

September 10, 2019

Patrick O'Donnell, Clerk of the Legislature
State Capitol, Room 2018
P.O. Box 94604
Lincoln, NE 68509



Dear Mr. O'Donnell:

Pursuant to Neb. Rev. Stat. 43-4407, enclosed please find the annual report prepared by the Nebraska Alliance of Child Advocacy Centers, comprised of the information provided by each of the seven Child Advocacy Centers.

Sincerely-

Ivy Svoboda
Executive Director
Nebraska Alliance of Child Advocacy Centers

2019 ANNUAL NON-COURT CHILD WELFARE REPORT

*Pursuant to Neb. Rev. Stat. § 43-4407
September 15, 2019*



Prepared by
Nebraska Alliance of Child Advocacy Centers
*11949 Q Street,
Omaha, NE 68137
402-933-7422
www.nebraskacacs.com*



On behalf of Nebraska's Seven Child Advocacy Center Members

Printing of this report funded by:



Introduction and Executive Summary

Pursuant to Neb. Rev. Stat. § 43-4407, Nebraska's seven child advocacy centers (CACs) are charged with reporting annually to the Legislature by September 15 on voluntary or non-court child welfare cases managed by the Department of Health and Human Services (DHHS) or its lead agency in the counties they serve.

The report that follows is the sixth annual report filed on non-court cases with the Legislature by the Nebraska Alliance of Child Advocacy Centers (Nebraska Alliance), on behalf of its members – Nebraska's seven CACs. A map of Nebraska's CAC service regions can be found on the back page of this report.

The report contains information on Nebraska's non-court child welfare cases between July 1, 2018 and June 30, 2019 based on information and data provided to CACs by DHHS and PromiseShip, as well as information gathered through multidisciplinary team reviews of non-court cases.

Key Highlights of this Year's Report Include:

- During the past year, **797 new non-court cases opened**. This is the **smallest number of new non-court cases** since CACs began reviewing and reporting on this data in 2013. The decline in new cases was **fueled by a 60% decline** in cases opened in Douglas and Sarpy Counties, which may be related to a recent DHHS policy change.
- Overall, **success of cases and compliance of families with case plans remains high**.
- The average length non-court cases were open **increased by 19 days** as compared to last year.
- There are **significant regional differences** across the state in the length and success of non-court cases, the likelihood of court filings, the presence of case plans, and the degree of family compliance with case plans.
- **174 cases did not have a case plan**, although this is a requirement in DHHS policy.

Areas Identified for Improvement or Further Study

- A lack of timely communication and data reporting when non-court cases open or close.
- A lack of service availability, especially in certain regions or related to certain needs, including substance use and mental health.
- A lack of capacity to thoroughly review and track all non-court cases.
- Concerns about cases that are never opened as non-court cases and therefore have no team review, including those where families refuse services or where parents temporarily give away their rights instead of accepting services.

What is a Non-Court Child Welfare Case?

Non-court or voluntary cases are cases where ongoing child welfare services and assessment are provided to families without the involvement of the juvenile court. Non-court cases are opened at the conclusion of an investigation of a report of child abuse or neglect when:

- The family scores as high or very high risk and/or a safety threat has been identified;
- The family voluntarily agrees to work with DHHS or its' contractor; and,
- The local county attorney has not filed a petition in juvenile court.

Non-court cases close when:

- Children are safe and the family's risk has been reduced to low or moderate;
- Children are safe, the family no longer wants services, and DHHS does not believe court intervention is necessary; or
- When a family cannot be located, despite reasonable efforts.

Current DHHS policy on non-court cases, including criteria on opening and closing cases, is laid out in the Division of Children and Family Services Protection and Safety Procedure Updates #34-2016 and #2-2018.

What is a Child Advocacy Center (CAC)?

Child Advocacy Centers (CACs) provide a cadre of services to assist in providing high quality, trauma-informed investigations of child abuse and neglect. Services provided include forensic interviews, medical evaluations, advocacy and others. Nebraska's CACs are all nationally accredited through the National Children's Alliance.

By law, CACs are also mandated by to assist county attorneys in the coordination of local multidisciplinary teams (MDTs) focusing on investigation and treatment of child abuse. MDTs are convened by local county attorneys and made up of different professionals, service providers, and local experts working on child welfare. Per Neb. Rev. Stat. § 28-728, each of Nebraska's 93 counties is assigned to a local CAC for MDT coordination. The map on the back page shows the counties assigned to each of Nebraska's seven CACs.

Role of CACs and Multidisciplinary Teams in Non-Court Cases

In 2012, the Legislature took action to require local child abuse and neglect treatment MDTs to develop protocols for addressing non-court cases. Protocols must include how teams staff cases, coordinate and monitor safety plans, and treatment offered to children and families.

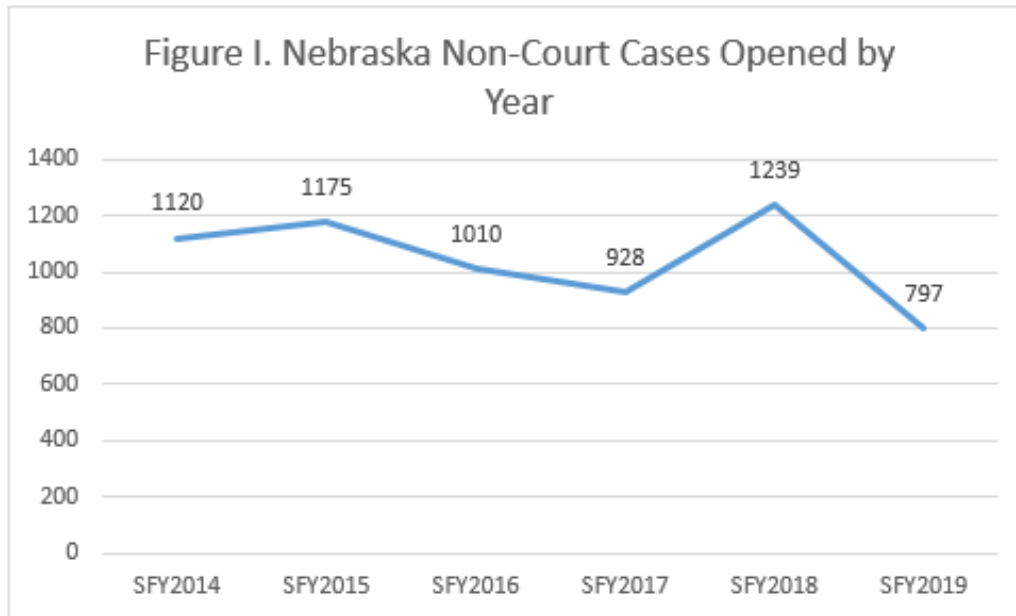
Teams across the state vary in the approach they have taken to these protocols on non-court cases. Some areas have dedicated non-court meetings, others try to staff every non-court case, and others are more selective in which cases are staffed due to high volume.

The law also requires DHHS to provide CACs with monthly reports on non-court cases in their jurisdiction, and then requires CACs to report to the Legislature. Monthly reports are used by some CACs to help set agendas for team staffing. In other areas, CACs simply track the non-court information internally to fulfill reporting requirements.

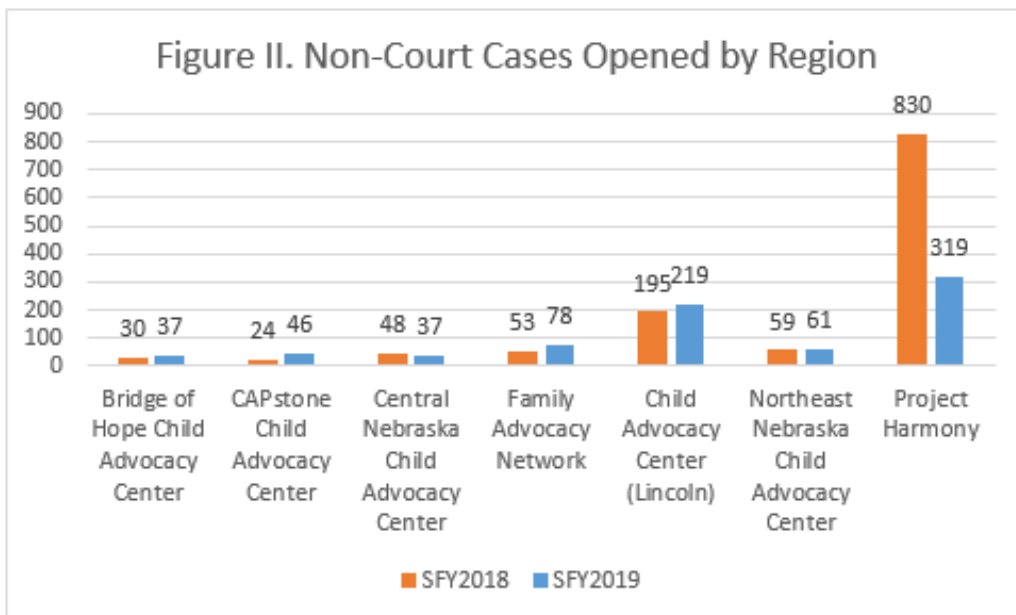
New Non-Court Cases

797 new non-court cases opened in Nebraska between July 1, 2018 and June 30, 2019, a 35.7% decline from last year.

- This is the lowest number of new non-court cases opened in a year since CACs began reporting to the Legislature.



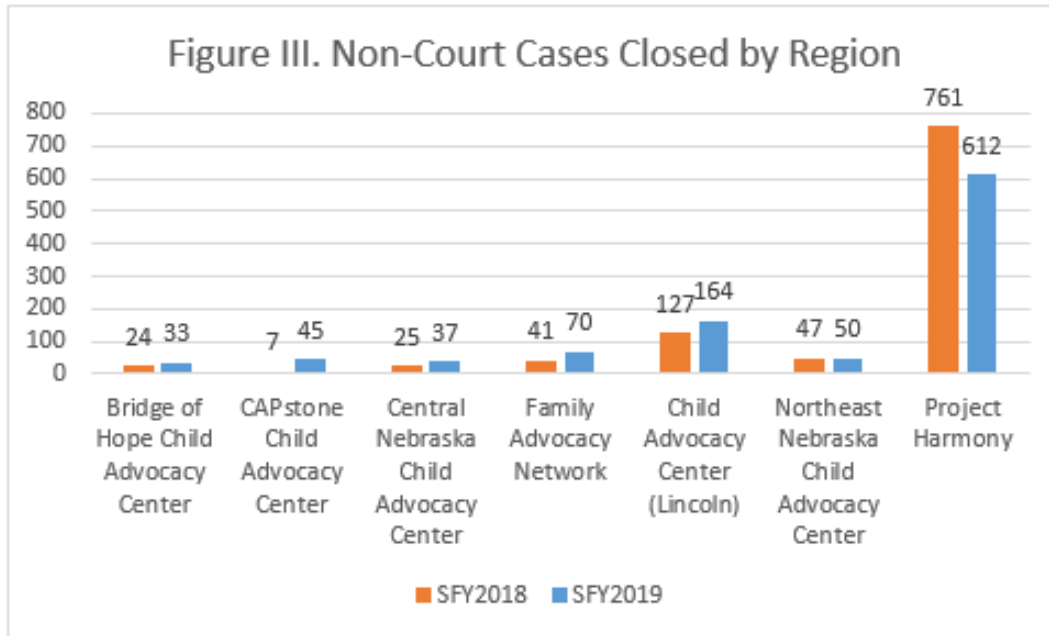
The drop in new non-court cases was driven by a 60% decline in new cases in Douglas and Sarpy County. All other regions of the state, except one, experienced an increase in the number of non-court cases.



Policy change behind decline in numbers: In May 2018, DHHS updated its policy on opening non-court cases after investigation. Previously, any case scoring “high” or “very high” risk was referred for a non-court case. Now, DHHS will refer qualifying cases where children are safe to community services instead of opening an ongoing case. Project Harmony reports this policy change as the primary reason new non-court cases have declined in Douglas and Sarpy County. It is not clear why the policy change has not reduced numbers to a similar degree in the rest of the state.

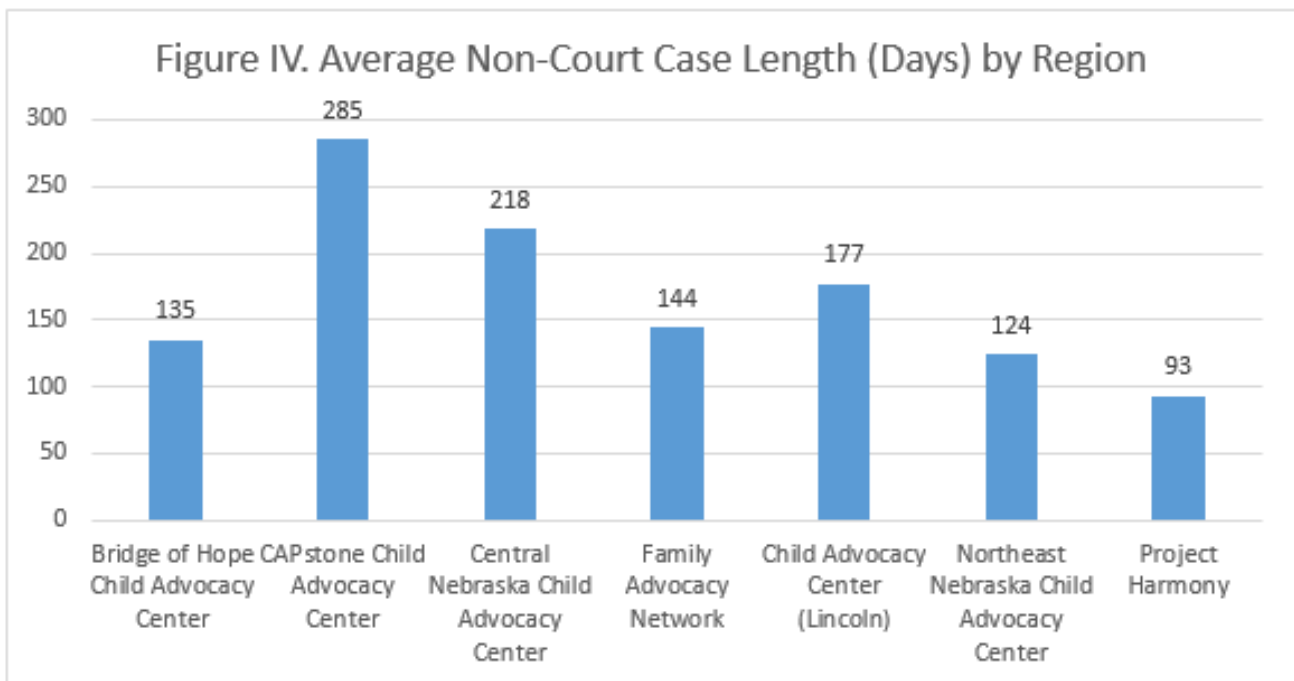
Closed Non-Court Cases

1,011 non-court cases closed between July 1, 2018 and June 30, 2019, a slight decline from the previous year.



Average Length of Closes Non-Court Cases

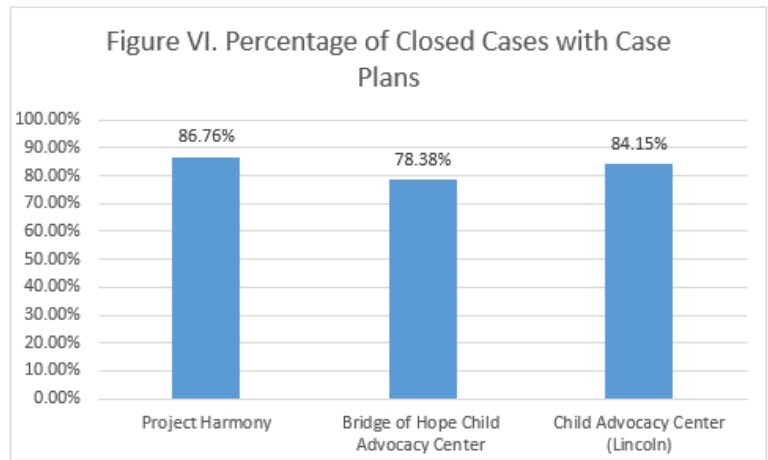
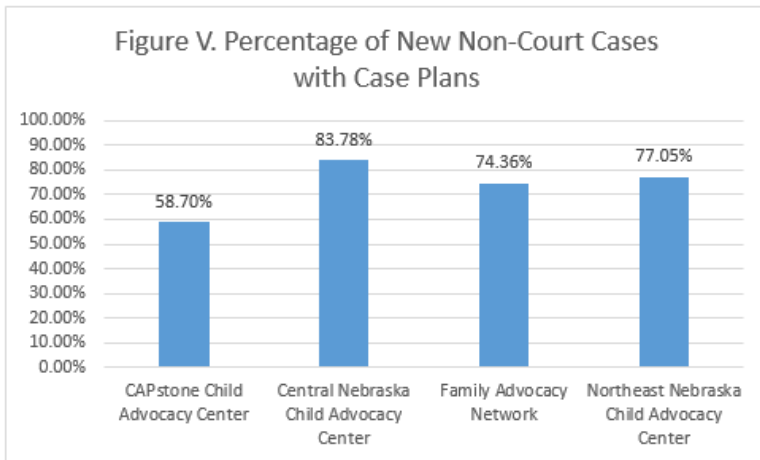
The average time a non-court case was open was 126 days, an increase of 19 days from the past fiscal year. There was a large degree of regional variation in average case length.



Case Plans for Non-Court Cases

Neb. Rev. Stat §68-1207 and DHHS policy requires every non-court case to have a case plan created no later than 60 days after the case opens and updated every 6 months. This year, **174 cases were found to not have an active case plan – 59 new cases and 115 closed cases.**

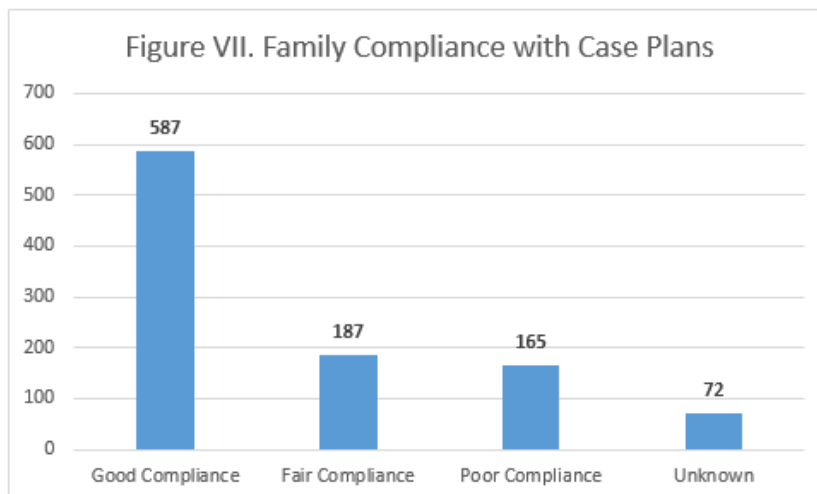
Local child advocacy centers differ in whether they track and report on case plans for new cases or closed cases. Percentages of cases with case plans are presented below by region.



Family Compliance with Case Plans

Statewide:

- **58%** of closed cases were determined to have “good compliance” – with the family consistently working towards completion of the plan.
- **18.5%** of closed cases were determined to have “fair compliance” – with the family inconsistently working towards completion of the plan.
- **16.3%** of closed cases were determined to have “poor compliance” – with the family refusing services or failing to work towards completion of the plan.

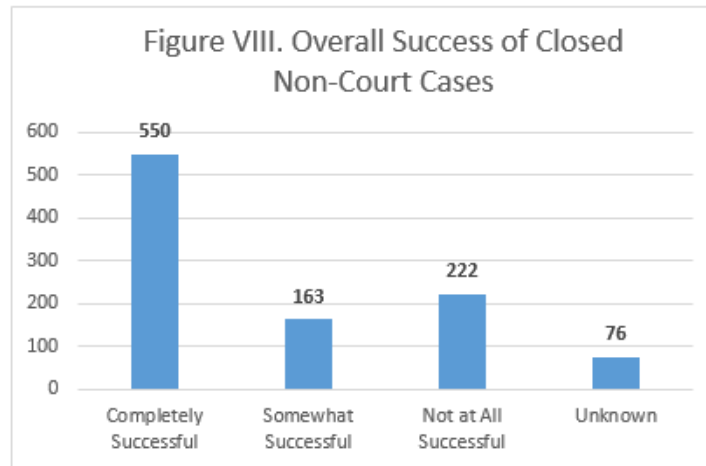


These percentages are consistent with family compliance percentages from the last fiscal year. Regionally, percentages of “good compliance” ranged from 29.9% to 68%.

Success Levels of Non-Court Cases

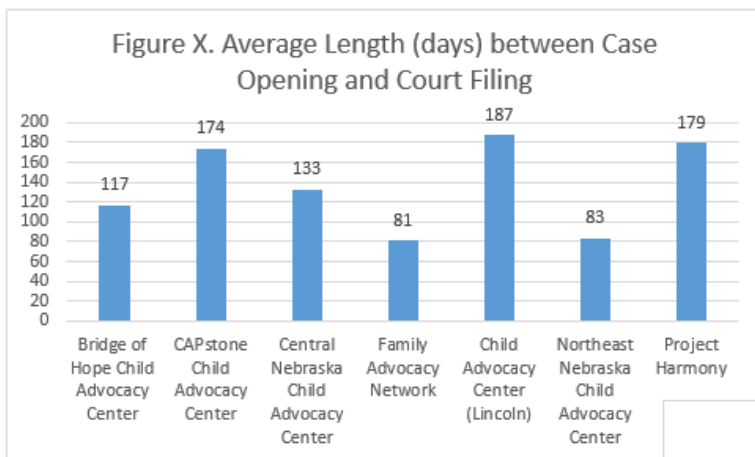
Statewide:

- **54.4%** of closed non-court cases were determined to be “completely successful” – meaning the family met all case plan goals.
- **22%** of closed non-court cases were determined to be “somewhat successful” – meaning the family met some case plan goals.
- **16.1%** of closed non-court cases were determined to be “not at all successful” - meaning the family did not meet any case plan goals or refused voluntary services.



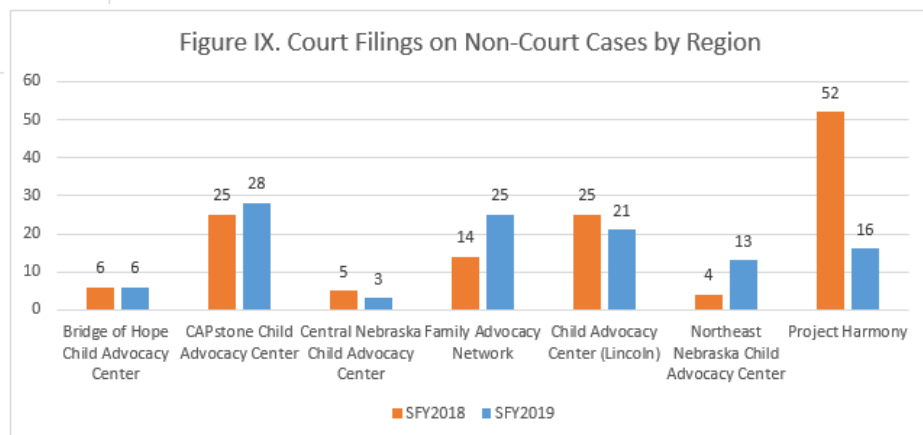
Regionally, percentages of “completely successful” cases ranged from 18.9% to 68%.

Court Filings on Open Non-Court Cases



During the past fiscal year, **112 open non-court cases became court-involved child welfare cases**, due to child abuse and neglect filings in juvenile court. This is a slight decrease from last year's 131 court filings.

On average, cases that were filed on in court were open 141.7 days, over 4 months, before a court filing. Regional differences in court filings were significant.



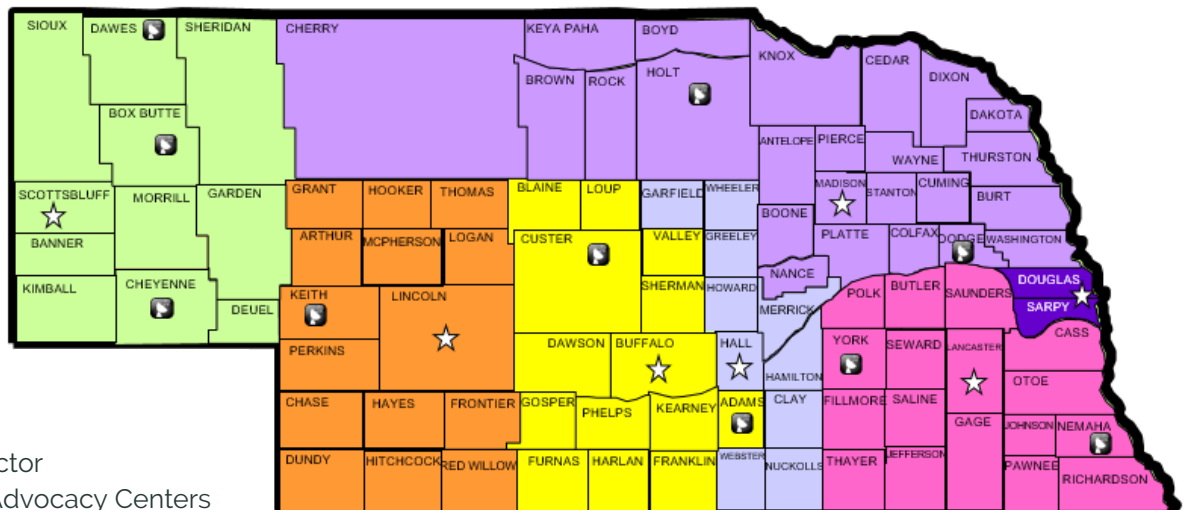
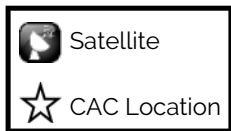
*Note: Due to data reporting issues, there is some concern that not all court filings on open non-court cases were shared with Project Harmony. The 16 filings in Douglas and Sarpy County could be an undercount.

Areas noted by child advocacy centers or multidisciplinary teams for improvement or follow-up:

- A lack of timely communication and data reporting about new non-court cases opening or current non-court cases closing. This limits MDTs ability to review and coordinate in a timely manner.
- Limited service availability and accessibility, especially related to substance use evaluation and treatment, mental health services, services to address dependency cases – those where youth needs and behaviors are driving familial system involvement – and services for older youth (17+).
- A lack of oversight and communication about cases that are never opened as non-court cases, including cases where high risk families refuse services or where parents have signed over a temporary delegation of authority to a different caregiver instead of accepting services and working to address safety concerns.
- Confusion and inconsistencies about whether alternative response cases that have ongoing services provided can or should be included in reporting on non-court cases.
- A lack of capacity, especially in areas of the state with many cases to staff, track, or thoroughly review all non-court cases. Only cases with specific concerns are able to be discussed by teams.

A Few Examples of Non-Court Case Success Stories, July 1, 2018 – June 30, 2019

- After a new baby was born, a mother who had relinquished custody of her other children due to drug use worked diligently to get treatment and services through a non-court case. The mother admitted to using methamphetamine early in her pregnancy, but had negative drug tests throughout her case and was able to build skills to safely parent her new baby.
- A family whose child had been sexually abused by a daycare provider was struggling to address problematic sexual behaviors between siblings after the abuse. Through a non-court case and collaborative multidisciplinary staffing, the family was connected with the mental health services and supports to be successful.
- A family was struggling with how to parent a child with serious mental illness and frequently found themselves in crisis. Through a non-court case, the family accessed intensive family preservation services and additional mental health services to help stabilize their child's mental health and give them tools to prevent crises and respond to their child's needs.



Participating CACs:



North Platte



Gering



Grand Island



Lincoln



Kearney



Norfolk



Omaha

Ivy Svoboda, Executive Director
 Nebraska Alliance of Child Advocacy Centers
 11949 Q Street, Omaha, NE 68137
 402-933-7422
 isvoboda@nebraskacacs.com
 www.nebraskacacs.com