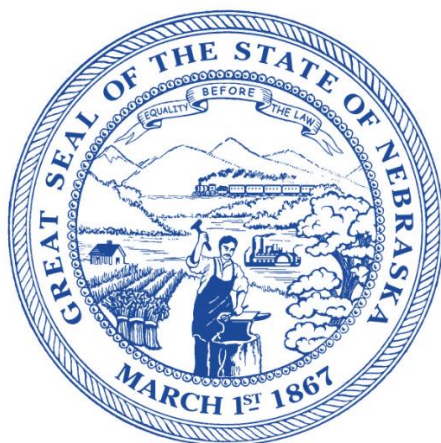


The Nebraska Foster Care Review Office Quarterly Report



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

Issued: March 1, 2018

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Executive Summary

The Foster Care Review Office (FCRO) provides Quarterly Reports to inform the Nebraska Legislature, child welfare system stakeholders, juvenile justice system stakeholders, other policy makers, and the public on identified conditions and outcomes for Nebraska's children in out-of-home care [aka foster care] as defined by statute, as well as to recommend needed changes as required.

The following are some important findings described in this report.

Special study on re-entries

In each quarter in 2017, the FCRO reported that approximately one-fourth of the DHHS children in care have been removed from the home at least one other time. When a child exits the child welfare system, we refer to this as "achieving permanency," however FCRO data indicates that "permanency" is only temporary for far too many of the children in State care.

This special study examines important elements of re-entry: the amount of time between exit and re-entry; the reasons for the first removal, the reasons for the current removal, and the correlations between the two; the amount of time children spend in care for each re-entry and how they exit the system with each exit.

The FCRO found the median days from the first exit to the first re-entry was 583 (19 months), with 45% returning after two years or more had passed.

Differences between the federal measures and the more inclusive FCRO measures

The current federal CFSR Round 3 (Child and Family Services Review) re-entry measure was narrowly designed. The CFSR requires states to report for "all children who entered foster care in a 12-month period who were discharged with 12 months to reunification, living with a relative, or guardianship, what percentage re-entered foster care within 12 months of their discharge". In other words,

- The CFSR only includes children that left care within 365 days of entry.
 - In Nebraska many children do not leave out-of-home care within a year.
- The CFSR does not include exits to adoption because many states are unable to tie pre-adoption and post-adoption cases.
 - In Nebraska adoption disruptions and dissolutions is a recognized issue.
- The CFSR includes only children that re-entered out-of-home care within 365 days of leaving.
 - In Nebraska many children that re-entered care do so over a longer time.

The FCRO is able to give a broader perspective, as it can research re-entries of all children, regardless of whether they left care within 12 months of removal or not, and regardless of reason for leaving care. The FCRO also looks at re-entry over the lifetime

of the child. Within those measures Nebraska's median time to re-entry is 583 days (roughly 19 months) so many children who re-enter would not be included in federal measurements.

From the more inclusive perspective, while Nebraska may have done well with the federal measure, it has a large number of children that re-enter care.

Here are some additional facts from the study:

- Of the 2,479 children who entered care in 2017, 534 (21.5%) were re-entering the system. A disproportionate percentage of the children were from the Northern Service Area and Eastern Service Area. The Central Service Area has a lower rate of re-entry. (page 8)
- The majority of children who re-enter care do so more than a year after they previously exited. This is true whether they re-enter the system once or several times. (page 11)
- The reasons a child enters care for the first removal are frequently the same reasons they are removed from the home in their most recent removal. (page 13)

Based on FCRO review data:

- Of the children removed for neglect in the first episode, 76.7% were removed for neglect in the most recent episode. (page 14)
- Of the children removed because of parental drug use in the first episode, 75.4% removed due to parental drug use in the most recent episode. (page 15)
- Of the children removed because of domestic violence in the home in the first episode, 56.9% were removed because of domestic violence in the most recent episode. (page 6)
- Preventing children from aging out of the child welfare system without a family structure becomes increasingly difficult as children re-enter care multiple times.

This report also updates regularly reported information:

[DHHS/CFS wards](#)

- In November and December 2017, significantly more children exited the foster care system than entered; this may be due to the predictable seasonal changes such as Adoption Day in November and pre-holiday reunifications. (page19)
But, when comparing the average daily population in December 2017 to December 2016, there were more children in care in 2017. (page18)
- Most children (96.5%) are in the least restrictive placement types, which is what should occur. (page 24)
- The issue of too many children experiencing multiple placement changes continues. For children age 13-18, 52.0% have been moved 4 or more times. (page 26)

- The most common permanency goal was reunification. For children with a permanency goal of reunification, local review boards found that 46.7% were unlikely to return to parents. (page 28)

Youth at the YRTC's

- The number of boys has increased while the number of girls has decreased. (page 30)
- Black and Native youth are disproportionately represented at the YRTC's. (page 33)

Probation

- There has been a steady decline in youth in out-of-home care. Lancaster County, in particular, has seen a 17% drop in a year. (pages 34 & 35)
- Black and Native youth are disproportionately represented in out-of-home placements. (page 39)
- 78.9% of the Probation supervised youth reviewed had a mental health diagnosis. If the youth did have a mental health diagnosis, 44.0% were on at least one psychotropic medication. (pages 43 & 44)

Youth served by both DHHS/CFS and Probation

- Black and Native youth are disproportionately represented in out-of-home placements. (page 48)

Recommendations:

To Child Welfare Stakeholders:

1. Take a long-term view of re-entry, and involve all stakeholders in that assessment. Ensure that services ordered and received match the underlying reasons for children's removal from the home, and build long term supports for families that will sustain after case closure.
2. Consider the recommendations made three months ago in the FCRO's annual report regarding reducing unnecessary placement changes, worker changes, etc.
3. Begin concurrent planning at the earliest stages if parents have shown by their actions or inactions that they are unwilling or unable to safely parent or unlikely to be reunified with their children.

To Juvenile Justice Stakeholders:

1. Continue the successful collaborative efforts that have led to reduced juvenile justice out-of-home populations in Lancaster County and the state.
2. Ensure efforts to address disproportionate minority representation continue.
3. Due to the high proportion of youth with mental health diagnoses, consider how to make mental health services and support for parents of such youth more readily available both prior to and during out-of-home placement episodes.

Definitions

- **FCRO** is the Foster Care Review Office, author of this report.
- **CFS** is the Department of Health and Human Services (**DHHS**) Division of Children and Family Services.
- **OJS** is the Department of Health and Human Services (DHHS) Office of Juvenile Services. **OJS** oversees the **YRTCs**, which are the Youth Rehabilitation and Treatment Centers at Geneva (girls) and Kearney (boys).
- **Probation** is a shortened reference to the Administrative Office of Juvenile Probation Administration.
- **Child** is defined by statute as being age birth through eighteen; in Nebraska a child becomes a legal adult on their 19th birthday.
- **Youth** is a term used by the FCRO in deference to the developmental stage of those involved with the juvenile justice system, who are normally age 14-18.
- **Out-of-home care** (OOH care) is 24-hour substitute care for children placed away from their parents or guardians and for whom the State agency has placement and care responsibility. This includes, but is not limited to, foster family homes, foster homes of relatives, group homes, emergency shelters, residential treatment facilities, child-care institutions, pre-adoptive homes, detention facilities, youth rehabilitation facilities, and runaways from any of those facility types. It includes court ordered placements and non-court cases.

The FCRO uses the term “out-of-home care” to avoid confusion because some researchers and groups define “**foster care**” narrowly to be only care in foster family homes, while the term “**out-of-home care**” is broader.

- A **trial home visit** (THV) by statute is a temporary placement with the parent from which the child was removed and during which placement the Court and DHHS/CFS remain involved.
- Neb. Rev. Stat. 71-1901(9) defines “**relative placement**” as that where the foster caregiver has a blood, marriage, or adoption relationship, and for Indian children they may also be an extended family member per **ICWA** (which is the Indian Child Welfare Act).
- Per Neb. Rev. Stat. 71-1901(7) “**kinship home**” means a home where a child or children receive foster care and at least one of the primary caretakers has previously lived with or is a trusted adult that has a preexisting, significant relationship with the child or children or a sibling of such child or children pursuant to section 43-1311.02.

Special Study: Re-entry into Out-of-Home Care

During calendar year 2017, 2,479 children entered out-of-home care through the child welfare system. Of that, 534 (21.5%) had been in out-of-home care at some earlier point in their life. This study examines the 534 children who re-entered in more detail.

Figure 1 includes all children who entered care in 2017, whether it was their first entry or any entry thereafter. **Figure 2** isolates the population of children who are re-entering care in 2017. The data show that children who re-entered care are disproportionately from the Eastern and Northern Service Areas, while the Central Service Area has a lower rate of re-entry.

Figure 1: All DHHS/CFS Wards Entering Care in 2017 by Service Area, n=2,479

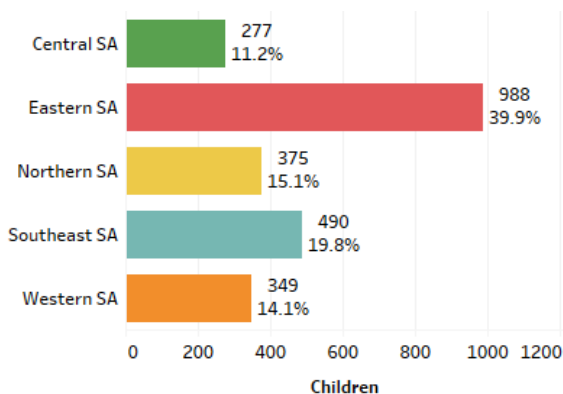
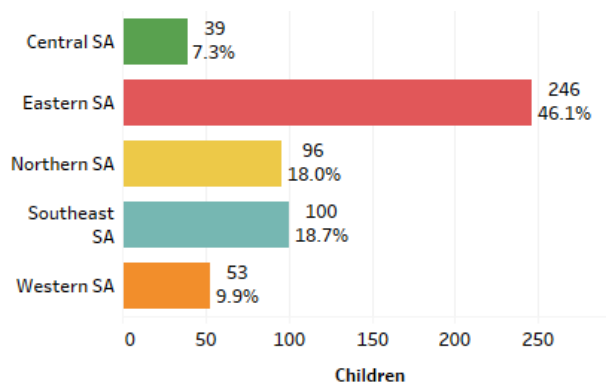


Figure 2: DHHS/CFS Wards Re-entering Care in 2017 by Service Area, n=534



Demographics

Demographically, children who re-enter care are similar to all children in out-of-home care in terms of racial and ethnic background and gender. Given that children who re-enter care will be older than when they first entered care (**Figure 3**), it logically follows that the re-entered population will have more children in the older age groups, as demonstrated in **Figure 4**.

Figure 3: Age at First Entry of DHHS/CFS Wards Re-entering Care in 2017, n=534

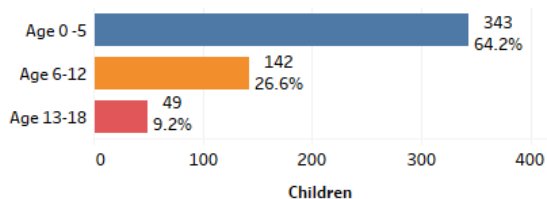
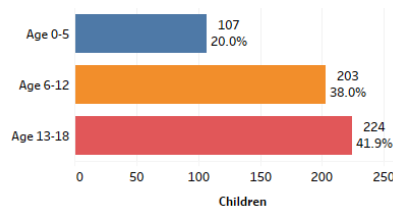


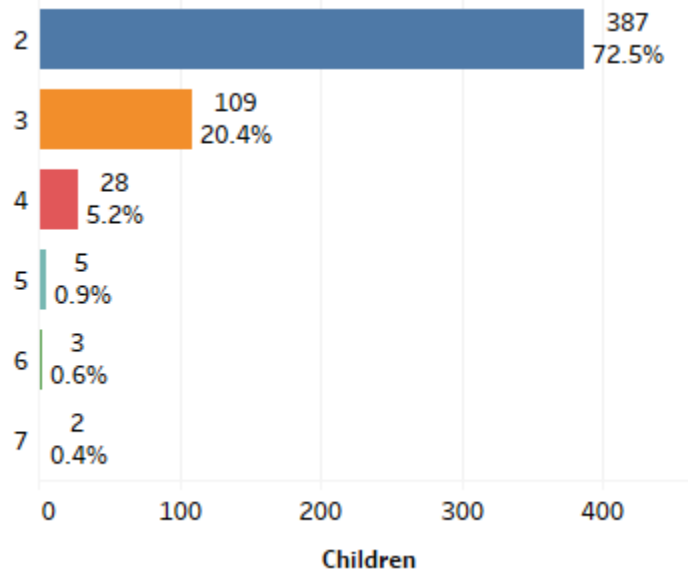
Figure 4: Current Age of DHHS/CFS Wards Re-entering Care in 2017, n=534



Times in Care and Placements

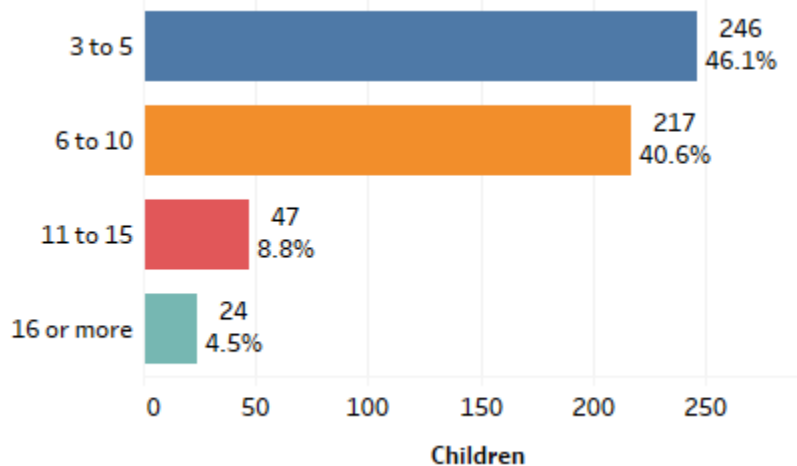
Research shows that entering foster care is traumatic for children. Recurrence of maltreatment and subsequent re-entry further compounds this trauma. As shown in **Figure 5**, 72.5% of the children who re-entered care are entering for the second time. Eight children have entered and exited care 5 or more times in their lifetime.

Figure 5: Times in Care Over Lifetime of DHHS/CFS Wards Re-entering Care in 2017, n=534



The minimum number of placements for a child who re-entered care is 3, with over half of the children re-entering care experiencing 6 or more placements over their lifetime. One child has had 49 placements while in care.

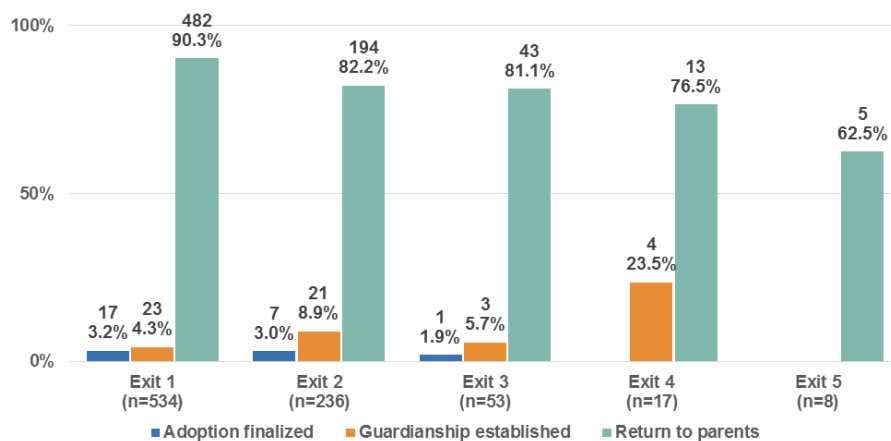
Figure 6: Lifetime Placements for DHHS/CFS Wards Re-entering Care in 2017, n=534



Exits from Care

Figure 7 shows the percentage of children who exit via adoption, guardianship, or reunification at each exit from care. Each time a child enters care, they are less likely to be reunified with their parents or be adopted.

Figure 7: Exit Reason for DHHS/CFS Wards Re-entering Care in 2017



Measuring Re-entry: CFSR and Lifetime Experiences

The Federal CFSR (Child and Family Services Review) requires states to report “for all children who entered foster care in a 12-month period who were discharged within 12 months of reunification, living with a relative, or guardianship, what percentage re-entered foster care within 12 months of their discharge.”¹ In other words,

- The CFSR only includes children that left care within 365 days of entry.
 - In Nebraska many children do not leave out-of-home care within a year.
- The CFSR does not include exits to adoption because many states are unable to tie pre-adoption and post-adoption cases.
 - In Nebraska adoption disruptions and dissolutions is a recognized issue.
- The CFSR includes only children that re-entered out-of-home care within 365 days of leaving.
 - In Nebraska many children that re-entered care do so over a longer time.

The FCRO is able to give a broader perspective, as it can research re-entries of all children, regardless of whether they left care within 12 months of removal or not, and regardless of reason for leaving care. The FCRO also looks at re-entry over the lifetime

¹ Capacity Building Center for States. CFSR Round 3 Statewide Data Indicator Series.

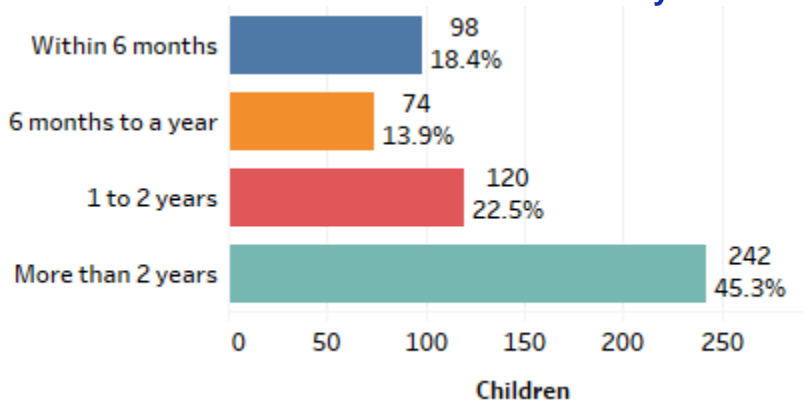
of the child. Using this definition, Nebraska's median time from first exit from care to second entry into care is **583 days (roughly 19 months)** so many children who re-enter would not be included in federal measurements.

The results of the most recent CFSR show that 7.5% of children who discharged from foster care experience re-entry into care in less than 12 months. This is, commendably, below the target level of 8.3%. However, from the more inclusive perspective used by the FCRO, while Nebraska may have done well with the federal measure, it has a large number of children that re-enter care.

Time between Exit and Re-Entry

As shown in **Figure 8**, nearly 68% of the children entered care the second time more than one year after they previously exited.

Figure 8: Time between First Exit and Second Entry into Care, n=534



Regardless of the amount of time from the first exit to the second entry, the majority of the children who re-entered were doing so after being reunified with their parents: 92.9% for those who re-entered within 6 months, 93.2% for those who re-entered within a year, 96.7% for those who re-entered in 2 years, and 85.1% for those who re-entered more than 2 years after their previous exit.

Of the children who re-entered care in calendar year 2017, **147 (27.5%)** have exited and re-entered the system at least twice. A very similar pattern emerges, wherein 64% of these children were in a permanent placement for more than a year before their third entry (**Figure 9**). And, once again, the majority were removed from their parents: 90.3% for those who re-entered within 6 months, 95.5% for those who re-entered within a year, 83.9% for those who re-entered within 2 years, and 81.0% for those who re-entered more than 2 years after their previous exit.

Figure 9: Time between Second Exit and Third Entry into Care, n=147

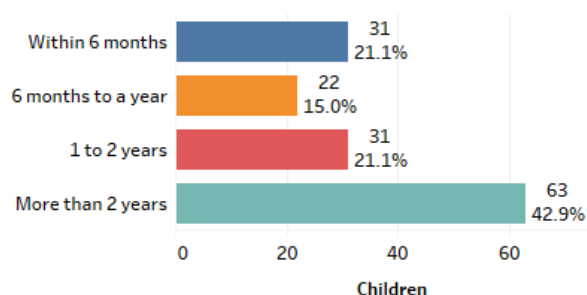
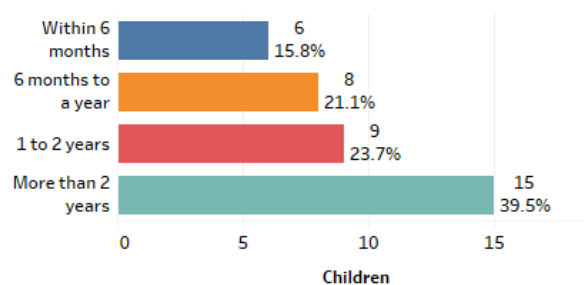


Figure 10: Time between Third Exit and Fourth Entry into Care, n=38



As shown in **Figure 10**, for those who have exited and re-entered the system at least three times (38, 7.1%), 63.2% were in a permanent placement for more than a year before their fourth entry. For those who re-entered more than 2 years after their previous exit, 80% were living with a parent.

Median Length of Episode

For children who have entered care twice, median months is only reported for episode 1 because a significant number are still in care, and therefore their episode 2 has not finalized. Children who have entered care 3 or more times spent less time in care during their first episode than those who have entered care only 2 times, as shown in **Figure 11**. This data may indicate that children and families are not receiving the appropriate services or have long-term supports in place upon exit.

Figure 11: Median Months of Episode by Times in Care

	Episode 1	Episode 2	Episode 3	Episode 4
2 Total Entries	10 months			
3 Total Entries	5.8 months	11 months		
4 Total Entries	5.8 months	6.3 months	11.5 months	
5 or more Entries	2 months	7.1 months	4.9 months	8.8 months

Reviewed Children: Reasons Entered Care

The Foster Care Review Office conducts case file reviews on state wards in out-of-home care or trial home visit for six months or more. Of the 534 children who re-entered care in 2017, 223 were reviewed by the FCRO between July 1, 2017 and January 31, 2018. When completing case reviews, FCRO Review Specialists track why a child entered care for the current episode, and if the child was in care previously, why they entered care during the first episode.

Figure 12 shows the most frequently occurring reasons for first removal for the 223 reviewed children. Children can be removed for multiple reasons; the children in this sample were removed for an average of 2.7 reasons in the first episode. Neglect was the most common reason for removal (129, 57.8%), followed by parent drug use (126, 56.5%), and domestic violence (58, 26.0%).

Figure 12: Reasons Entered Care First Episode, n=223

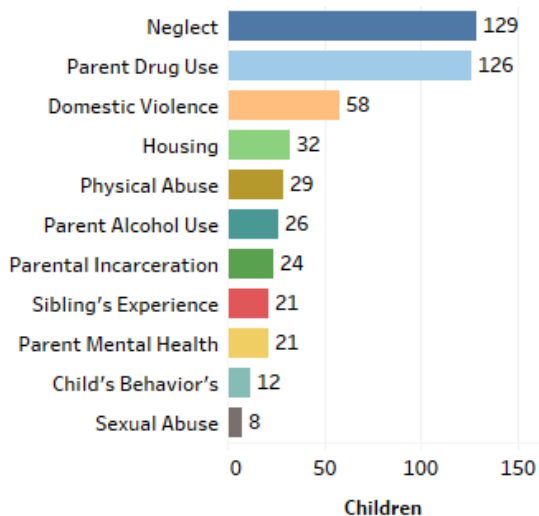
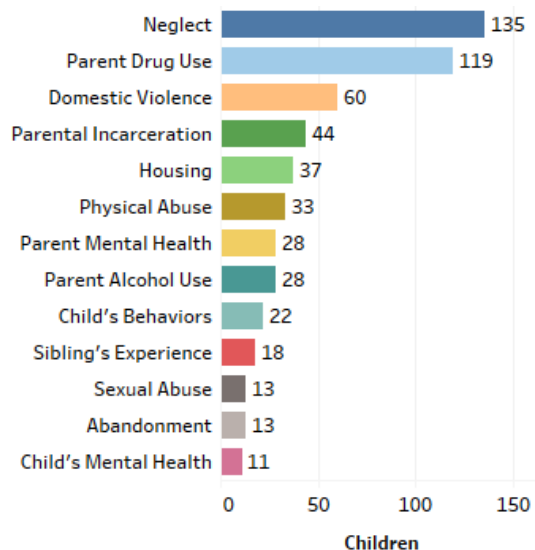


Figure 13: Reasons Entered Care Current Episode, n=223



The most common reasons for removal remain the same when analyzing the current episode, as shown in **Figure 13**. Neglect (135, 60.5%), parent drug use (119, 53.4%), and domestic violence (26.9%) are the most common reasons for removal, and the children reviewed were removed for an average of 3.1 reasons in the current episode. The likelihood of child's behaviors and child mental illness as a reason for removal is more common in the current episode than the first episode, which is likely connected to the ongoing trauma experienced by children who re-enter care.

The next step in understanding this data is to see if the same children are being removed for the same reasons across episodes. Correlational analysis indicates that,

yes, the same children are often removed for the same reasons at a later date. Nearly all reasons for the removal are correlated between the first and current episode.²

Neglect. For the 129 children removed for neglect in the first episode, **99 or 76.7%** were removed for neglect in the second episode. As discussed in the FCRO 2017 Annual Report, neglect is often a symptom of an underlying condition, such as parental mental health, substance abuse, domestic violence, or poverty.

Substance Abuse. For the 126 children removed from the home for parental drug use in the first episode, **95 or 75.4%** were removed for parental drug use in the second episode. Meth was the most common substance used by parents (80 of 126 in the first episode and 75 of 119 in the current episode). For the 80 who entered care because of parent meth use in the first episode, **57 or 71.2%**, entered care because of parent meth use in the current episode.

Domestic Violence. For the 58 children who entered care the first time due to domestic violence in the home, **33 or 56.9%** were in care due to current issues of domestic violence.

Given both the complicated nature of neglect, substance abuse, and domestic violence, the likelihood of these issues recurring across multiple episodes, and the extended length of time between exit and re-entry into care, it is important that when a child welfare case is closed, families have identified long-term support systems external to the State child welfare system.

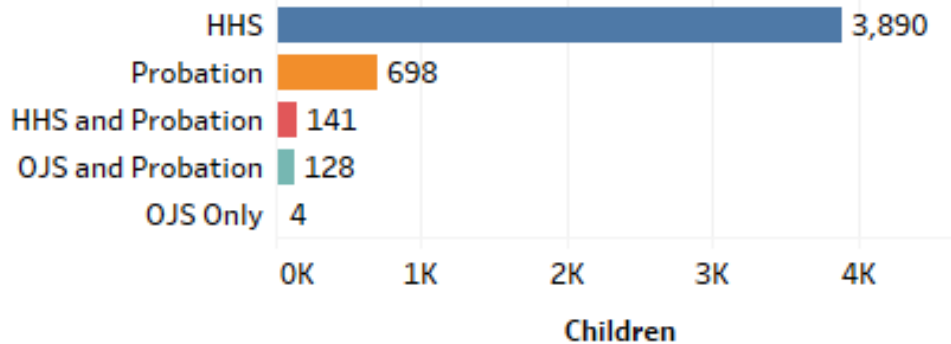
² The FCRO can provide full correlational table, results will be described only for the most common removal reasons here.

All Children in Out-of-Home Care By Agency Involved With Their Case

On the last day of the most recently completed quarter (12/31/2017), the **4,861 children** in out-of-home care could be divided into the following groups:

- **3,890 children** that were DHHS/CFS wards in out-of-home care or trial home visits which had no simultaneous involvement with the Office of Juvenile Probation Administration (hereafter referred to simply as Probation).
- **698 youth** that were in out-of-home care while supervised by Probation, but were not simultaneously involved with DHHS/CFS or at the YRTC's.
- **141 youth** in out-of-home care or trial home visits that were involved with DHHS/CFS and Probation simultaneously.
- **128 youth** in out-of-home care that were involved with both DHHS/OJS and Probation, including 117 at the YRTC's and 11 in other placements.
- **4 children** in out-of-home care that were served by DHHS/OJS only.

Figure 15: Children in Care on 12/31/2017 by Agency Involvement, n=4,861

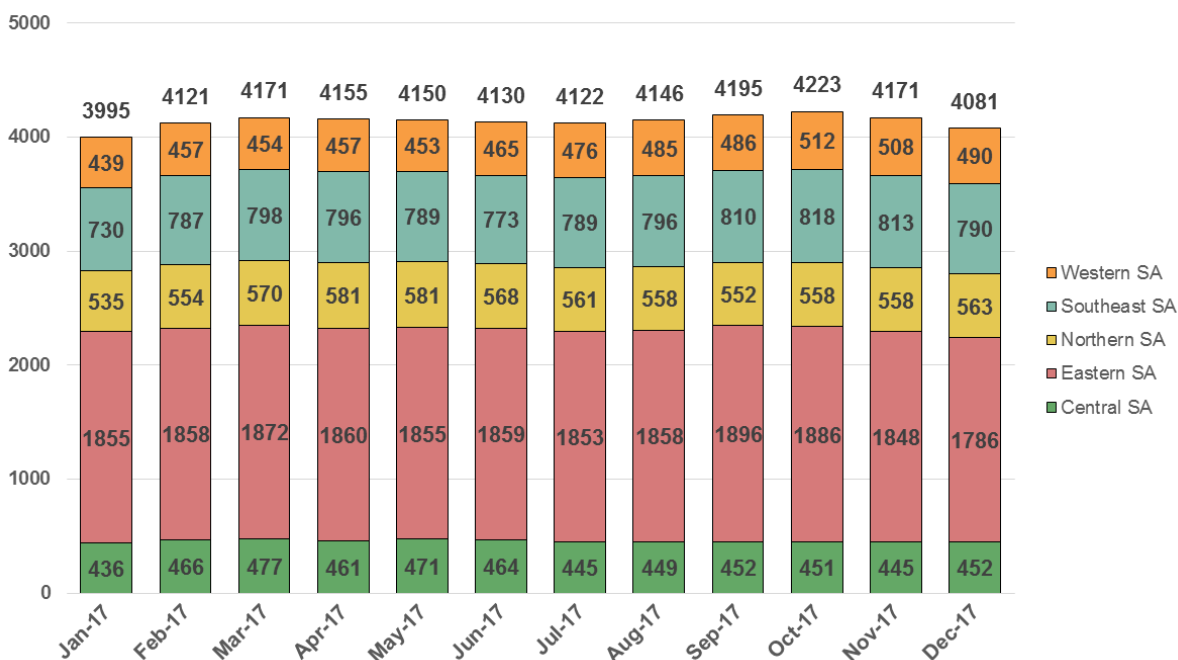


Average Daily Population of Children with any DHHS/CFS Involvement

Daily population

Figure 16 shows the fluctuations in average daily population (ADP) per month of DHHS/CFS involved children in out-of-home or trial home visit placements over the course of the last 12 months. ADP data below includes any child in an out-of-home or trial home visit placed that has an active child welfare case; therefore, the data in **Figure 16** includes youth who are dually involved with DHHS/CFS and Probation, and also youth at the YRTCs that have an active child welfare case.

Figure 16: Average Daily Population of All DHHS/CFS Involved Children in Out-of-Home or Trial Home Visit Placements – (includes children with simultaneous involvement with Probation)³



³ The FCRO's FCTS data system is a dynamic computer system that occasionally receives reports on children's entries, changes, or exits long after the event took place. The FCRO also has a robust internal CQI process that can catch and reverse many errors in children's records regardless of the cause and that works to create the most accurate data possible. Therefore, due to delayed reporting and internal CQI some of the numbers on this report will not exactly match that of previous reports.

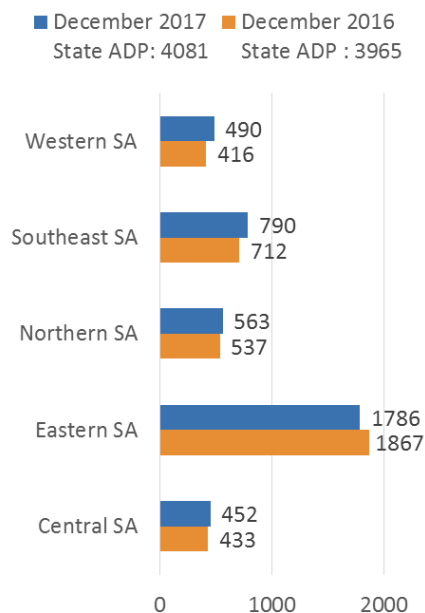
Some expected cycles that impact the numbers of children in foster care throughout the year include:

- When school starts in the fall more children are seen by adults outside the home. Reports of abuse and neglect tend to go up then and so does the population in out-of-home care.
- Near the winter holidays many children are returned home or have adoptions or guardianships finalized, so the number in out-of-home care typically falls.
- As school starts again in January, and winter adds to the impact of poverty (such as a lack of heat or adequate winter clothing), the number typically goes up again.
- Many children are returned home at the end of the school term, so numbers tend to fall at that time.

These fluctuations are apparent in the yearly chart shown previously.

Another perspective is to compare December 2017 to December 2016, as shown in **Figure 17** below. Statewide, there was an average of 116 more children in care in December 2017 than in December 2016. **Figure 17** also shows differences by DHHS Service Area.

Figure 17: December to December Comparison All DHHS/CFS Involved Children in Out-of-Home or Trial Home Visit Placements –
(includes children with simultaneous involvement with Probation)⁴



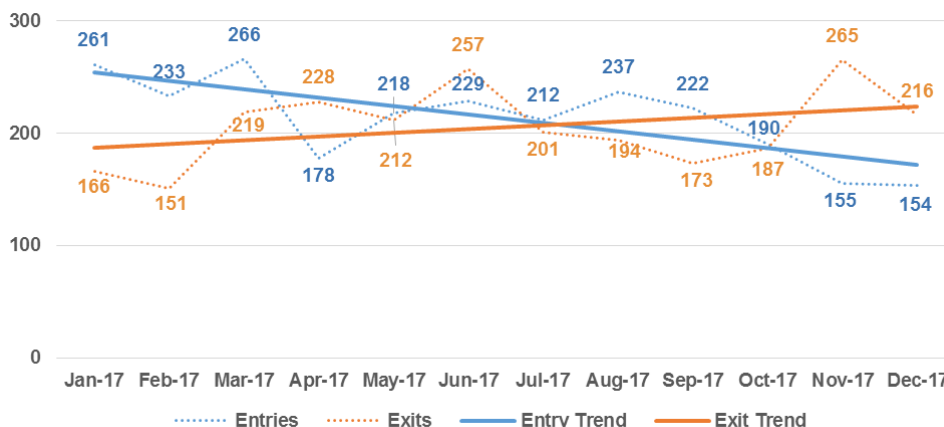
Daily populations are impacted by the number of children entering care, the length of time children remain in care, and the number of children leaving care.

⁴ Ibid.

Entries and Exits

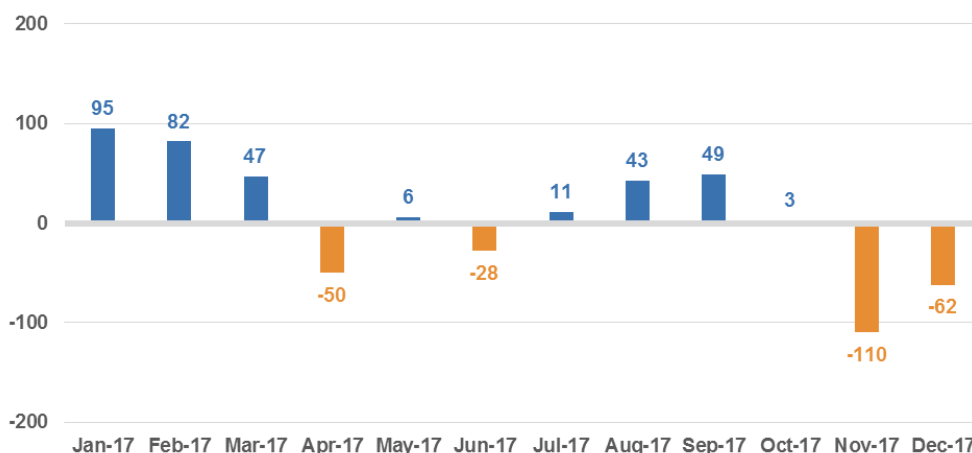
Figure 18 shows monthly variations in entries and exists of children with DHHS/CFS involvement. Over the last year, the trend of entries outpacing exits has reversed. In November and December, significantly more children exited the foster care system than entered, however this may be due to the seasonal changes discussed above.⁵

Figure 18: Statewide Entrances and Exits of DHHS/CFS Involved Children
(includes children with simultaneous involvement with Probation)



Another way to view monthly differences is found in **Figure 19**, with positive values indicating more exits than entrances, and negative values indicating more children coming into the system than leaving.

Figure 19: Statewide Net Entrances and Exits of DHHS/CFS Involved Children
(includes children with simultaneous involvement with Probation)



⁵ This data can be isolated by DHHS/CFS service area, and is available on request. See the last page for updated FCRO contact information.

Figures 20 and 21 below are an overview of Entries and Exits, illustrating how each service area impacted the statewide totals. The Eastern and Southeast areas, which are the most populous, have the most impact on statewide totals. Monthly changes in exits and entries are not isolated to a single service area; all service areas follow very similar patterns.

Figure 20: Entries by Service Area

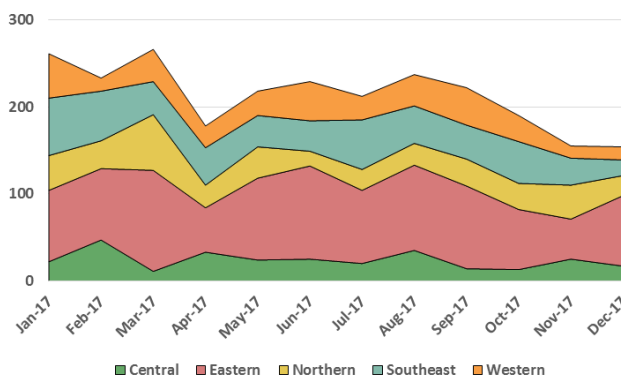
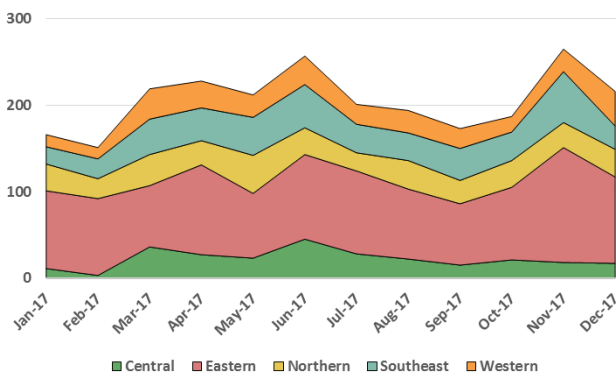


Figure 21: Exits by Service Area



While the number in care is important, it is also important to ensure:

1. Every child that needs the safety of an out-of-home placement is in a safe and appropriate placement.
2. Children and families receive adequate and timely services to address reasons for removal and any associated trauma.
3. Foster care is for the shortest possible time but still provides for children’s best interests

Children Solely Involved with DHHS/CFS – Point-in-time (Single Day) View

Single day data on DHHS/CFS wards in this section includes only those children whose involvement is just with DHHS/CFS and no other state agency. Those wards (children), as reported to and tracked by the FCRO, can either be in an out-of-home placement or a trial home visit.

Figure 22 compares the combined number of DHHS/CFS children in out-of-home (OOH) or trial home visit (THV) placement on the last day of prior fiscal quarters.

**Figure 22: DHHS/CFS Ward Population in OOH or THV Placement
at the End of Each Fiscal Quarter**

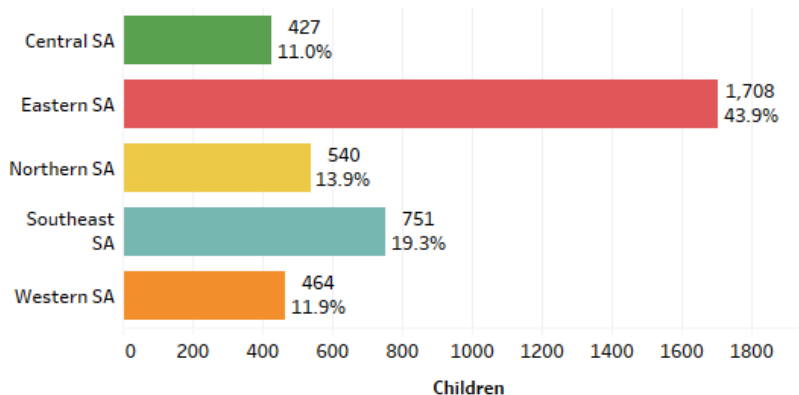
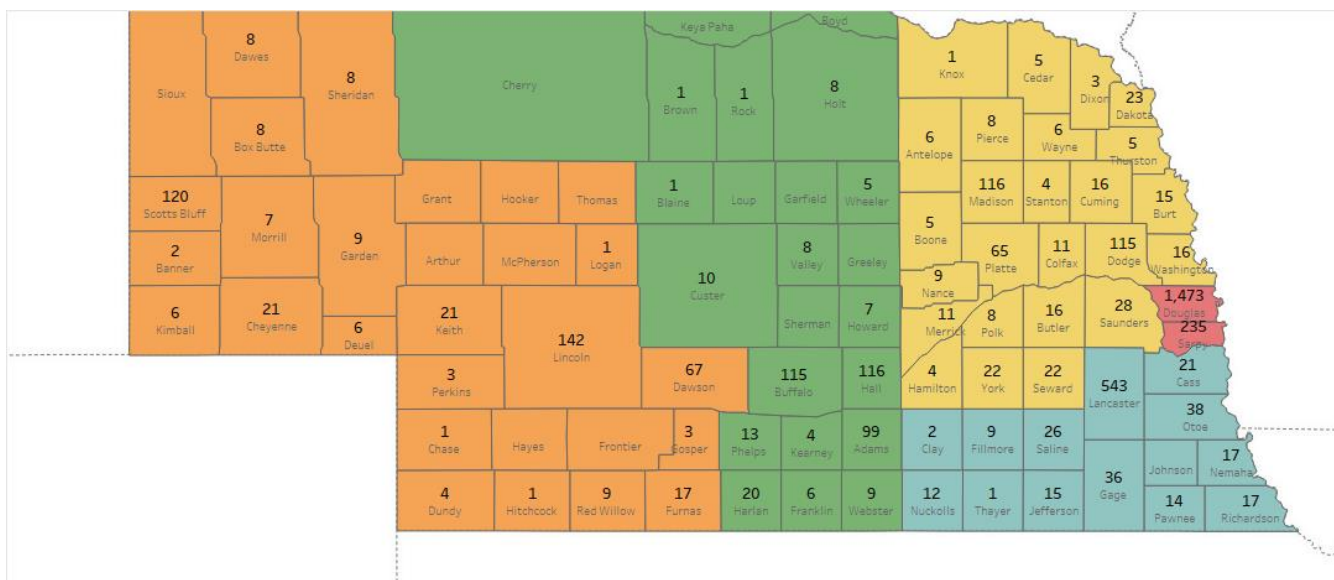
Quarter Ending	Children in Care
Dec. 31, 2017	3,890
Sept. 30, 2017	3,960
June 30, 2017	3,915
Mar. 31, 2017	3,973
Dec. 31, 2016	3,808
Sept. 30, 2016	3,824

The remainder of this section will focus on children in out-of-home or trial home visit placement on 12/31/2017.

Children's geographic location of origin

DHHS/CFS wards in out-of-home care or trial home visit come from every geographic area, from Omaha to Scottsbluff, Falls City to Chadron, and South Sioux City to McCook. **Figure 23** shows the 3,890 DHHS/CFS wards by county and the region. As expected, most of the children are from the two largest urban areas (Omaha and Lincoln, in the Eastern and Southeast Service Areas respectively).

Figure 23: DHHS/CFS Wards in Out-of-Home or Trial Home Visit Placement on 12/31/2017 by DHHS Service Area, n=3,890



Counties without numbers have no children in out-of-home care or trial home visit on December 31, 2017.

Demographics of DHHS wards (children) in care 12/31/2017

The demographics of children in out-of-home care and trial home visit have not changed since the 2017 Annual Report. Girls and boys are equally represented in the population of children in care. Consistent with past reports, approximately 41% of children in care are 5 and under, 36% are between 6 and 12, and 23% are teenagers.

There is still racial disparity when compared to the Census figures for children in Nebraska, particularly for Black and Native children⁶ as shown in **Figure 24**.

Figure 24: Race/Ethnicity of DHHS/CFS Wards in Out-of-Home or Trial Home Visit Placement on 12/31/2017, n=3,890

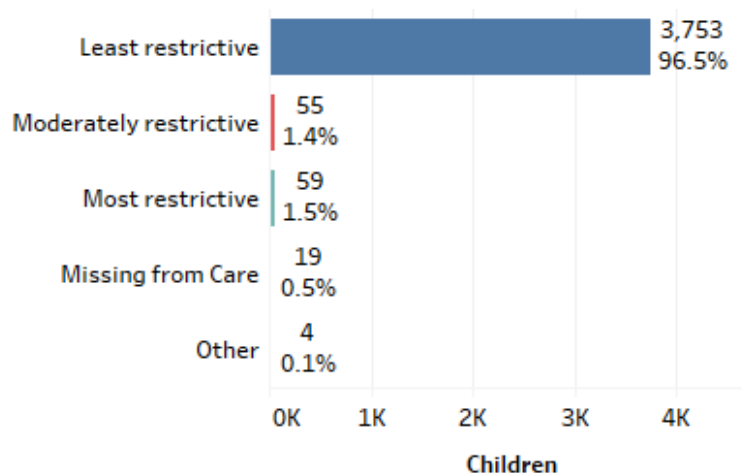
White	2,451	63.0%
Black or African American	564	14.5%
Two or more races	490	12.6%
American Indian and Alaska Native	232	6.0%
Asian	31	0.8%
Native Hawaiian and Other Pacific Islander	11	0.3%
Unknown or Other	111	2.9%
Hispanic	794	20.4%
Not Hispanic	2,561	65.8%
Unable to determine	535	13.8%

⁶ See past FCRO Annual Reports, as found at www.fcro.nebraska.gov.

Restrictiveness level of children’s placements

Figure 25 shows that most (3,198 or 96.5%) of the 3,890 DHHS/CFS wards in out-of-home placements or trial home visits were placed in a family-like, least restrictive setting. Moderate or most restrictive placements should be reserved for children who need more intensive levels of treatment or different types of services within their placement.

Figure 25: Placement Restrictiveness for DHSS/CFS Wards in Out-of-home or Trial Home Placements on 12/31/2017 n=3,890



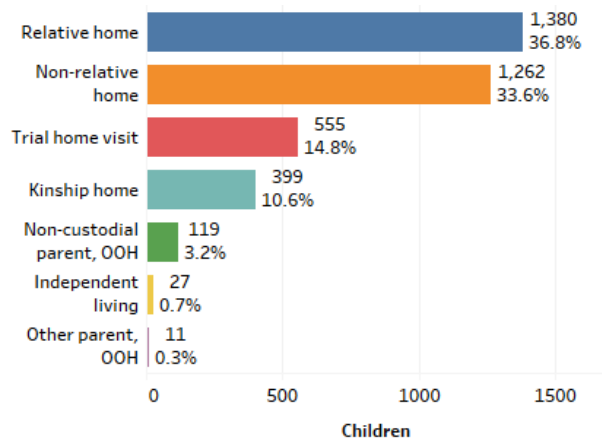
“Least Restrictive” above includes 555 children in trial home visit. “Other” includes 2 children with specific placement type not reported as of 12/31/2017 and 2 children abducted by parent. Children “missing from care” and abducted by parent must always be a top priority as their safety cannot be assured.

The proportion of wards in the least restrictive settings remains steady from 6/30/2017.

Relative or kinship placements

“Relative” is defined in statute as a blood relationship, while “kin” in Nebraska is defined as fictive relatives, such as a coach or teacher, who by statute are to have had a prior positive relationship with the child (see definitions page). **Figure 26** shows that the majority of children in a foster home are placed with non-parent relatives or kin.

Figure 26: Specific Placement Type for DHHS/CFS Wards in the Least Restrictive Placement Category on 12/31/2017, n=3,753



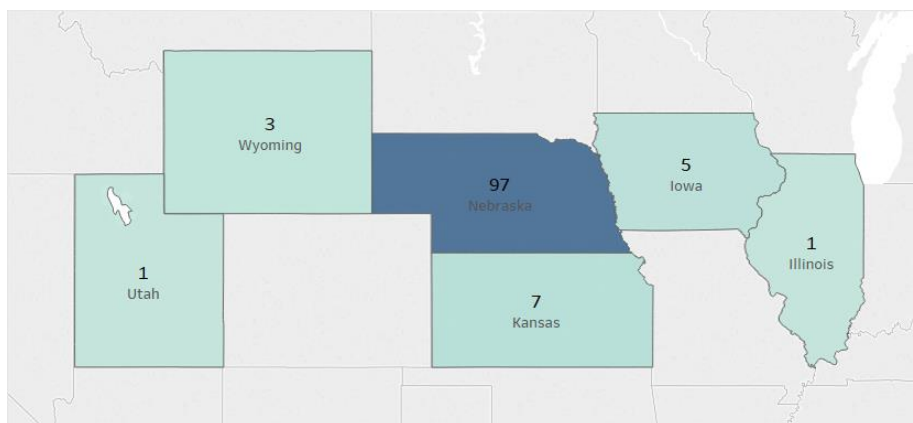
“Non-custodial parent out-of-home” refers to instances where children were removed from one parent and placed with the other but legal issues around custody have yet to be resolved.
 “Independent living” is for teens nearing adulthood, such as those in a college dorm or apartment.

States where children are placed

Figure 27 shows states where the 114 DHHS/CFS wards in congregate (group) facilities are placed. Most are in Nebraska. The majority of those in other states are in bordering states.

Congregate (group) care can involve high level treatment facilities (such as Psychiatric Residential Treatment Facility (PRTF) or Institute for Mental Disease (IMD)), boarding or other non-treatment group homes, emergency shelters, detention or other juvenile justice related facilities, or other specialized facilities. Further detail is available upon request.

Figure 27: State of Placement for DHHS/CFS Wards in Congregate Care on 12/31/2017, n=114



Lifetime numbers of workers

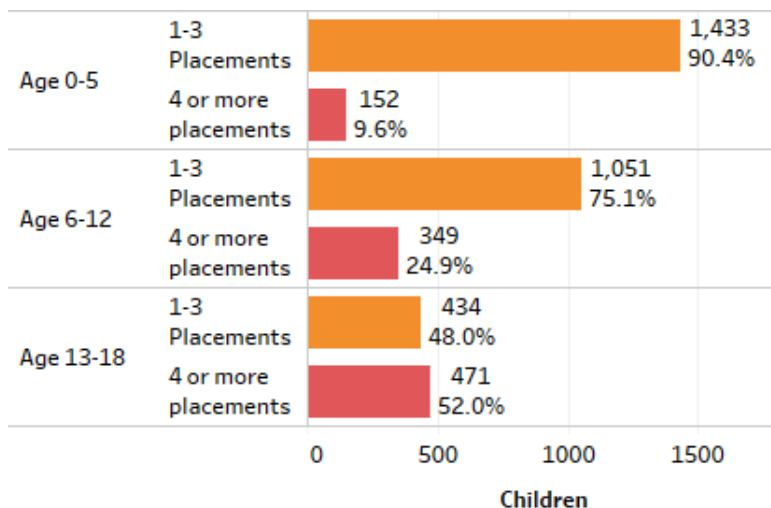
On December 1, 2017, the Nebraska Families Collaborative, the private contractor responsible for case management in the Eastern Service Area, changed its name to PromiseShip. While the name change did not affect the services provided to children and families, it did create a technical glitch in the worker change reports from DHHS to the FCRO that impacted the FCRO’s ability to track the number of case managers assigned to a child. Since the FCRO is unable to accurately report the number of case managers in this report, it will be omitted for this quarter.

The FCRO remains committed to monitoring and reporting the number of case managers involved in a child’s case; research is clear that consistency in case management is beneficial for children and families, while disruptions have significant negative consequences on the timeliness and outcomes of a case. We are currently collaborating with DHHS and PromiseShip to correct this error and expect to resume reporting case manager data in the FCRO’s June 2018 quarterly report.

Multiple placement moves

It is significant that 972 (25.0%) of Nebraska’s DHHS/CFS wards experienced four or more placement moves over their lifetime (**Figure 28**). This does not include placements with parents, respite short-term term placements (such as to allow foster parents to jointly attend a training) or episodes of being missing from care. **Figure 28** also shows that 9.6% young children have experienced a high level of placement change. Please refer to the FCRO 2017 Annual Report for more information on the impact of placement changes on children.

Figure 28: Lifetime Placement Moves for DHHS/CFS wards in Out-of-Home or Trial Home Visit on 12/31/2017, n=3,890



Lifetime episodes involving a removal from the home

The special study on pages 8 through 14 of this report describes re-entry in detail.

FCRO Review Data Gathered on Children Solely Involved with DHHS/CFS

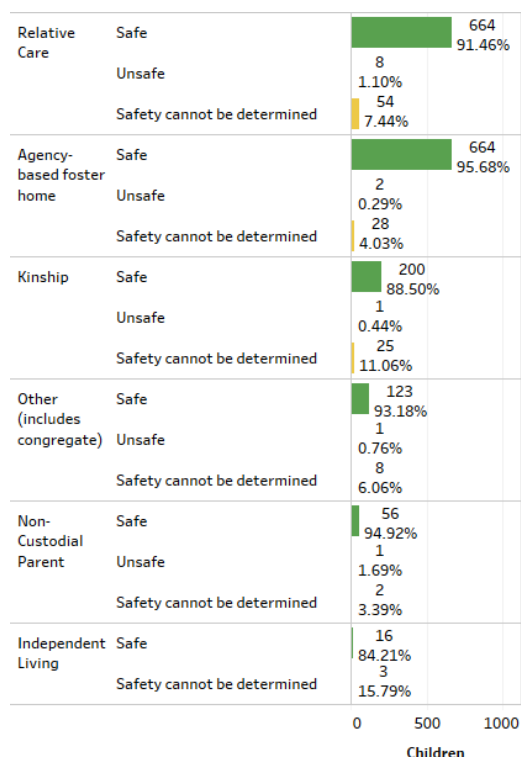
Data in this section is from FCRO case file reviews conducted between 7/1/2017 and 12/31/2017 on 1,876 DHHS/CFS wards in an out-of-home placement.

Placement safety

All children in out-of-home care under the supervision of the State should be in a placement that is clearly shown to be safe. Of the 1,876 children reviewed, 92.8% were deemed safe on the day of their FCRO case file review. As shown in **Figure 29**, 13 children were currently in a placement deemed unsafe (plus there were 20 children missing from care and thus unsafe). The majority of those children were in relative care. If children’s placements are found unsafe FCRO staff immediately take action by contacting the caseworker, contacting the GAL, or other appropriate measures.

Another 120 children’s files did not contain adequate information on which to assure safety. If there is not adequate information on which to assure safety, that is brought to the attention of the appropriate legal parties to the children’s case. The FCRO continues to work with the system to ensure adequate assessments of safety are made and are available for review.

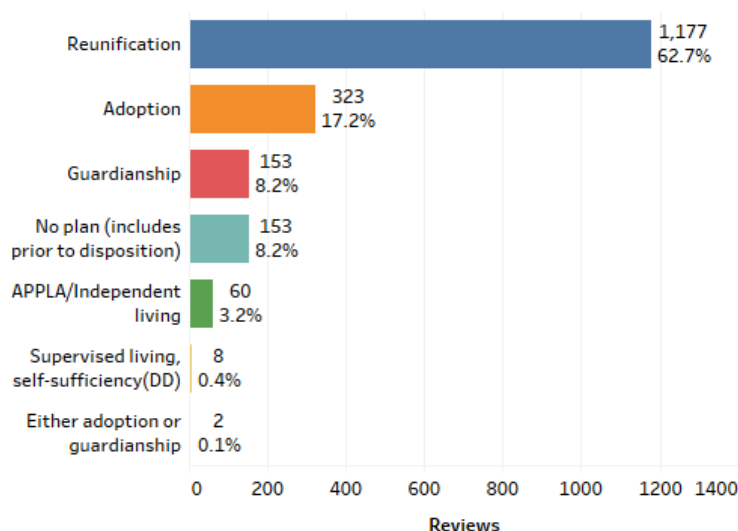
Figure 29: Safety of the Current Out-of-home Placement for DHHS/CFS Wards Reviewed by the FCRO between 7/1/2017 and 12/31/2017 by Placement Category, (excludes children missing from care), n= 1,856



Permanency objective

Figure 30 shows the primary permanency plan objective for children in out-of-home care reviewed by the FCRO between 7/1/2017 and 12/31/2017. Reunification is the most common plan, followed by adoption and guardianship.

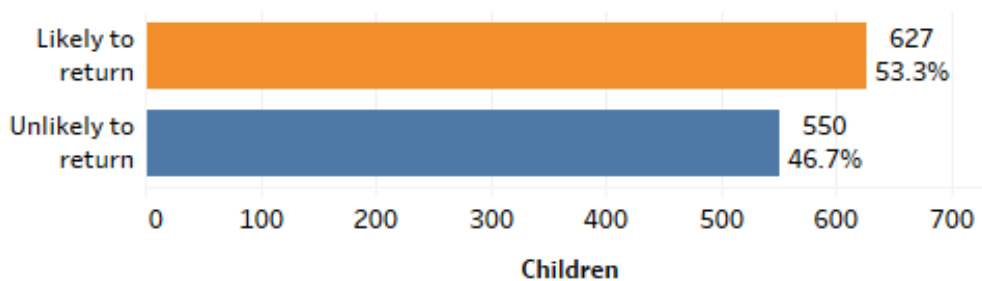
Figure 30: Primary Permanency Plan for DHHS/CFS Wards in Out-of-home Care Reviewed by the FCRO between 7/1/2017 and 12/31/2017, n=1,876



Likelihood of return home

Per **Figure 31**, it was found that 627 (53.3%) of the 1,177 children with a plan of reunification were likely to return to the parents, and 550 (46.7%) were unlikely to return to parents. Even when parents have indicated verbally or by their actions or inactions that they either cannot or will not safely parent, plans typically remain reunification until the children have been in care for at least 15 months.

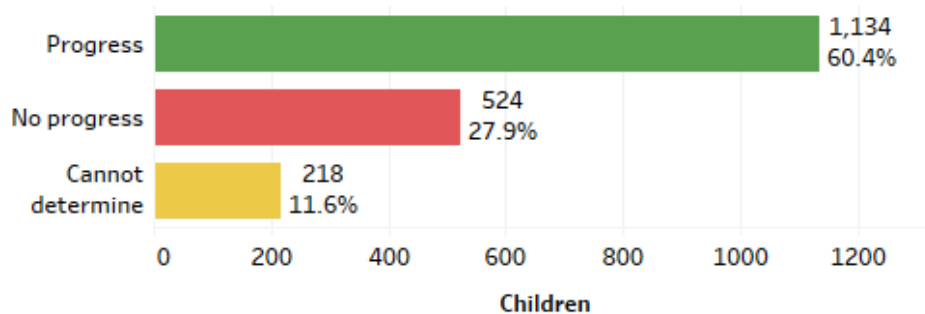
Figure 31: Likelihood of Return to Parent for DHHS/CFS Wards in Out-of-home Care that had a Plan of Reunification Reviewed by the FCRO between 7/1/2017 and 12/31/2017, n=1,177



Progress to permanency

Another of the required findings that local board members make at each review is whether there is progress being made toward permanency (regardless of what that goal may be), as shown in **Figure 32**. This finding is made after considering all available documentation and stakeholder information.

Figure 32: Progress Towards Permanency Goal for DHHS/CFS Wards in Out-of-home Care Reviewed by the FCRO between 7/1/2017 and 12/31/2017, n=1,876



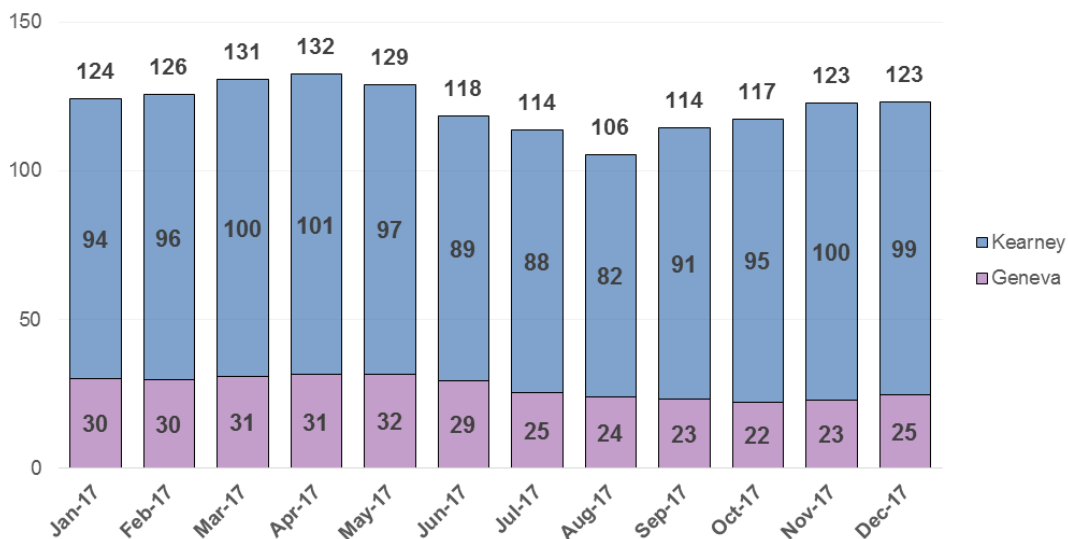
For 1 in 4 children reviewed there was no progress towards permanency. There can be a number of reasons for this, including parental actions/inactions and systemic issues more thoroughly described in the FCRO's annual reports. The percentages shown here are also related to the previously described issue of plans remaining Reunification even when no progress is being made.

DHHS/OJS Youth at One of the Youth Rehabilitation and Treatment Centers (YRTC's)

Placement at a Rehabilitation and Treatment Center is the most restrictive type of placement, and by statute is to be reserved for those youth whose behavioral issues have not been successfully treated in a less restrictive placement. The DHHS Office of Juvenile Services (OJS) is responsible for the YRTC's in Kearney where boys are placed and Geneva where girls are placed.

Figure 33 shows the average daily number of OJS wards at each of YRTC's for the last several months.

Figure 33: Average Daily Number of OJS Wards Placed at a Youth Rehabilitation and Treatment Center



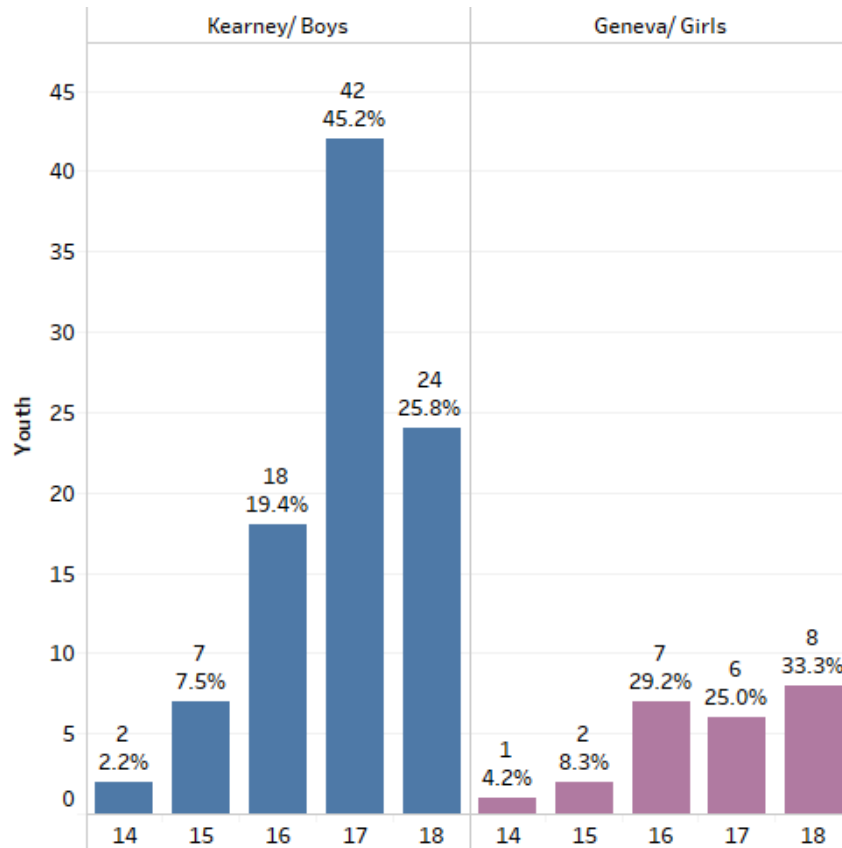
On 12/31/2017 there were 117 wards at the YRTC's, including 93 boys at Kearney and 24 girls at Geneva, which is more than four times as many boys as girls committed. This is consistent with national trends.⁷

⁷ OJJDP "Girls in the Juvenile Justice System."

Age and gender of youth at the YRTC's

Per Neb. Rev. Stat. §43-251.01(4), youth committed to a youth rehabilitation and treatment center (and thus under OJS) must be at least 14 years of age. See **Figure 36** for more details on the age distributions.

Figure 36: Ages of Youth Placed at a Youth Rehabilitation and Treatment Center under DHHS/OJS on 12/31/2017, n=117



Race/ethnicity of youth at the YRTC's

As with other segments of the populations discussed in this report, there is racial disproportionality of youth at the YRTC's, in particular Black and Native youth are overrepresented.

Figure 37: Race/Ethnicity of Youth Placed at a Youth Rehabilitation and Treatment Center under DHHS/OJS on 12/31/2017, n=117

Kearney/ Boys	American Indian and Alaska Native	6	6.5%
	Black or African American	28	30.1%
	Two or more races	6	6.5%
	Unknown or Other	10	10.8%
	White	43	46.2%
	Total	93	100.0%
Geneva/ Girls	American Indian and Alaska Native	2	8.3%
	Black or African American	7	29.2%
	Two or more races	2	8.3%
	Unknown or Other	2	8.3%
	White	11	45.8%
	Total	24	100.0%
Kearney/ Boys	Hispanic	17	18.3%
	Not Hispanic	60	64.5%
	Unable to determine	16	17.2%
	Total	93	100.0%
Geneva/ Girls	Hispanic	2	8.3%
	Not Hispanic	16	66.7%
	Unable to determine	6	25.0%
	Total	24	100.0%

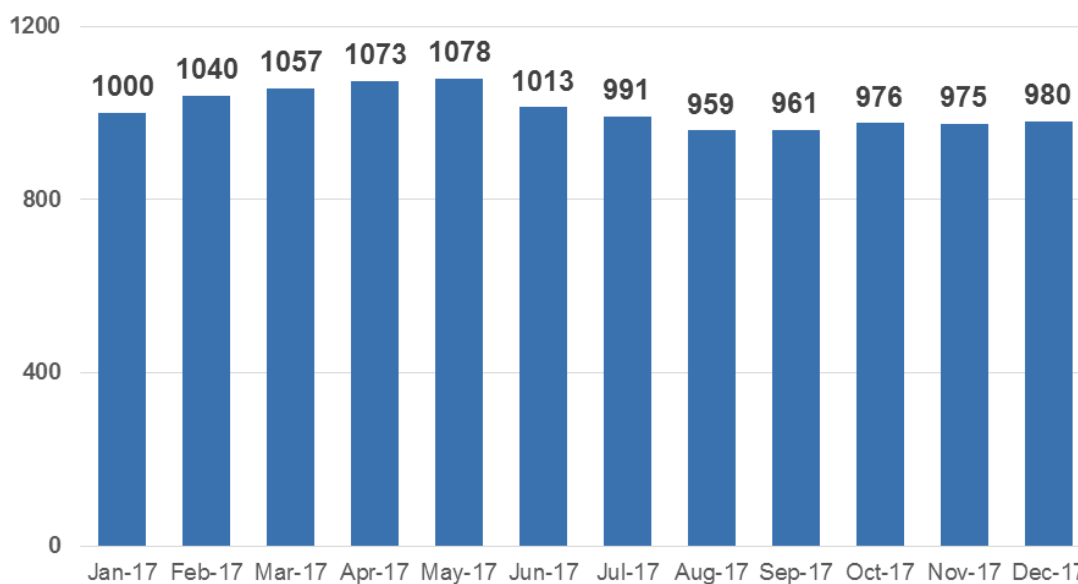
Average Daily Population for Youth With any Probation Involvement

Average daily population

Figure 38 shows the average daily population (ADP) per month of all Probation-involved youth in out-of-home placements for the last 12 months. The ADP includes any youth who was in an out-of-home placement and had an active Probation case, therefore the data in **Figure 38** include youth who are dually involved with Probation and DHHS/CFS.

Using ADP data, as opposed to a single-day snapshot information, allows for a more complete understanding of patterns over time with the risk of presenting outlier information by inadvertently selecting a day with a much higher or much lower than normal number of youth in an out-of-home placement.

Figure 38: Average Daily Population of Youth in Out-of-Home Care Supervised by Probation

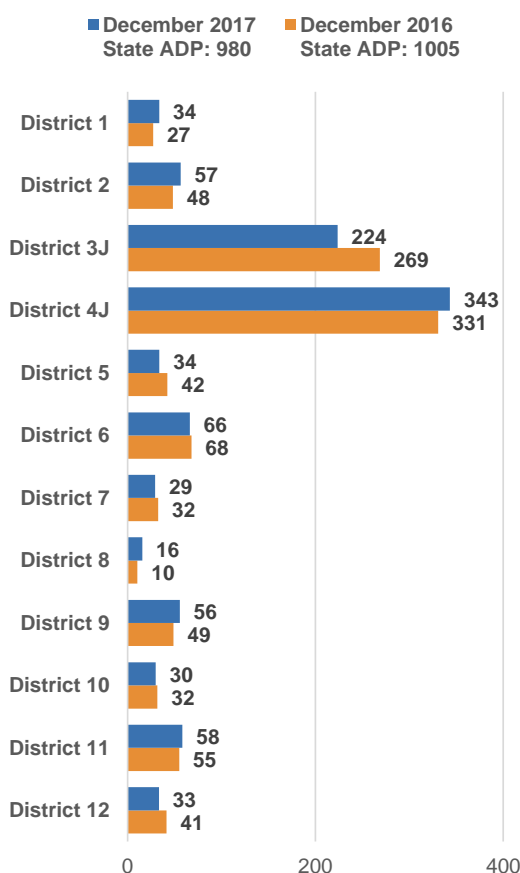


The juvenile justice population is different from the child welfare population in several key ways. One, as demonstrated in the figure above, is that the seasonal patterns are different. We do not see, nor should we expect to see, significant drops in the number of youth placed out-of-home during November and December as can be true with the child welfare population.

December to December Comparison

Another perspective is to compare December 2017 to December 2016, as shown in **Figure 39** below. Statewide, there was an average of 25 fewer Probation supervised youth in out-of-home care in December 2017 than in December 2016. **Figure 39** also shows differences by district (See **Figure 40** on page 37 for a map of Judicial Districts). In particular, District 3J (Lancaster County) had a significant reduction in the out-of-home population over the year. The FCRO has repeatedly noted the disproportionate number of youth out-of-home in District 3J and commends those working to reduce this population. Below is a description of the efforts that have taken place, as described by the Administrative Office of Probation, Juvenile Services Division.

Figure 39: December to December Comparison



The following information was provided by the Administrative Office of Probation – Juvenile Division:

Many efforts have been made statewide to reduce out-of-home placements, including specific efforts in Lancaster County, Probation District 3J that have resulted in a significant reduction in the Average Daily Population (ADP) over this past year. This

impact is a result of targeting specific populations of youth, strong judicial leadership, stakeholder collaboration, and engaging and partnering with national experts.

Youth in Need of Supervision and Support (YINSS) Pilot

- *Use of a new assessment tool for status youth - Juvenile Inventory for Functioning (JIFF), currently reassessment results show youth improved functioning in all twelve problem areas.*
- *Unified collaboration with Separate Juvenile Court Judges, the Lancaster County Attorney, Lincoln Public Schools Administration, and Probation (Administrative and District) convened over two years specifically focused on the status youth population.*
- *Specific pilot outcomes: Up to 5 months reduction in time on probation, a 66% reduction in the utilization of out-of-home placement for youth placed on probation for status related acts.*

Probation Officer Service Recommendation Matrix Pilot

- *Development of an Probation decision making tool to support recommendations from probation officers to ensure matching services to youths specific risk and need factors.*

Out-of-home Reduction Plans

- *Individualized Probation District plans focused on community-based service utilization and intensive planning for youth transitioning back into the community.*

National Stakeholder Partnerships - Probation District 3J

- *The Robert F. Kennedy National Resource Center for Juvenile Justice – Lancaster County Probation System Review*
- *Annie E. Casey Foundation - Lancaster County - Juvenile Detention Alternatives Initiative (JDAI) site*
- *Georgetown, Center For Juvenile Justice Reform - Lancaster County - Crossover Youth Practice Model (CYPM) site*
- *The Casey Family Program - Supported a team including probation, the judiciary, court improvement and Office of Juvenile Services to Santa Clara County, California to observe best practices for consideration.*

The Administrative Office of Probation, Juvenile Services Division and the 12 Probation Districts are committed to juvenile justice reform through serving youth in their communities and reducing the utilization of out-of-home placements.

Youth in Out-of-Home Care Solely Supervised by the Office of Juvenile Probation

Single-day data on Probation involved youth in an out-of-home placement here includes only those youth whose involvement is solely with Probation. Youth with Probation involvement that are not placed out-of-home are not subject to review or tracking by the FCRO, and thus are not included in this Report.

Youth’s geographic location of origin

Figure 40 shows the Probation district and the county of court, for the 698 Probation youth in out-of-home care on 12/31/2017 that are not involved with either DHHS/CFS or DHHS/OJS. Juvenile Probation Districts by statute are different than the regions used for DHHS/CFS wards. Aggregated totals by District are on the next page in **Figure 41**.

Figure 40: County of Origin for Probation Supervised Youth in Out-of-Home Care on 12/31/2017, n=698

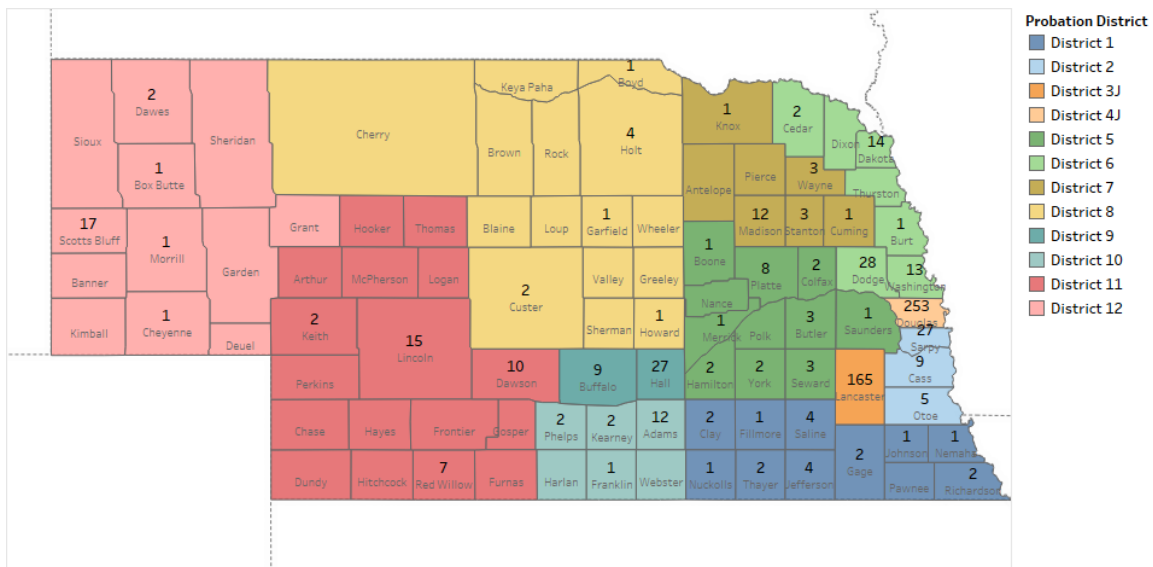
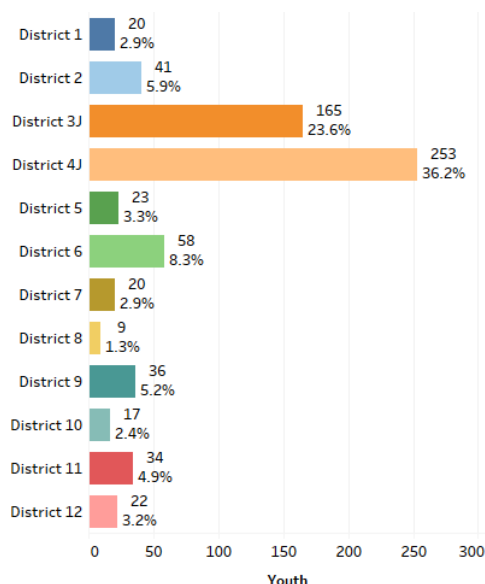


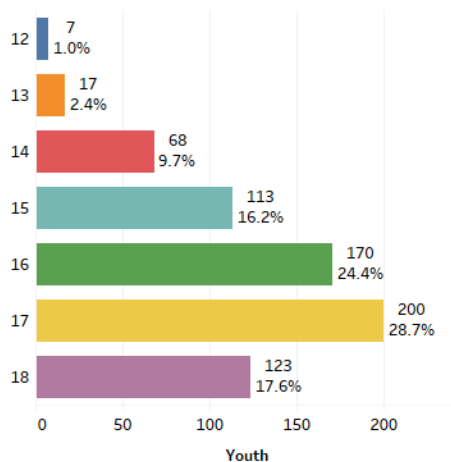
Figure 41: District for Probation Supervised Youth in Out-of-Home Care on 12/31/2017, n=698



Age

Figure 42 shows the ages of Probation youth in out-of-home care on 12/31/2017. It is important to note that 205 (29.4%) were under age 16. In comparison, on 3/31/2017 28.6% of the youth in out-of-home care under the supervision of Probation were under age 16. The FCRO and other advocates have raised questions regarding which is the best system to deal with the youngest court-involved youth and their families because there is a strong correlation between early traumatic events and juvenile delinquency, particularly multiple childhood victimizations and dysfunctional families.⁸

Figure 42: Age of Probation Supervised Youth in Out-of-home Care on 12/31/2017, n=698

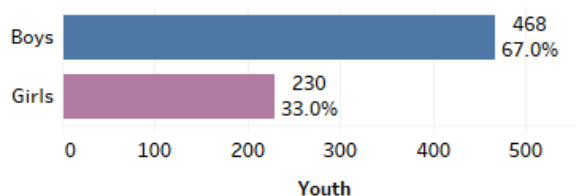


⁸ National Child Traumatic Stress Network “Victimization and Juvenile Offending” 2016, among many others.

Gender

There are over twice as many boys (67.0%) in out-of-home care served by Probation as there are girls (33.0%). Current percentages are similar to the numbers throughout 2017.

Figure 43: Gender of Probation Supervised Youth in Out-of-home Care on 12/31/2017, n=698



Race/ethnicity

As with other groups, there is racial disproportionality in Probation supervised youth in out-of-home care, particularly for Black and Native youth.⁹

Figure 44: Race/Ethnicity of Probation Supervised Youth in Out-of-home Care on 12/31/2017, n=698

White	349	50.0%
Black or African American	175	25.1%
American Indian and Alaska Native	39	5.6%
Asian	8	1.1%
Two or more races	15	2.1%
Unknown or Other	112	16.0%
Hispanic	148	21.2%
Not Hispanic	478	68.5%
Unable to determine	72	10.3%

⁹ See past FCRO Annual Reports, as found at www.fcro.nebraska.gov.

Treatment or non-treatment placements

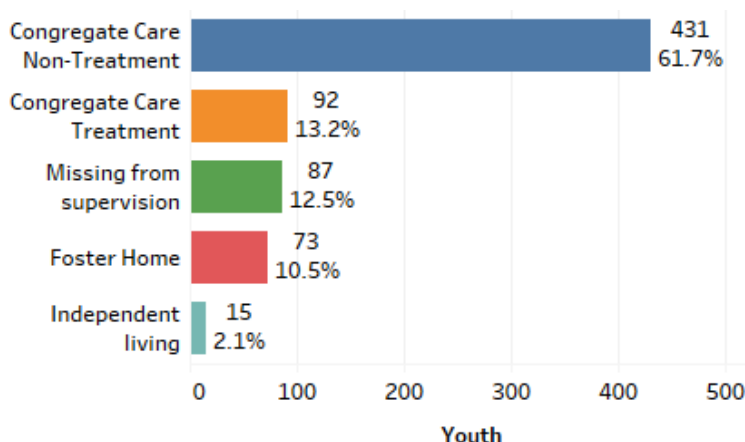
Beginning in the June 2017 Quarterly Report, the FCRO began reporting Probation placements based on type and treatment level matching the definitions in the [Juvenile Justice Reform Efforts](#) documents created by Probation. During a recent review of our data, we discovered that several congregate care placement types were incorrectly categorized as “treatment” placements. This mistake was made by the FCRO, as the information received from Probation was correct. Probation Administration was notified of our error, and the information presented below is the corrected information. **Figure 45** contains the corrected data on treatment and non-treatment congregate care from the data reported in the March, June, and September 2017 Quarterly Reports.

Figure 45: Corrected Congregate Care Data

Quarter Ending	Congregate Care Treatment	Congregate Care Non-Treatment
Sept. 30, 2017	105 (14.4%)	443 (60.6%)
June 30, 2017	107 (14.2%)	478 (63.4%)
Mar. 31, 2017	90 (12.9%)	429 (61.4%)

Figure 46 shows that 13.2% of Probation youth in out-of-home care are in congregate treatment placements as defined by Probation, which includes acute inpatient hospitalization, psychiatric residential treatment facilities, short term residential and treatment group home. Non-treatment congregate care would include crisis stabilization, developmental disability group home, enhanced shelter, group home (A and B), maternity group home (parenting and non-parenting), independent living and shelter. This compares to a corrected 14.2% on 6/30/2017.

Figure 46: Treatment or Non-Treatment Placements of Probation Supervised Youth in Out-of-home Care on 12/31/2017, n=698



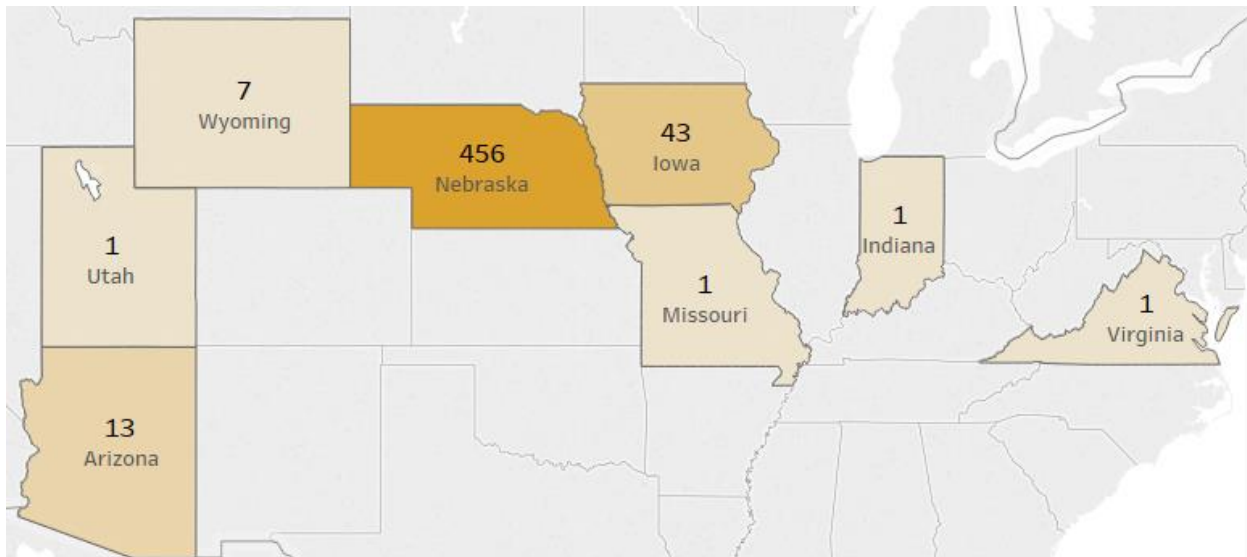
The 87 youth missing from care must always be a top priority as their safety cannot be assured.

State where youth are placed

Per **Figure 47**, 74.6% were placed in Nebraska, 7.0% were in Iowa, 2.1% were in Arizona, 1.1%% were in Wyoming and the rest were in other states. Over the past few years a number of treatment placements in Eastern Nebraska have closed, changed clientele served, or became day treatment only with no overnight care. The number of youth in Iowa facilities in particular may reflect these changes in placement availability.

The percent placed in Nebraska is nearly identical to that on 3/31/2017.

Figure 47: State Where Youth in Congregate Care Supervised by Probation were Placed on 12/31/2017, n=523



FCRO Review Data on Probation Supervised Youth in Out-of-Home Care

This section contains selected data from FCRO reviews of the cases of youth in out-of-home care supervised by Probation that had no simultaneous DHHS involvement.

Types of offenses

Youth become involved with Probation due to one or more of the following:

- A delinquency proceeding regarding a misdemeanor offense that would be considered a crime in adult court.
- A delinquency proceeding regarding a felony offense that would be considered a crime in adult court.
- A status offense (also known as a 3b), which would not be considered a crime in adult court. Examples include juveniles who are habitually disobedient to parents; is uncontrollable by parents; in mental, physical or moral danger to themselves or pose a risk to others; or habitually truant.

During the first half of this fiscal year (7/1/2017 – 12/31/2017), the FCRO reviewed 147 Probation supervised youth in out-of-home care. At the time of review:

- 116 (78.9%) had an open misdemeanor,
- 32 (21.8%) had an open felony, and
- 45 (30.6%) had an open status offense.

The total percentages exceed 100 because some youth had active offenses in multiple categories.

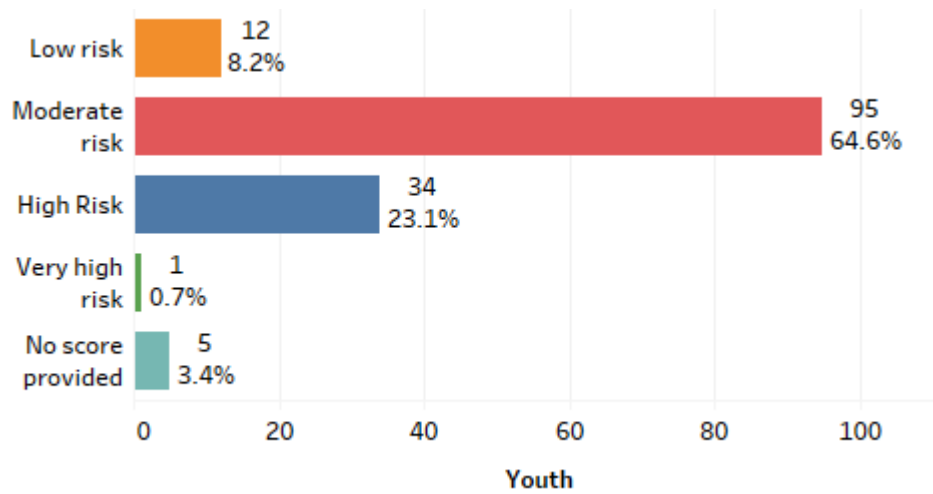
YLS screening tool

The YLS is an evidence-based tool that Probation uses to drive planning for a youth. It determines the youth's risk to re-offend and needs of the youth. Any and all requirements while the youth is on Probation should be determined based upon the results of the YLS. This assessment should be done every six months (at a minimum) or when there is a major change in circumstances (new law violation, change in placement, etc.).

The YLS measures across eight domains: prior and current offenses, family circumstances, education/employment, peer relations, substance abuse, use of leisure and recreational time, personality and behavior, and attitudes/orientation. YLS yields an overall score that indicates the juvenile's risk to recidivate. A score of 0-8 is low risk, 9-22 is moderate risk, 23-34 is high risk, and 35-42 is very high risk.

Figure 48 on the next page shows the reviewed youth's most recent YLS score as of the date of the FCRO review.

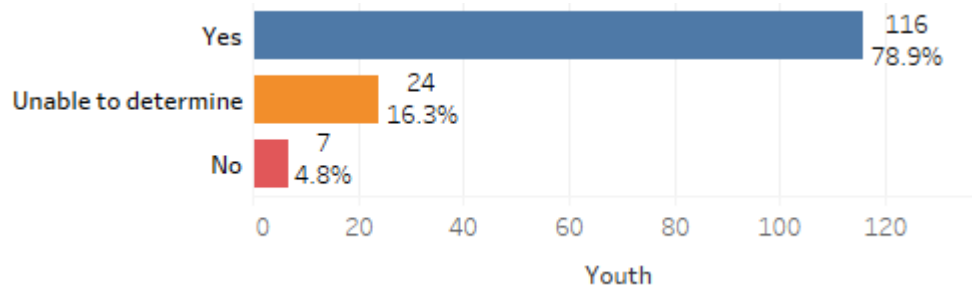
**Figure 48: YLS Score for Probation Supervised Youth Reviewed by the FCRO
7/1/2017 – 12/31/2017, n=147**



Mental health condition

Figure 49 shows the majority of youth reviewed (78.9%) had a mental health diagnosis.

**Figure 49: Presence of a Mental Health Diagnosis for Probation Supervised Youth
Reviewed by the FCRO 7/1/2017 – 12/31/2017, n=147**

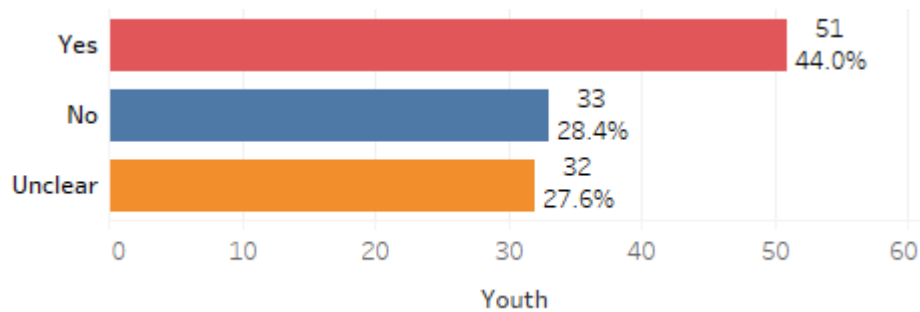


Mental health related medications

Figure 50 shows the number of youth with a confirmed mental health diagnosis that were currently prescribed at least one psychotropic medication. Most psychotropic medications alter brain chemistry, and can be dangerous to under- or overdose. Many of the most common ones have black box warnings and other serious precautions recommended by the drug manufacturers/FDA. Some are dangerous to discontinue abruptly.

Thus, it is concerning that in over a quarter of the cases of youth with a mental illness the information provided by Probation did not include whether or not there were currently any psychotropic medications prescribed for the youth.

Figure 50: Whether Prescribed at Least One Psychotropic Medication for Probation Supervised Youth Reviewed by the FCRO 7/1/2017 – 12/31/2017, With a Mental Health Diagnosis, n=116



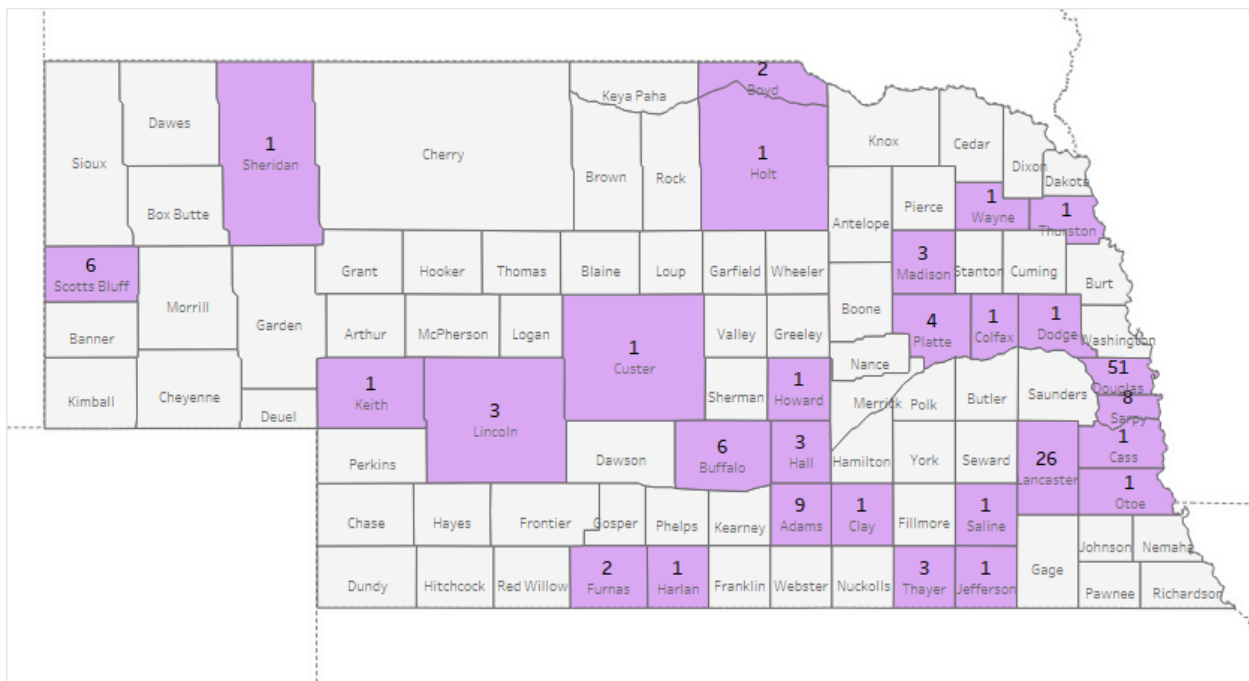
Youth in Out-of-Home Care with Both DHHS/CFS and Probation Involvement

On 12/31/2017, 128 youth were involved with both DHHS/CFS and the Office of Juvenile Probation. In comparison, there were 135 youth on 6/30/2017. The percent of youth dually involved has consistently remained around 2.9% of the total out-of-home population.

Geographic location of origin

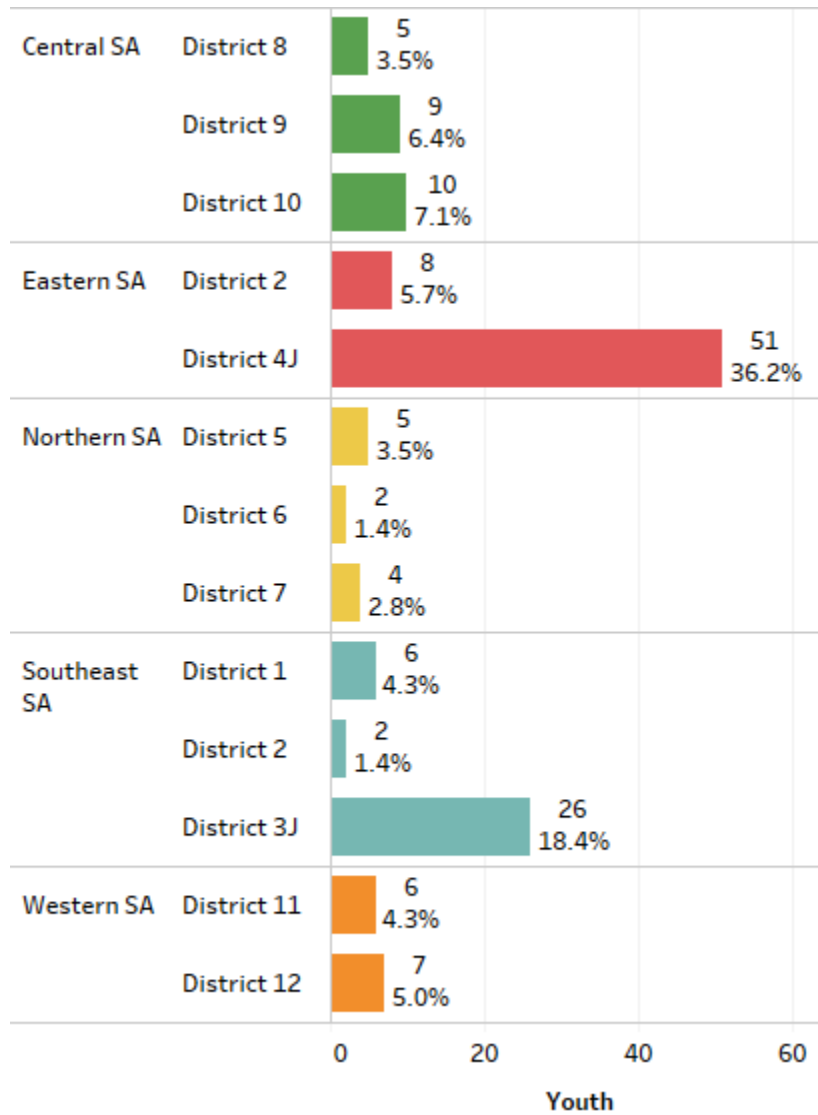
Dually-involved youth come from all parts of the state, as illustrated in **Figure 51** below, with the majority from the most populous areas (Douglas and Lancaster counties) as would be expected.

Figure 51: Youth in Out-of-home Care on 12/31/2017 Served by Both DHHS/CFS and Probation, n=141



The next chart shows how many children are placed in each of the DHHS or Probation districts.

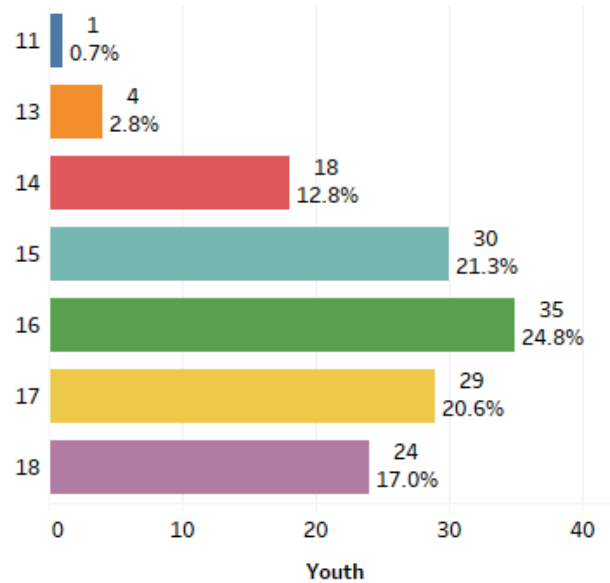
Figure 52: Youth in Out-of-home Care on 12/31/2017 Served by Both DHHS/CFS and Probation, by Statutorily Defined Regions (DHHS service area followed by Probation region), n=141



Ages

Figure 53 indicates that most dual-agency youth are teenagers. The percentage under age 16 on 12/31/2017 was 37.6%, compared to 41.4% on 6/30/2017.

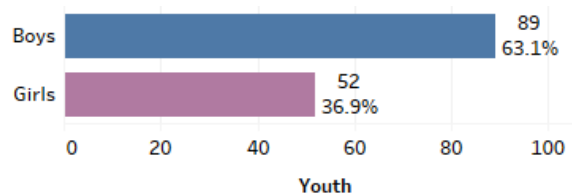
Figure 53: Ages of Youth in Out-of-home Care on 12/31/2017 Served by Both DHHS/CFS and Probation, n=141



Gender

Figure 54 shows that, as is true with other juvenile justice populations, there are more boys in this group than girls.

Figure 54: Gender of Youth in Out-of-home Care on 12/31/2017 Served by Both DHHS/CFS and Probation, n=141



On 6/30/2017 the percent of boys was 61.5%, which is very similar to the 63.1% on 12/31/2017.

Race/ethnicity

Figure 55 shows that, as is true with other out-of-home care populations, Black and Native American youth are overrepresented.

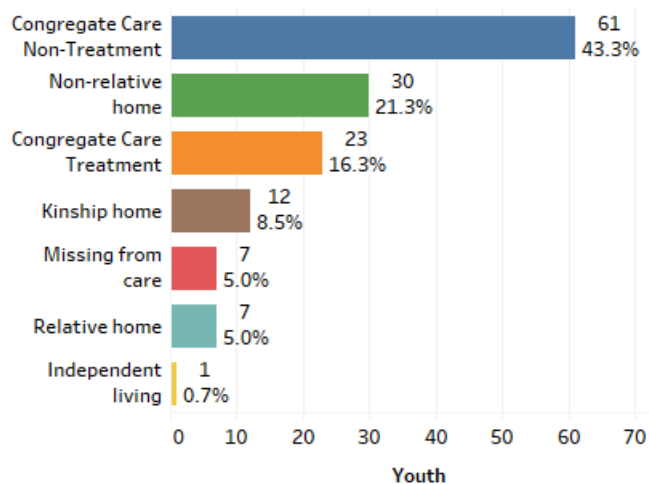
Figure 55: Race/Ethnicity of Youth in Out-of-home Care on 12/31/2017 Served by Both DHHS/CFS and Probation, n=141

White	80	56.7%
Black or African American	23	16.3%
American Indian and Alaska Native	13	9.2%
Two or more races	21	14.9%
Unknown or Other	4	2.8%
Hispanic	27	19.1%
Not Hispanic	94	66.7%
Unable to determine	20	14.2%

Placement types

Figure 56 shows the placement types for youth with dual agency involvement.

Figure 56: Placement Types for Youth in Out-of-home Care 12/31/2017 Served by both DHHS/CFS and Probation, n=141

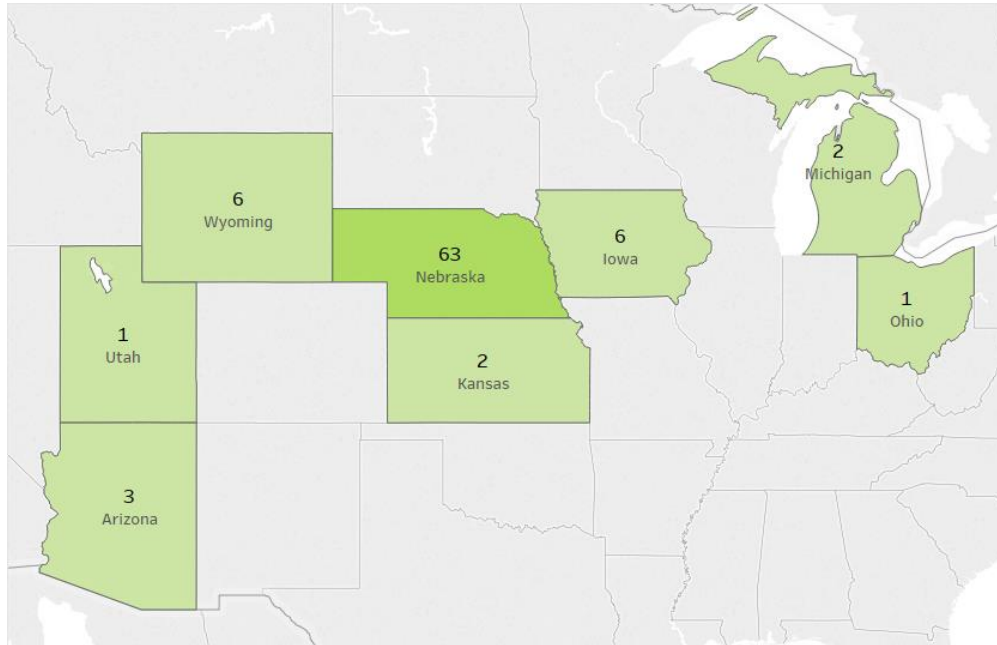


Youth missing from care must always be a top priority as their safety cannot be assured.

State of children's placements

Figure 57 shows the state where dual served youth in congregate care are placed. 75.0% are in Nebraska.

Figure 57: Placement State for Youth in a Congregate Care Facility 12/31/2017 that are Served by both DHHS/CFS and Probation, n=84



APPENDIX - Background on the FCRO

Mission

The FCRO's mission is to provide oversight of the child welfare and juvenile justice systems by tracking and reviewing children in out-of-home care, reporting on aggregate outcomes, and advocating on individual and systemic levels to ensure that children's best interests and safety needs are met.

Vision

Every child involved in the child welfare or juvenile justice system becomes resilient, safe, healthy, and economically secure.

Purpose for the FCRO Tracking/Data System

The FCRO is mandated to maintain an independent tracking/data system of all children in out-of-home placement in the State. The tracking system is used to provide information about numbers of children entering and leaving care, children's needs, outcomes, and trends in foster care, including data collected as part of the review process, and for internal processes.

Purpose of FCRO Reviews

The FCRO was established as an independent agency to review case plans of children in foster care. The purpose of 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 timely and appropriate permanency for the child, whether through a return to a home where conditions have changed, adoption, guardianship, or another plan.

Role

The FCRO's role under the Foster Care Review Act is to: 1) independently track children in out-of-home care, 2) review those children's cases, 3) collect and analyze data related to the children, 4) identify conditions and outcomes for Nebraska's children in out-of-home care, 5) make recommendations to the child welfare and juvenile justice systems on needed corrective actions, and 6) inform policy makers and the public on issues related to out-of-home care.

The FCRO is an independent state agency not affiliated with DHHS/CFS, DHHS/OJS, NFC, Courts, the Office of Probation, or any other entity.

About this Report

Data quoted within this Report are from the FCRO's independent data tracking system and FCRO completed case file reviews unless otherwise noted.

Neb. Rev. Statute §43-1303 requires DHHS/CFS (whether by direct staff or contractors), courts, the Office of Probation, and child-placing agencies to report to the FCRO any child's out-of-home placement, as well as changes in the child's status (e.g., placement changes and worker changes). By comparing information from multiple sources the FCRO is able to identify discrepancies. When case files of children are reviewed, previously received information is

verified, updated, and additional information is gathered. Prior to individual case review reports being issued, additional quality control steps are taken.

Please feel free to contact us if there is a specific topic on which you would like more information, or check our website ([www.fcro.www.fcro.nebraska.gov](http://www.fcro.nebraska.gov)) for past annual and quarterly reports and other topics of interest.

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