The Nebraska
Foster Care Review Office
Quarterly Report

Submitted pursuant to Neb. Rev. Stat. §43-1303 (4)

Issued September20, 2013

Executive Summary

The Foster Care Review Office's (FCRO) role under the Foster Care Review Act is to independently track children in out-of-home care, review children's cases, collect and analyze data related to the children, identify conditions and outcomes for Nebraska's children in out-of-home care, and make recommendations on any needed corrective actions. The FCRO is an independent state agency, not affiliated with the Department of Health and Human Services, the Courts, the Office of Probation, or any other child welfare entity. Further information about the FCRO can be found in Appendix D.

This quarterly report is provided pursuant to Neb. Rev. Statute §43-1303(4) in order to offer relevant data and other information to policy makers and child welfare stakeholders in an effort to improve conditions for children in out-of-home care.

Data quoted within this quarterly update to the Legislature are derived from the Foster Care Review Office's independent tracking system unless otherwise noted (i.e., Census data). Neb. Rev. Statute §43-1303 requires DHHS (whether by direct staff or contractors), courts, and child-placing agencies to report to the Foster Care Review Office any child's foster care placement, as well as changes in the child's status (for example, placement changes and worker changes). By comparing information from multiple sources the Foster Care Review Office is able to identify discrepancies. When case files of children are reviewed, previously received information is verified and updated, and additional information is gathered. Prior to individual case review reports being issued, additional quality control steps are taken.

This quarterly report focuses on two main issues:

1. An analysis of children re-entering out-of-home care, including those doing so after a relatively short period in the parental home;
2. An analysis of data related to all children in out-of-home care at a point in time (July 29, 2013), and some trend data.

Through an analysis of data regarding children that re-enter out-of-home care, the Foster Care Review Office has found the following concerns:

- 39% (1,478) of the current children in out-of-home care had previously been in out-of-home during their lifetime. Of these children:
    - 13% were age 0-5.
    - 25% were age 6-12.
    - 62% were age 13-18.
- Disparity in race continues to be an issue for these children that re-enter out-of-home care as shown by:
    - American Indian children are **2%** of the population but **9%** of children reentering care.

- Black children are **6%** of the population but **26%** of the children reentering care.
- White children are **86%** of the population but only **64%** of the children reentering care.

- For the 1,478 children who have been in out-of-home care at least once before, 57% (844) of these children are in their second removal from home. Of these children:
  - 33% returned to out-of-home care within 180 days of reunification.
  - 51% returned to out-of-care more than 366 days after reunification.
- Once children reenter out-of-home care for the second time, they remain in out-of-home care significantly longer.
  - Children who returned to out-of-home care within 0-90 days of reunification spent significantly more time out-of-home during their second removal from the home.
- For children removed a second time from their home, the major reasons for removal and barriers to permanency for these children include:
  - Neglect issues.
  - Unsafe or inappropriate housing.
  - Parental drug or alcohol abuse.
  - Child's behavior or response to prior traumas.

Through an analysis of recent data regarding all children in out-of-home care, the Foster Care Review Office has found the following trends:

- Fewer children are entering out-of-home care (page 13).
- The length of time that children are spending in out-of-home care has slightly decreased in the past three months (page 16)
- Children are spending less time in shelter care (page 20).

Therefore, the FCRO makes the following recommendations to the child welfare system:

- Ensure that there is fidelity to the decision making tools that are used to determine whether reunification is safe and appropriate.
- Work to eliminate service gaps and ensure that services are in place before children are placed back home. Children who have experienced the trauma of abuse and neglect often need services to heal, and parents need services to effectively deal with the factors that led to removal of the children from their home.
- Find ways to assist families with meeting requirements to reunify with their children that may not be possible for families in poverty, such as obtaining affordable housing, employment skills, food, day care, after school programs, tutoring, therapy, substance abuse or mental health aftercare, etc.

- Ensure that all stakeholders, including the court system, are timely in meeting the needs of children and families.
- Provide crisis stabilization services in three key areas: 1) as early intervention to prevent a child's removal from the home, 2) when youth transition home and to maintain them safely in that home, and 3) to support foster homes and reduce placement disruptions.
- Conduct a detailed analysis on those children that returned to out-of-home care more than a year after being reunified to see if the second removal involved new issues or concerns or if there was a failure to permanently stabilize the family home.

Future changes that could impact child welfare data and are not represented in the data in this Quarterly Report:

- Under LB 561 (2013), starting October 1, 2013, the Office of Probation Administration will begin providing services for youth with law violations as those children come to the attention of the Courts. Cases of youth with law violations that are currently served by DHHS will continue under DHHS until case closure. The FCRO is working to ensure that it can continue to track and provide outcome data on the youth in this population that are in an out-of-home placement.
- Under LB 216 (2013), youth aging out of the foster care service will be able to voluntarily continue services through their 21st birthday. Details on this program are still being decided.
- DHHS is moving towards using an alternative response to some cases of abuse or neglect where certain safety risk thresholds have not been reached that are brought to its attention, allowing these cases to be non-court involved. Details on this are still being decided, and future legislation will be necessary.
- There is a need for a formalized data informational system between all state entities to ensure relevant data is collected to meet the needs of children and families.

The Foster Care Review Office has a multitude of statistics available in addition to those found in this quarterly report.

Please feel free to contact us at the address below if there is a specific topic on which you would like more information, or check our website for past annual reports and other topics of interest.

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Section I.
Analysis of the Differences and Similarities Between Children with Single and Multiple Removals

The FCRO's special focus for this Quarterly Report is children who return to out-of-home care. The term for exiting foster care is "permanency." Permanency means children would leave foster care to live in the rehabilitated home of origin or, if a return to the parent is not possible, children would leave foster care through adoption, guardianship, or other means. Ideally, children who have achieved permanency should have at least one committed adult who provides them a safe, stable, and secure parenting relationship, with love, unconditional commitment, lifelong support and a sense of belonging.

This section involves an analysis of three main populations involving children that re-enter out-of-home care:

1. An analysis of all children who re-entered out-of-home care;
2. An analysis of all children who are in the second removal from home;
3. An analysis of children whose second removal from home was within 0-90 days after reunification.

A. Data on All Children who Re-Entered Out-of-Home Care

The first question to answer is where do children go when they exit foster care? In the past few years:

- Approximately 70% returned to the parental home.
- Approximately 12% were adopted.
- Approximately 8% reached the age of majority (adulthood).
- Approximately 6% had a finalized guardianship.
- Approximately 1-2% left the state's care through custody transfers (such as to a tribe).
- A few (under 1%) died while in out-of-home care, mostly the medically fragile.[1]

While on the surface this appears to be positive, reality is that not all children experienced stability after a return to the parent. Data shows that on July 29, 2013, of the 3,784 children in out-of-home care, 1,478 (39%) had been in out-of-home care at least once before. As the next chart shows, even more concerning is that many children have been removed from the home multiple times.

[1] Source for statistics: Foster Care Review Office Independent Tracking System. The term "children" refers to individuals who are age birth through eighteen; the age of majority occurs on the 19th birthday. At this time the Young Adult extended services act has not taken effect (it will allow certain services to age 21 through a voluntary agreement). "Out-of-home care" includes relative homes, foster homes, emergency shelters, group homes, detention, YRTC's or specialized facilities, and supervised independent living.

Number of Removals	Number of Children
1	2,306 children (61%)
2	844 children (22%)
3	406 children (11%)
4	141 children (4%)
5	57 children (2%)
6	18 children (< 1%)
7	4 children (< 1%)
8	5 children (< 1%)
9	3 children (< 1%)
Total	**3,784 children**

Clearly, for some children "permanency" has become a temporary condition. The foster care system should not become a revolving door of removal from the home, return to parents, re-abuse or neglect, removal, etc., yet that is what some children experience. If we, as a state, truly want to reduce child abuse and neglect, we need to address this cycle by finding the causes of multiple removals and implementing solutions that promote long-term stability. Research clearly shows that each removal from home is a traumatic event for a child.

1. Age differences

The age of the child was compared to the number of removals from the home. Older youth are clearly more likely to have a higher number of removals. Some of this is a function of time –you would expect that younger children would comprise a larger percentage of the children in a first removal, while older youth have had more time to have prior removals.

Some of the issues identified in the following chart include:

- The number of 6-12 year olds who have been removed two, three, or four times is particularly concerning.
- There are older children who have been removed up to 9 times.
- The FCRO also wishes to note that it is positive that fewer children in the 0-5 age group have experienced multiple removals.

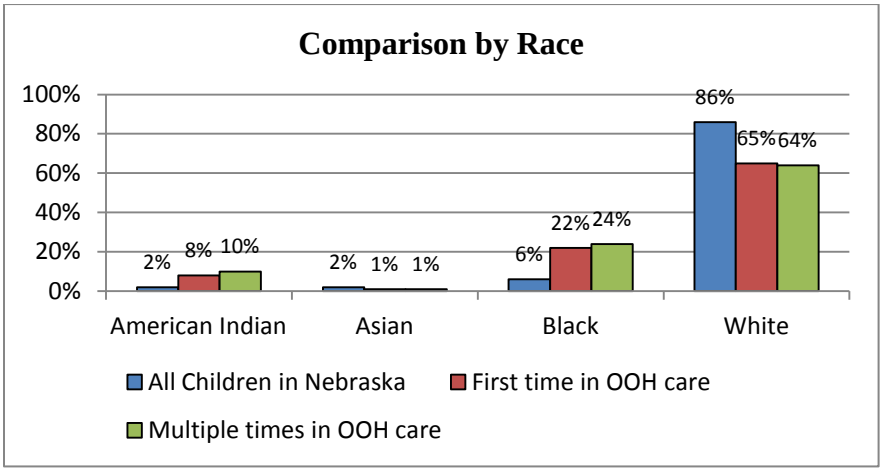
Removals	Age 0-5	Age 6-12	Age 13-18
1st removal	41%	28%	31%
2nd removal	18%	31%	52%
3rd removal	5%	22%	73%
4th removal	2%	12%	86%
5th removal	--	4%	96%
6th removal	--	6%	94%
7th removal	--	--	100%
8th removal	--	--	100%
9th removal	--	--	100%

2. Racial/ethnic differences

Minority children continue to be overrepresented in the out-of-home population as a whole, as well as in the population of children returning to out-of-home care for the second time.

The following chart illustrates the percentages for children of different racial backgrounds. It compares three groups:

1) The census population of children in Nebraska, [2] (not just those in foster care) as a baseline,
2) Children in out-of-home care on July 29, 2013, who were in their first time in care, and
3) Children in out-of-home care on July 29, 2013, who had experienced multiple removals from the home.



Based on these graphs, some disturbing facts are shown based on the race for children removed from the home for a second time when compared to the general population:

- Children with American Indian ancestry in a second removal **exceed what would be expected based on their composition in the general population by 350%**.
- Black children in a second removal **exceed what would be expected based on their composition in the general population by 333%.**
- White children in a second removal occur at **a rate 28% less than would be expected based on their composition in the general population**.
- American Indian and Black children with **second removals exceed the percentages of those with only one removal**, indicating further disparity.

Under some federal definitions Hispanic ethnicity is not classified as a race but rather as a distinct ethnicity. The percentage of Hispanic children returning to care **was less** than

[2] Source: http://www.census.gov/popest/data/national.asrh/2012/index.html.

the percent of Hispanic children in the general population. This is statistically significant.

Ethnicity	Nebraska children per census	All in out-of-home care on July 29, 2013	In out-of-home 2nd time
Hispanic Ethnicity	15%	12% (450 children)	14% (114 children)

Studies such as that conducted by Chapin Hall in 2007 indicate that overrepresentation of children of color in the foster care system is a national issue.[3]

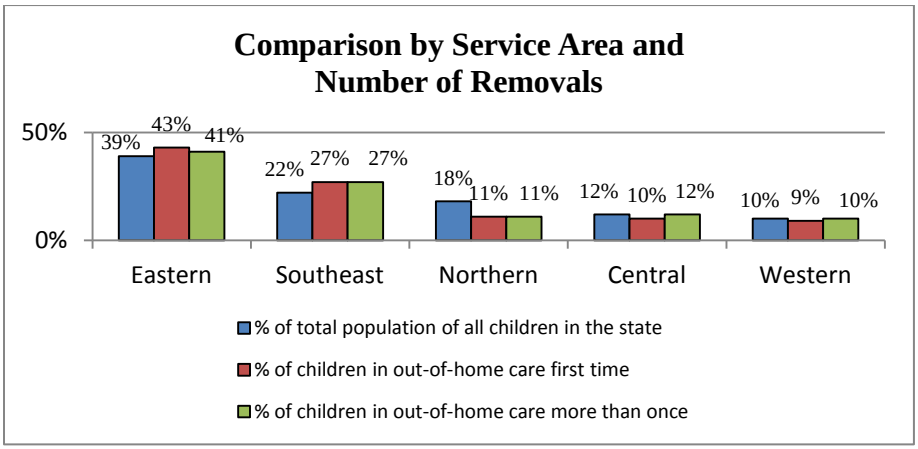
3. Service area[4] (regional) differences

The chart below compares the percentages from each service area for three populations:

1) Census data for all children in Nebraska;
2) Children in out-of-home care on July 29, 2013, who were in care for the first time; and
3) Children in out-of-home care on July 29, 2013 who had multiple removals.

Of note,

- In the two urban areas (Eastern and Southeast) the percentage of children in out-of-home care exceeds the general census percentage, while in the less populated areas the reverse is true.



4. Impact of caseworker changes

Parents of children in out-of-home care need to share and address some of the most intimate details of their lives with a variety of strangers, including the caseworker assigned to the children's cases. Thus one can reasonably expect that parental engagement can be negatively impacted by caseworker changes.

[3] Racial Disparity in Foster Care Admissions, by Fred Wulczyn and Bridgett Lery, September 2007, Chapin Hall.
[4] See Appendix A for the counties in each of the DHHS service areas, as defined by statute.

Children who have been in out-of-home care multiple times average 7 caseworker changes over their lifetime. This does not include changes that may have occurred if the child was in the home under the custody of DHHS, only while in out-of-home care. As a reminder, if these children had the optimum one caseworker for each of their two removals, the average would be 2 changes**.**

One of the chief findings in the oft-quoted *Review of Turnover in Milwaukee County Private Agency Child Welfare Ongoing Case Management Staff* Wisconsin study of 2005 was that "increases in the number of worker changes correlated to lessening the chance of permanency achievement."[5]

As stated in previous FCRO annual and quarterly reports, worker changes impact case progression. When agencies lack sufficient staff, caseloads and stress levels increase for those workers who remain in the system. Miscommunication and mistakes can occur when children's cases are transferred between workers. It takes time for the new worker to establish trust with the children and families. Higher levels of worker changes result in a substantial portion of the workforce not being experienced and not having had the chance to develop skills and proficiencies over time.

B. Data on DHHS Wards Who Are In the Second Removal from Home

On July 20, 2013, there were 844 children in out-of-home care who were in their second removal from the home. The FCRO examined their cases because there was less influence of past child welfare system changes on their cases than on the cases of children removed three to nine times.

When the FCRO examined their cases, we considered whether there were any significant differences between those who quickly re-entered out-of-home care and those who spent more time at home between removals. To do this, we divided the 844 children into four groups:

1. Those who returned to care between 0-90 days after being placed with their parent.
    - **185 children, 22%.**
2. Those who returned to care between 91-180 days after being placed with their parent.
    - **97 children, 11%.**
3. Those who returned to care between 181-365 days after being placed with their parent.
    - **134 children, 16%.**
4. Those who returned to care 366 or more days after being placed with their parent.
    - **428 children, 51%.**

[5] Review of Turnover in Milwaukee County Private Agency Child Welfare Ongoing Case Management Staff, January 2005, Connie Flow, Jess McDonald, and Michael Sumski.

The differences between these time periods is significant to the children involved.

- For children who re-entered out-of-home care after 366 or more days at home, (the largest category) we need ask if this second removal involved new issues or concerns or if there was a failure to permanently stabilize the family home.
- For children who re-entered out-of-home case within 0-90 days of removal, we need to ask if reunification occurred too quickly and whether the needed supports were put into place within the family home at the time of placement.

Length of time in out-of-home care differences

This chart indicates the median days (mid-point of the range) children spent in out-of-home care during their first removal and the median days spent thus far in their second removal. There is also an age breakout, as there are significant differences depending on the age of the child and the time between being placed at home and returning to care.

	Median Days in Out-of-Home Care						
	1st time in out-of-home care				2nd time in out-of-home care		
Group	**Age 0-5**	**Age 6-12**	**Age 13-18**		**Age 0-5**	**Age 6-12**	**Age 13-18**
0-90 days	62 days	179 days	86 days		195 days	459 days	329 days
91-180 days	304 days	307 days	201 days		315 days	759 days	254 days
181-365 days	318 days	242 days	259 days		181 days	510 days	186 days
366+ days	166 days	271 days	351 days		326 days	493 days	489 days

- Children in the 0-90 day return group spent less time in foster care during their first removal than children in the other groups.
- For the majority of the age groups the median time in out-of-home care to date in the second removal exceed the median time spent in the entire first removal.
- Questions to ask:
  - Why did children in the 0-90 day's group have such a significantly shorter median time in out-of-home care during their first removal than the children in the 91-180 days group?
    - What decision tools were used, and at what stage of the cases?
    - Why did the decision tool determine these children were safe to return home, and what happened to bring these children back into out-of-home care?

C. Data on DHHS Wards Who Re-Entered Out-of-Home Care 0-90 days After Reunification

The FCRO was able to gather some additional statistics specific to the 185 children who had returned to out-of-home care for a second time within 90 days of reunification with their parent. This population was examined in order to attempt to determine why these children's reunifications failed so quickly.

The following is a summary of the FCRO's findings.

- The most common reasons for entering out-of-home care initially were:
  - Neglect,[6]
  - Housing issues,
  - Parental drug use, and
  - Child behaviors, in that order.[7]
- The most common reasons for children being removed a second time included:
  - Neglect,
  - Housing,
  - Parental substance abuse, and
  - Child behaviors.
- Identification of parental alcohol use as a reason for children entering out-of-home care increased substantially for children's second removal, going from 8% at first removal to 19% at second removal.
- The most common parental barriers to permanency centered on housing issues, and continued parental drug use -- which were also some of the most common reasons for removal from the home.
- A frequently cited system barrier was the lack of documentation of parental progress or lack of progress. That is essential information needed to make informed decisions regarding how cases should progress.
- Based on median days in out-of-home care, children spent significantly more time in out-of-home care on their second removal than they did during their first removal.
- There was a wide variance in the range of days spent in care during the first removal.
  - The 0-5 age group ranged from 2-684 days in care the first time (median was 62 days).
  - The 6-12 age group ranged from 3-1,178 days (median was 179 days).
  - The 13-18 age group ranged from 1-1,942 days (median was 86 days).
- There was also a wide variance in the days spent to date in the second removal.
  - The 0-5 age group ranged from 81-1,720 days in care thus far in the second time (median 195 days).
  - The 6-12 age group ranged from 6-1,738 days (median 459 days).
  - The 13-18 age group ranged from 5-2,317 days (median 329 days).

[6] Neglect is the failure of the parent or caregiver to provide for a child's basic physical, medical, educational, and/or emotional needs. It can include a failure to recognize developmental capacities and limits, a failure to provide proper supervision, and a failure to provide proper guidance by exposing children to criminal behaviors. National research shows that neglect is strongly associated with socioeconomic disadvantage, such as welfare dependence, homelessness, low levels of parental education, single-parent families, and limited income.

[7] The FCRO would like to thank the four local board member volunteers who, in addition to giving hours reviewing children's cases each month, gave additional hours as they assisted us compile statistics on reasons entered care and barriers to permanency.

- Most of the children who returned to care within 0-90 days had been adjudicated under parental abuse or neglect. About 20% had been adjudicated due to delinquent or other behaviors.
- Children who returned to out-of-home care within 90 days averaged 5 placement changes (foster homes, group or other facilities) over their lifetimes. [8]
- Children in the 0-5 age group were all placed in the least restrictive placements.[9]
- All but one of the children age 6-12 was in the least restrictive placement.
- For children age 13-18 :
  - 34% were in the least restrictive placements,
  - 30% were in moderately restrictive placements,[10] and
  - 36% were in the most restrictive placements.[11]
- Each service area was represented in this population. The Eastern and Southeastern area had a larger percentage of the children in this population than the baseline census percentage of children in the state.
- Minority children were overrepresented in this population, as they are in the population of children in out-of-home for the first time.

More research is needed to determine:

1. Are there other problems, in addition to the lack of documentation of progress, with the process of deciding whether to return children home.
2. Are there aftercare supports that need to be made more readily available, and if so, what types.
3. Are there other issues that contribute to unsuccessful quick returns to out-of-home care.

[8] The lifetime count does not include respite placements, temporary short-term medical hospitalizations, or returns to the parent(s).

[9] Least restrictive includes relative placements, foster family homes, agency-based foster homes, developmental disability homes, and supervised independent living.

[10] Moderately restrictive includes group homes and boarding schools.

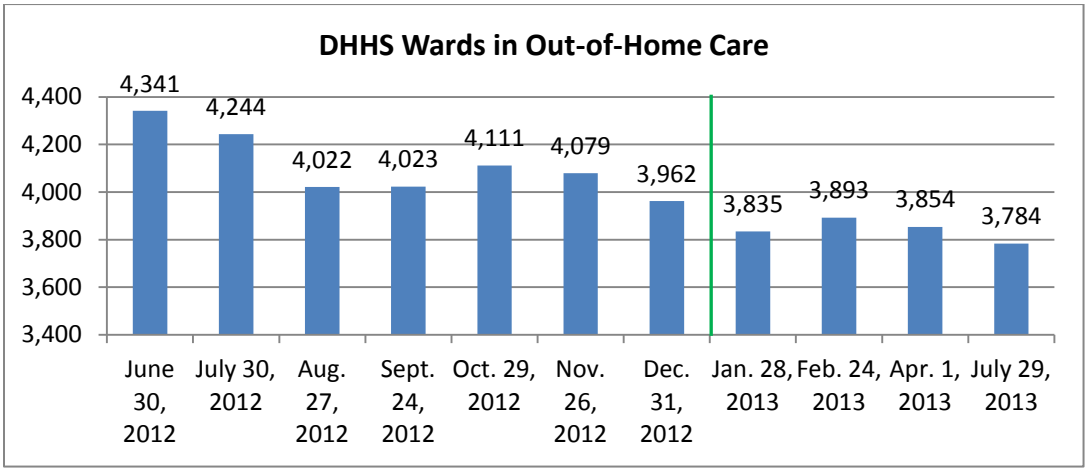
[11] Most restrictive includes medical facilities, psychiatric residential treatment facilities, youth rehabilitation and treatment centers at Geneva and Kearney, youth detention centers, and emergency shelters.

Section II.
Analysis of All Children in Out-of-Home Care on July 29, 2013

This report concludes with basic facts about Nebraska's children in out-of-home care, as shown in the box below. Additional details follow. Compared to six months ago, there are 109 fewer children in out-of-home care, and their average number of days in care has reduced slightly.

Children in Out-Of-Home Care

Since the beginning of the year the number of children in out-of-home care has declined.



Key Outcomes Showing Modest Improvement

Although the number of children in out-of-home care has been decreasing, **the average length of time children spent in out-of-home has not decreased from a year ago**.

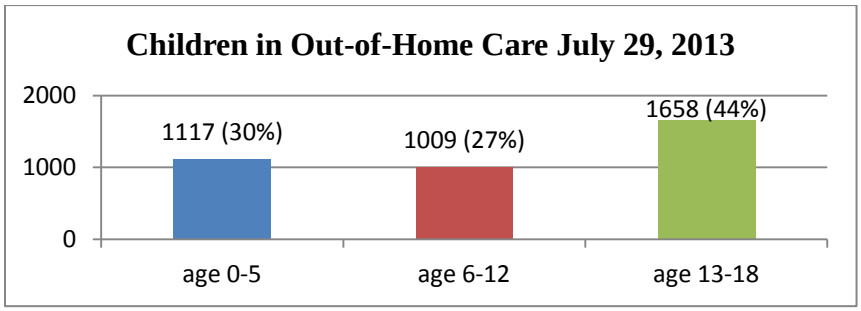
Category	Dec. 31, 2011	June 30, 2012	Dec. 31, 2012	July 29, 2013	Comments
# children in out-of-home care	4,320	4,341	3,962	**3,784**	Point-in-time.
Average [mean] number of days children had been in out-of-home care (excluding time during prior removals)	459 days	**485 days**	515 days	**500 days**	**The July 29th median[12] is 335 days.**
% of children with 4 or more lifetime placements	46%	50%	46%	**42%[13]**	*See footnote below.*

[12] Median means the mid-point, with as many over and under that number.

[13] Beginning July 1, 2013, the FCRO no longer counts a return to a parent between out-of-home placements in the lifetime number of placements for children. This change explains the reduction in the percentage of children who have experienced four or more placements between 2012 and July 29, 2013.

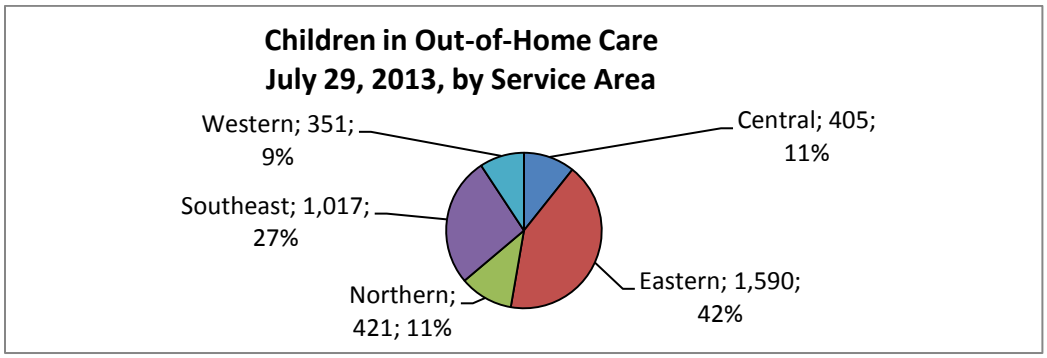
A. Out-of-Home Care by Age

As indicated below, there are more children in the 13-18 age group than the other two age groups. The percentage for the age 0-5 group has remained nearly steady the last few years. The percentage for the age 6-12 group has risen from around 23% in prior years to 27%, and there has been a corresponding reduction in the percentage in the age 13-18 group.



B. Out-of-Home Care by Service Area[14]

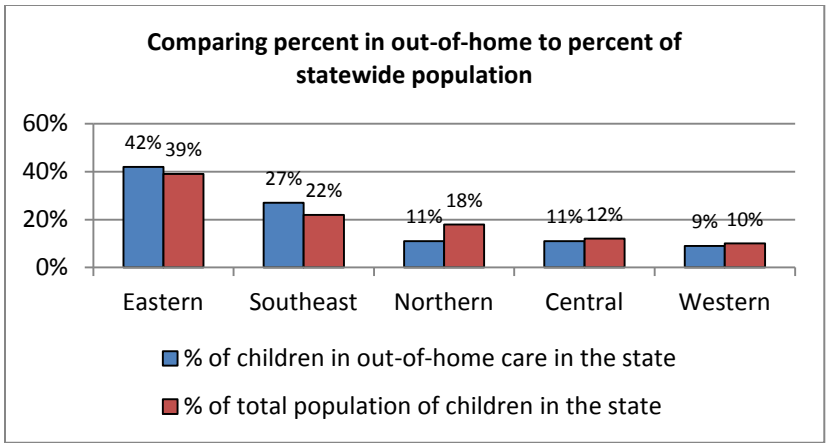
Children in out-of-home care come from every area of the state. The chart below shows the number and percentage of children from each DHHS Service Area. The percent from each area is nearly the same as it was six months ago.



The next chart compares the percentage of the statewide population of children in each service area to the percent of the total population of Nebraska children in out-of-home care in order to see if discrepancies exist. [15]

[14] See the map in Appendix A for the counties of the service areas.

[15] Source for the statewide population of all children: U.S. Census Bureau, 2011 Population Estimates Program, as found in the Kids Count in Nebraska Report 2012, page 65.



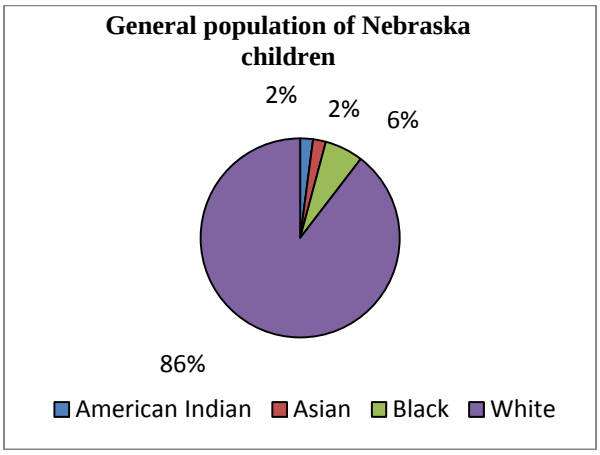
In the Eastern and Southeast areas the percent in out-of-home care is larger than their respective percentages of the statewide population of children. There are many possible explanations for this discrepancy. For example:

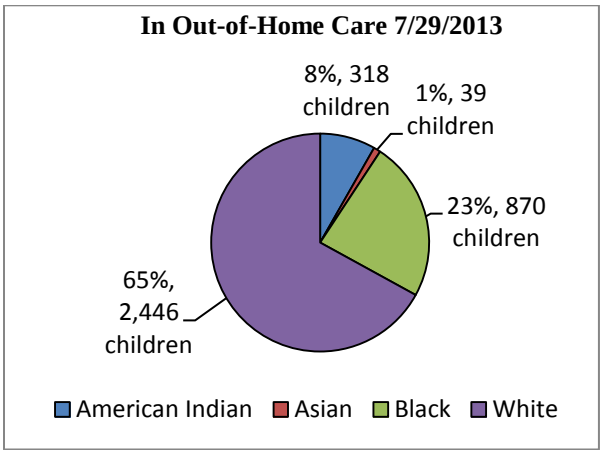
- One theory is that because these areas have more services available there may be a difference as to whether children are removed from the home and how long those who are removed stay in out-of-home care.
- Another theory is that there may be a difference in the rates of reporting of child abuse depending on whether the child is in the more urban areas or the more rural areas.
- Another theory is that there are differences in the judicial response in the separate juvenile courts as compared to county courts acting as juvenile courts.

Most likely there are many factors contributing to the situation.

C. Race

Minority children continue to be overrepresented in the out-of-home population as a whole, as shown below.[16,17]





The percent with Hispanic ethnicity is significantly less than the percent in the general Nebraska population of children.

Ethnicity	Nebraska children per census	All in out-of-home care on July 29, 2013
Hispanic Ethnicity	15%	12% (450 children)

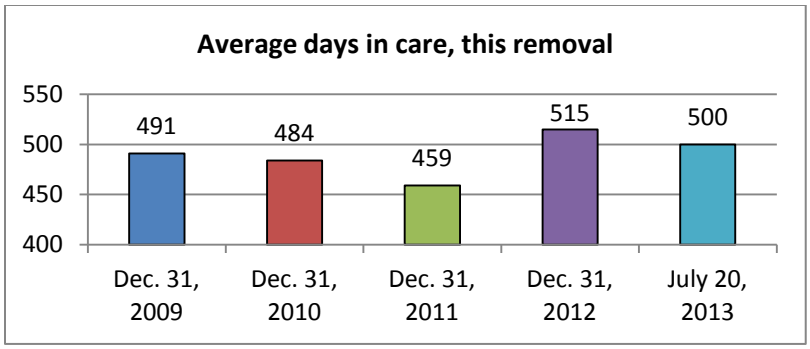
D. Length of Time in Out-of-Home Care

While acknowledging that the average time in out-of-home care for the current removal is slightly reduced compared to six months ago, an analysis of the number of days children have been in out-of-home care since their last removal shows that many children have been in out-of-home care for a considerable period of time. The current average is 500 days or 1.4 years.

In addition, the time calculation in the chart does not include previous times in foster care. As shown in the section on re-entry into out-of-home care in Section I, 39% of the children in care on July 29, 2013, had been removed from the home at least once before. Therefore, for many the lifetime days in out-of-home care would be higher.

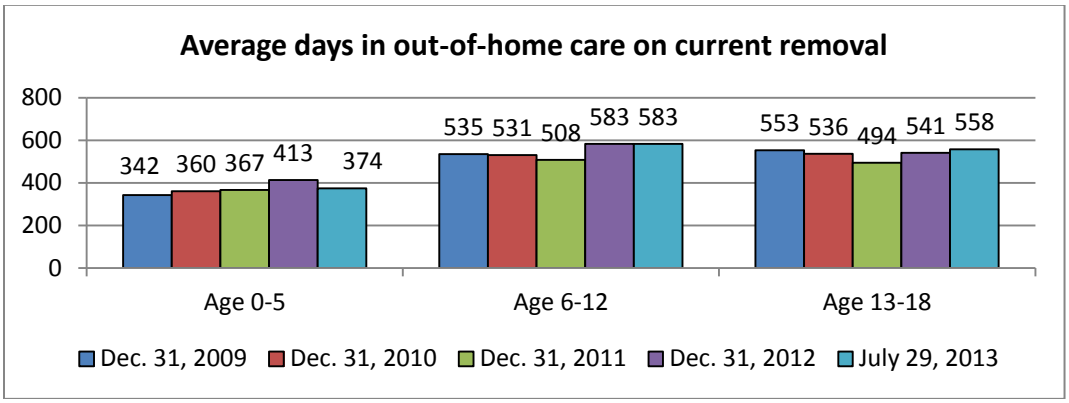
[16] The source for the general population of children in Nebraska was www.census.gov/popest/data/national.asrh/2012/index.html.

[17] The numbers of children in the chart labeled in out-of-home care 7/29/2013 do not total 3,784 because some children are biracial and thus included in each identified race, while other children's parent(s) declined to identify a racial background or listed "other."



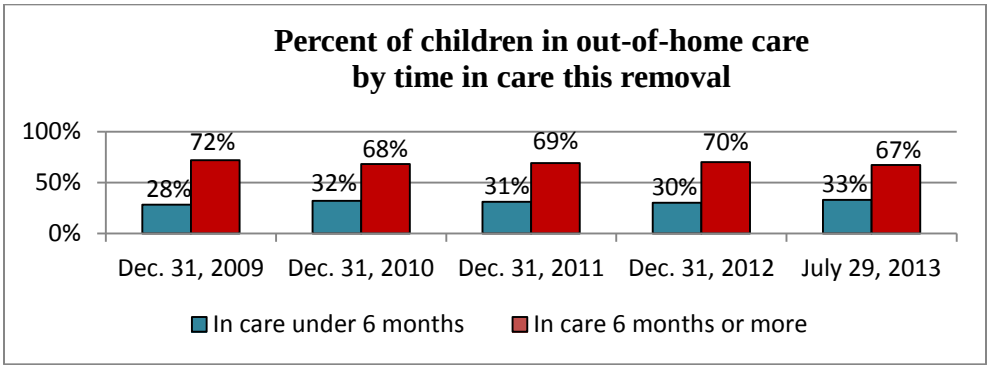
The next graph presents the difference in the average days in out-of-home care by age group:

- On July 29, 2013, the average length of time in out-of-home care:
  - for children age 0-5 was 374 days,
  - for children age 6-12 was 583 days, and
  - for children age 13-18 was 558 days.



Foster Care Review Office reviews are to occur at least once every six months for as long as a child is in out-of-home care. The next chart shows the percentages of the children that had been in care for six months or more on the date specified.

- While the number of children in care on any given day has decreased, there has not been significant progress in reducing the percentage of children who remained in out-of-home care for more than six months.



E. "Cold Case" Project

Due to some of the Foster Care Review Office's findings in the last quarterly report on children in care for prolonged periods of time and subsequent discussions with stakeholders a collaborative "cold case" study of children in out-of-home care for two years or longer without obtaining permanency has recently begun in the Eastern Service Area.

The Foster Care Review Office, the Department of Health and Human Services, NFC (the lead agency for the eastern area), and the Inspector General comprise the team reviewing cases. While the project is just getting off the ground, if successful, it will be replicated in other regions of the state.

F. Placement Changes

Children may be moved between placements (foster homes, group homes, special facilities) while in out-of-home care**.** Moves might be a positive thing in the case of a child who needed a high level of care when he/she first entered care and is now progressing toward less restrictive, more family like care. Often moves are due to issues within the system rather than children's needs. In some instances, the cumulative additional turmoil of changing who they live with can be temporarily or permanently harmful for children. Thus, the number of placements for the 3,784 children that were in out-of-home care as of July 29, 2013, is relevant.

The percentage of children with high rates of placement changes has not significantly improved since the last quarterly report.

Most experts find that children will experience trauma from four or more placement moves yet, **42% of the children in out-of-home care on July 29, 2013, had reached this level of trauma**.

The following chart shows DHHS wards in out-of-home care at different points of time, by the number of placements they have experienced in their lifetime.

To clarify, in the spring of 2013, the Foster Care Review Office re-assessed the way it was counting the number of children's placements. The FCRO no longer counts placements with the parents between removals in the lifetime placement count. Since 39% of the children currently in out-of-home care had at least one return to parent over their lifetime, it would be expected that the percentage of children with four or more lifetime placements would decrease when compared to the old methodology.

Lifetime Placements (foster homes, group homes, or specialty facilities)						
	Using old placement count methodology				Using new placement count methodology	
	In Out-of-Home Care on Dec. 31, 2011		In Out-of-Home Care on Dec. 31, 2012		In Out-of-Home Care on July 29, 2013	
	# of children	%	# of children	%	# of children	%
1 placement	1,071	25%	1,080	27%	992	26%
2 placements	734	17%	623	16%	741	20%
3 placements	511	12%	456	12%	472	12%
Subtotal 1-3 placements	*2,316*	*54%*	*2,159*	*54%*	*2,205*	*58%*
4 placements	392	9%	343	9%	315	8%
5-9 placements	950	22%	837	21%	736	19%
10-19 placements	507	12%	466	12%	406	11%
20-29 placements	122	3%	126	3%	92	2%
30-39 placements	28	1%	26	1%	28	1%
40+ placements	5	0%	5	0%	2	0%
Subtotal with 4 or more placements	*2,004*	*46%*	*1,803*	*46%*	*1,579*	*42%*
Total	**4,320**	100%	**3,962**	100%	**3,784**	100%

The FCRO recommends that key stakeholders, particularly DHHS, the Lead Agency for Omaha, and contractors that provide children's placements, better identify and address placement moves that are done for system reasons rather than to meet a particular need of the child. Collaborative efforts are needed to ensure that children find stability in who is providing their day-to-day care.

G. Placement Types

If children cannot safely live at home, then they need to live in the least restrictive, most home-like temporary placement possible in order for them to grow and thrive. The chart below compares where children in out-of-home care were living at three points in time. There has been little change since the last quarterly report. On July 29, 2013, **foster and relative homes, the least restrictive placement types, accounted for 74% of children that are placed out-of-home**.

Types of Placement for Children in Out-of-Home Care						
Type	**# of Children 12/31/2011**		**# of Children 12/31/2012**		**# of Children 7/29/2013**	
Least restrictive *	3,084	71%	2,840	72%	2,804	74%
Moderately restrictive **	650	15%	434	11%	407	11%
Most restrictive ***	468	11%	555	14%	494	13%
Runaway	99	2%	80	2%	76	2%
Other	19	<1%	53	1%	3	1%
Total	**4,320**	**100%**	**3,962**	**100%**	**3,784**	**100%**

* Least restrictive includes relative placements, foster family homes, agency-based foster homes, developmental disability homes, and supervised independent living.

** Moderately restrictive includes group homes and boarding schools.

*** Most restrictive includes medical facilities, psychiatric residential treatment facilities, youth rehabilitation and treatment centers at Geneva and Kearney, youth detention centers, and emergency shelters.

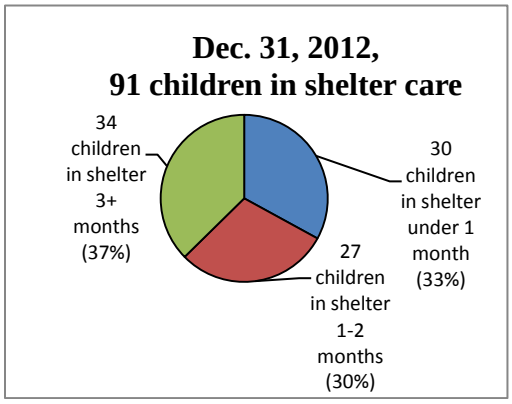
H. Shelter Care

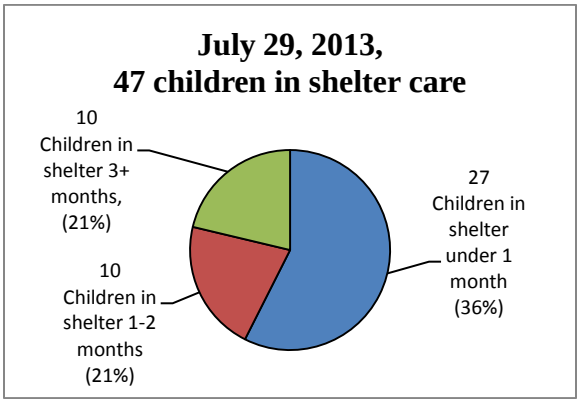
Some children are placed in an emergency shelter pending a more permanent foster placement. Best practice is for shelters to be used for a short period of time. Unfortunately, that did not always occur, so DHHS instituted changes.

Effective July 1, 2013, shelter placements were to add a triage and assessment component to assist in determining the placement best suited to meet the individual child's needs. And, children can only remain in shelter placement for 20 days. Shelter care placements longer than 20 days require the DHHS Director's approval.

These changes have resulted in a reduction in the total number of children in shelter care as well as the length of time that children remain in shelters. The FCRO commends DHHS for these positive changes. The chart below shows:

- The total number of children in shelters was reduced by 48%, from 91 children on December 31, 2012, to 47 children on July 29, 2013.
- The percent of children in shelters for 3 months or longer was reduced from 37% on Dec. 31, 2012 to 21% on July 29, 2013.





I. Caseworker and Lead Agency Worker Changes

Some level of caseworker turnover is inevitable, but recent years have greatly increased the number of caseworker changes that children and families have experienced**.** Worker instability decreases the likelihood of complete documentation of parental progress or lack thereof, which is important information that forms the evidence used by courts, DHHS, and other stakeholders to determine case direction. National research clearly shows that under stable case management children's cases tend to progress through the system faster.

The following shows the lifetime number of caseworker changes DHHS wards in out-of-home care have experienced as reported by DHHS to the Foster Care Review Office.[18]

- The percent of children with only one worker since 2011 has risen slightly and appears to be holding steady.
- The percent of children with 4 or more workers has decreased slightly from 2011 to 2012, and appears to be holding steady.

Lifetime Number of DHHS Case Workers for Children in Out-of-Home Care as Reported by DHHS (this does not include workers from lead agencies)						
	In Out-of-Home Care on Dec. 31, 2011		**In Out-of-Home Care on Dec. 31, 2012**		**In Out-of-Home Care on July 29, 2013**	
1 DHHS worker	344	8%	552	14%	513	14%
2 DHHS workers	726	17%	724	18%	812	21%
3 DHHS workers	718	17%	584	15%	508	13%
4 DHHS workers	608	14%	444	11%	474	13%
5 DHHS workers	499	12%	364	9%	302	8%
6 or more workers	1,425	33%	1,294	33%	1,175	31%
Total	**4,320**	**100%**	**3,962**	**100%**	**3,784**	**100%**

The chart above indicates that the number of children with four or more workers over their lifetime was 53% on December 31, 2012, and 52% on July 29, 2013.

Worker Changes by Service Area

An analysis of the worker changes was done by Service Area (see next chart), and includes worker changes for the lead agency in the Eastern area. From that analysis:

- The Northern, Southeast, and Western Service Areas have more children with only one worker than the statewide average.
- The Western and Northern areas are substantially better than the statewide average when you combine one or two workers.

[18] There are multiple ways in which DHHS can assign the primary DHHS worker and the lead agency worker to an individual child's case on their N-FOCUS computer system. Each is flawed and affects the accuracy and completeness of the reports on worker changes that DHHS sends the FCRO. It is our understanding that as long as DHHS uses its current methodology these issues will continue. Therefore, the statistics below are issued with the caveat that the number of workers is "as reported by DHHS."

	DHHS Caseworker or CFOM (DHHS Case Monitor) changes over the child's lifetime for children in out-of-home care July 29, 2013						FPS Changes**
	Central	Eastern	Northern	Southeast	Western	Statewide	Omaha FPS
1 worker	13%	9%	17%	19%	15%	14%	19%
2 workers	22%	19%	26%	22%	27%	21%	20%
3 workers	21%	14%	14%	9%	15%	13%	17%
4 workers	17%	14%	14%	9%	13%	13%	14%
5 workers	6%	8%	7%	8%	10%	8%	10%
6+ workers	21%	37%	23%	33%	20%	31%	20%
	100%	100%*	100%	100%	100%	100%	100%**

* This includes DHHS CFOM's (child and family outcome monitors) and DHHS caseworkers for children who were in out-of-home care when there was no lead agency or when one-third of the children from this area were served by DHHS workers rather than a particular lead agency.

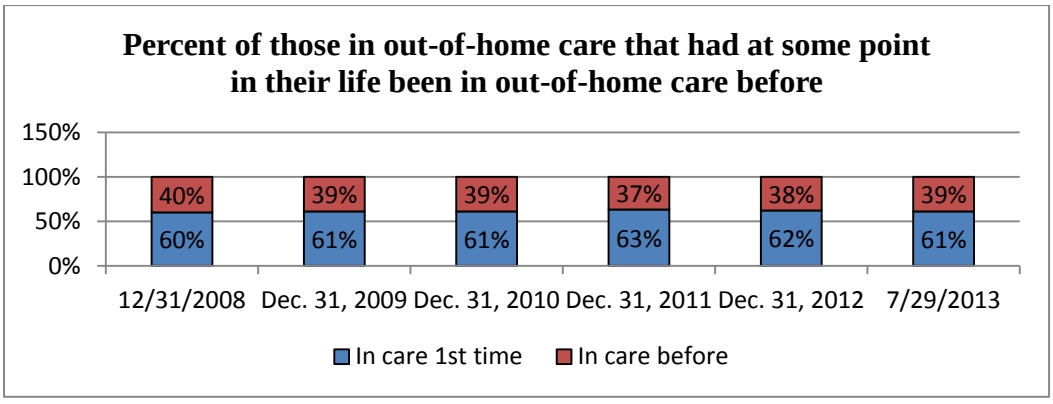
** The category FPS changes (Family Permanency Specialist) refers to changes in lead agency workers

The number of children with six or more workers over their lifetime in the Eastern and Southeast areas may be due, at least in part, to the multiple changes to lead agencies and assignments between DHHS and lead agencies in those regions.

J. Re-entry Rates

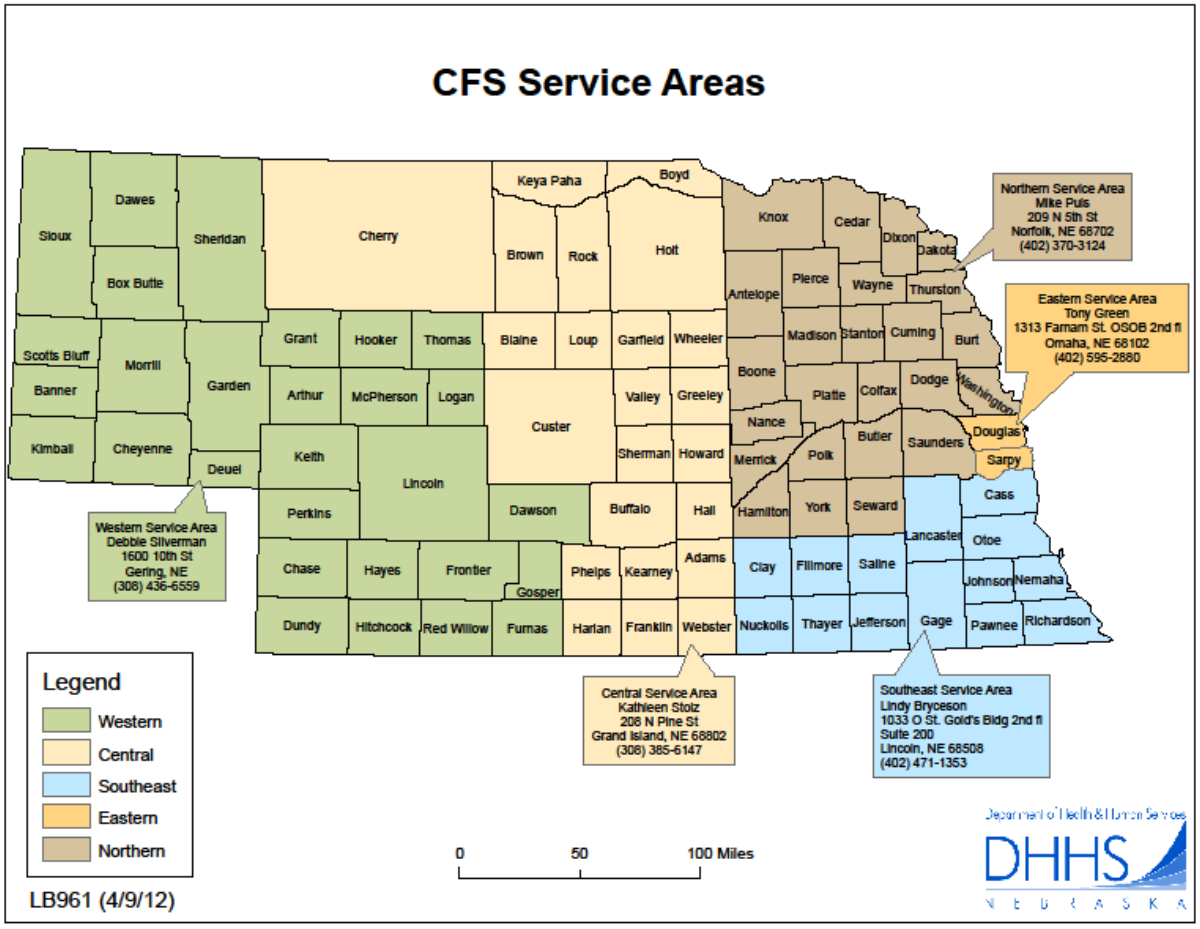
Many children had previously been in out-of-home care at some point during their lifetime. The FCRO measures this over the child's lifetime as opposed to within the past 6-12 months because every out-of-home entry may cause additional trauma for the child. There can be a number of reasons for re-entry, such as premature reunification, multiple mental health episodes, or the need for children to reintegrate prior abuse or neglect as they become adolescents. Data indicate that the number of removals is fairly consistent across service areas.

As the next chart indicates, the ratio of single removals to multiple removals has remained constant for many years.



Appendix A
Definition of Service Areas

The following map showing the Service Areas is courtesy of the Department of Health and Human Services.



Appendix B
Foster Care Review Office

Mission Statement

The Foster Care Review Office's mission is to ensure the best interests and safety needs of children in out-of-home care are being met through maintaining a statewide independent tracking system; conducting external citizen reviews; disseminating data, analysis, and recommendations to the public, the child welfare system, and the Legislature; and monitoring youth placements.

Vision

The vision of the Foster Care Review Office is that every child and youth in foster care live in a safe, permanent home, experience an enduring relationship with one or more caring adults, and have every opportunity to grow up to become a responsible and productive adult.

Purpose for Tracking System

The Foster Care Review Office is mandated to maintain an independent tracking system of all children in out of-home placement in the State. The tracking system is used to provide information about the number of children entering and leaving care as well as other data regarding children's needs and trends in foster care, including data collected as part of the review process, and for internal processes.

Purpose of Reviews

The Foster Care Review Office was established as an independent agency to review the case plans of children in foster care. The purpose of the reviews is to assure that appropriate goals have been set for the child, that realistic time limits have been set for the accomplishment of these goals, that efforts are being made by all parties to achieve these goals, that appropriate services are being delivered to the child and/or his or her family, and that long-range planning has been done to ensure a timely and appropriate permanency for the child, whether through return to a home where the conditions have changed, adoption, guardianship, or another plan.

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