluation and recommendation. Criminal and child abuse/neglect background checks are completed for group homes, child caring, and child placing agencies. Relative caregivers, or persons who are already known to the child, may be approved as the foster care placement without having full licensed status. Authorization must be obtained from Central Office if a home is to be approved instead of licensed.

A separate code is in place for the licensing of Native American Foster Homes. The standards include most minimum licensing criteria. However, variances occur in regard to cultural definitions of family and marriage, and the home’s ability to self-determine the maximum number of children in care without comprising safety.

As noted in the Statewide Assessment, recommendations for improvement include implementing uniform background checks, establishing higher standards for foster and adoptive homes, and increasing the number of diverse foster care providers statewide.

Stakeholders commenting on this issue noted that the State has standards in place. However, a few stakeholders expressed the opinion that foster homes tend to be overloaded, and were concerned about the lack of State restrictions regarding the number of children that can be placed in a single home with respect to age or disability.

**Item 42. The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.**
Item 42 was assigned a rating of Strength because licensing standards are applied to all licensed or approved foster family homes or child care institutions.

According to the Statewide Assessment, licensing codes apply to all settings providing out-of-home care to State wards. Exceptions are made for relative caregivers or persons who are already known to the child. Authorization to approve these homes is made by the central office. Only State funds are used to make foster care payments in approved homes. As stated earlier, Nebraska code provides separate standards for licensing native American Foster Homes.

Nebraska has one primary Licensing Program Specialist located in the central office to provide oversight of statewide licensing activities and promote consistency among staff conducting licensing. This person is also charged with licensing all residential facilities. The plan is to add six staff in the service areas to serve as licensing liaisons.

Nebraska has an Out-of-Home Placement Guidebook and a Licensing Compliance Guide that can be used for reference when completing licensure.

Stakeholders reported that all foster homes are held to the same standards and relatives can be licensed as foster parents, although not all are. However, some stakeholders raised concerns regarding the quality of foster homes and expressed the opinion that agency-based homes are of higher quality and are better supported than private contractor homes. In one county, stakeholders expressed concerns about the lack of monitoring of foster homes, abuse of children in some of the homes, conditions of the homes, and the number of children in the homes.

**Item 43. The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children.**

Item 43 was assigned a rating of ANI because although the State requires criminal background clearances for foster and adoptive parents, these are not consistently implemented.

According to the Statewide Assessment, Nebraska Administrative Code requires the following background checks and processes to assess safety risks of out-of-home providers:

- Reference checks from three separate sources on all license applicants.
• Health Information Reports signed by authorized medical practitioners conveying that the applicant and/or their employees are mentally and physically competent to care for State wards.
• Central Registry checks for prior abuse/neglect history.
• Local and State law enforcement checks for known criminal activity.
• Home Study evaluations whereby the licensing agent conducts personal interviews and makes overt observations of the applicant’s interaction with other household members, the family’s lifestyle and support systems, personal histories, etc.
• After licensing or approval, P&S Workers and other NHHSS licensing agents may make periodic unannounced personal visits to the placement site to monitor safety issues.

The Statewide Assessment also noted, however, that not all of these procedures are applied consistently. Pending regulations will require all foster, adoptive, and relative home caregivers to undergo local law enforcement, State patrol, and nationwide fingerprint checks at the time of initial and renewal licensing. The State is developing a policy that requires FBI checks for potential foster/adoptive parents and foster parents undergoing license renewal.

Stakeholders commenting on this issue indicated that child abuse registry checks are done on foster parents, but, at present, there are no policies governing criminal background checks. Stakeholders noted that, in most instances, local criminal background checks are done, although it was reported that the agency is moving toward having all FBI checks. Stakeholders expressed concern about the fact that no background checks are conducted for respite care providers. Foster families find their own respite care and the State is “accommodating” in terms of allowing them to use unlicensed providers.

**Item 44. The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed.**

Item 44 was assigned a rating of Area Needing Improvement. Although Nebraska has a Foster Care Parent Recruitment and Retention Marketing Plan, it is not scheduled to be implemented until July 2003.

The Statewide Assessment identified the following concerns regarding diversity of foster and adoptive homes:
• Need to increase Native American foster homes and treatment foster care. Targeted recruitment efforts and tribal resource development staff are needed.
• Need to address MEPA implementation.
• Need to develop materials and other supports, such as mentoring, to support Nebraska’s diverse population groups. NFAPA presently has two Hispanic mentors working with foster parents and are currently seeking a Native American foster parent.
The Statewide Assessment also noted, however, that a Foster Care Parent Recruitment and Retention Marketing Plan was finalized in April 2001 to “develop a strong, thriving and diverse foster parent base in Nebraska…” The marketing plan objectives were designed to increase retention rates; engage new foster parents representative of the cultural and linguistic diversity of Nebraska’s population; and recruit additional foster parents able to care for children with special needs, older adolescents, and large sibling groups. The Nebraska Family Portrait calls for the recruitment plan to be implemented between July 2003 and June 2004.

Stakeholders commented that there is very little or no recruitment of foster homes and that the agency does not have available staff to dedicate to recruitment at the local levels. Stakeholders noted that there has been an increase in the Hispanic population but not in the number of Hispanic foster homes. However, stakeholders in one site reported that the county recruits Spanish-speaking foster parents.

Stakeholders noted that foster parents have a mentoring program established through the foster parent association that has helped support foster parents, but that they are usually not provided with many services from the agency. Stakeholders indicated that there are few supports available for foster parents to assist in caring for children, including training to care for special needs children, respite care, and visits from the caseworker. In addition, throughout the Statewide Assessment and the case review process, it appears that foster parents are given a great deal of responsibility to oversee the educational and physical and mental health needs of the children and to provide reports to the agency on these activities without receiving the supports and services they need to accomplish these tasks.

**Item 45. The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children.**

Item 45 was assigned a rating of Area Needing Improvement because adoption exchanges are not being utilized to promote the adoption of children who are free for adoption.

According to the Statewide Assessment, Nebraska maintains a State Adoption Exchange to help eliminate boundaries between agencies and counties or service areas across the State. Nebraska also uses the National Adoption Exchange. However, only 21 of the 315 children free for adoption as of 10/31/2001 were listed on either exchange. Guidelines are being developed for staff on providing information on children for publication in these media resources.

Central office and field staff meet periodically to discuss recruitment strategies. A common logo and tag line have been developed and are used on all materials. Space for a booth at the Nebraska State Fair is purchased each year. In addition, each service area
develops a recruitment plan through their resource development staff that is specific to their local/regional needs and includes a variety of recruitment strategies.

Stakeholders reported that ICPC is used to facilitate placement of children with relatives who reside outside the State. However, the adoption website is not used consistently.
XI. DETERMINATION OF SUBSTANTIAL CONFORMITY

For each outcome and systemic factor listed below, mark “Y” where the State is determined to be in substantial conformity and “N” where the State is determined not to be in substantial conformity. For each outcome or systemic factor marked “N,” place a check beside the performance indicator, listed by item number in this form, that has been determined to be an area needing improvement.

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<tr>
<th>Outcomes</th>
<th>III. Child and Family Well-Being</th>
<th>VI. _<strong>N</strong> Quality Assurance System</th>
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<td>I. Safety</td>
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