

# NEBRASKA

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES



Jim Pillen, Governor

October 31, 2023

Ms. Jennifer Carter  
Inspector General of Nebraska Child Welfare  
Nebraska Legislature  
1225 L Street  
Lincoln, NE 68508

Mr. Brandon Metzler  
Clerk of the Legislature  
State Capitol Room 2028  
Lincoln, NE 68509

Subject: Child Welfare Grievances Report

Dear Ms. Carter and Mr. Metzler:

Pursuant to Neb. Rev. Stat. § 81-603, the Department of Health and Human Services (DHHS) has developed a formal grievance process. The child welfare grievances received for quarter three of this year (July – September 2023) are categorized in the attached report. Grievances from the Youth Rehabilitation and Treatment Centers (YRTC) are included under separate cover in the quarterly DHHS 83-105 Report.

Sincerely,

A handwritten signature in blue ink, appearing to read "Bo Botelho".

Bo Botelho  
General Counsel

Attachment

# Division of Children and Family Services

## Child Welfare Grievances Report

**October 31, 2023**

**Neb. Rev. Stat. § 81-603**

# Categorization of Grievances

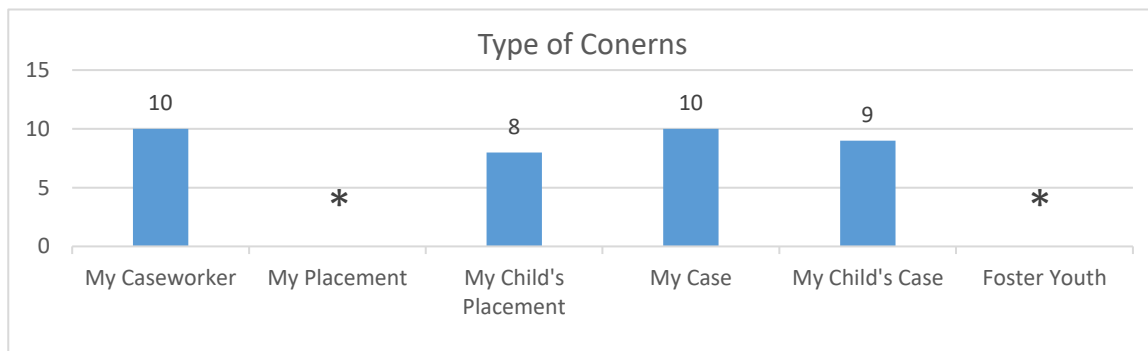
Grievances in this report were closed within quarter three (July – September 2023).

## Complainants

A grievance can be filed by youth, legal parent(s), legal guardian(s), legal custodian(s), or foster parent(s) and is open to families who are currently involved with the Division of Children and Family Services, either in an Initial Assessment or Ongoing Case (both court- and non-court involved). This process does not address issues involving finalized guardianships or adoptions. Thirteen grievances were filed and closed during the third quarter, all by legal parents.

## Types of Concerns

The grievance form allows for one or more categories as the type of complaint. Options include concerns about caseworker, placement, child’s placement, case, child’s case, or foster youth.



\* All values between 1-5 are masked to protect privacy. See Appendix A.

## Service Area

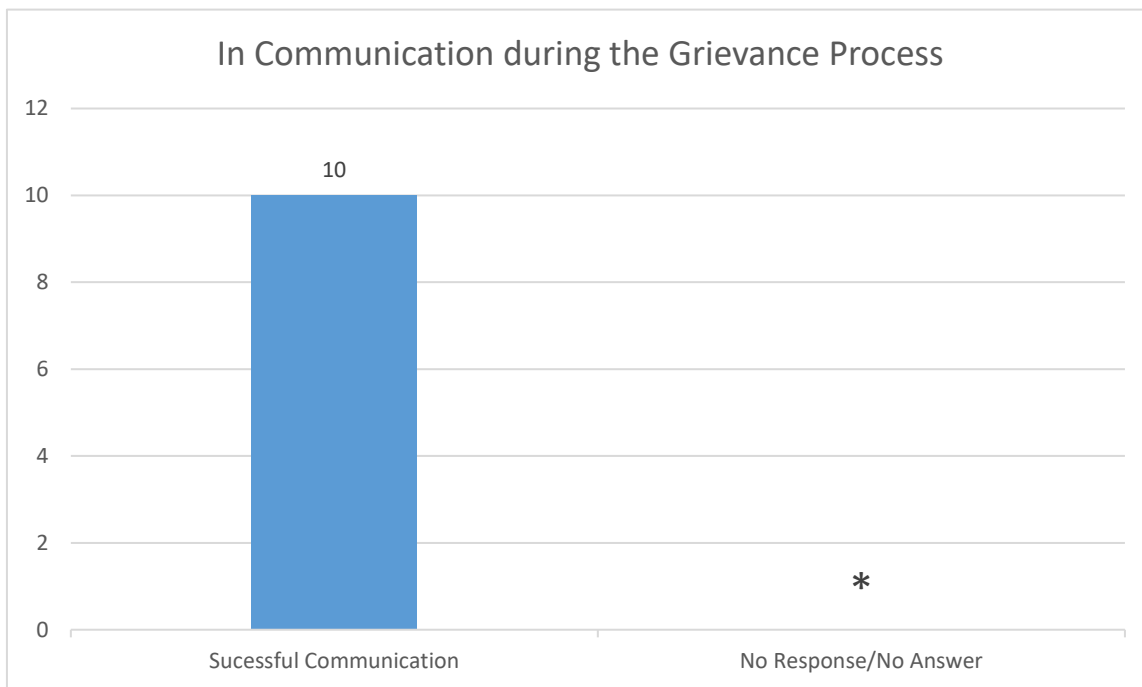
Child Welfare and Protection services are offered across five service areas in Nebraska: Central, Eastern, Northern, Southeast, and Western. Cases can also be out-of-state.



\* All values between 1-5 are masked to protect privacy. See Appendix A.

## Number of Individuals in Communication with CFS during the Grievance Process

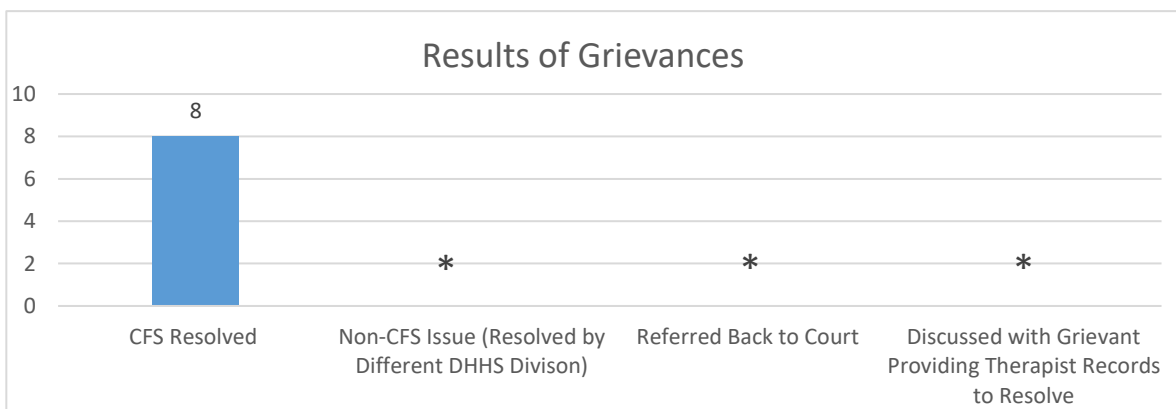
As part of the grievance process, multiple attempts to reach the individual who filed the complaint are made through email, text message, phone, or mail. The individual is encouraged to select the best method of contact while completing the grievance form.



\* All values between 1-5 are masked to protect privacy. See Appendix A.

## Disposition of the Completed Grievances

The CFS team strives to share information in the summary letter to a grievant as applicable, to ensure they are aware of who can handle the grievant’s concerns.



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# APPENDIX A: Report De-identification Standard

The Department of Health and Human Services (DHHS) is a fully covered entity under the Health Insurance Portability and Accountability Act (HIPAA). Covered entities are prohibited from the release of protected health information. As a fully covered entity, all DHHS data that is individually identifiable is protected health information, subject to HIPAA protection. Information that has been de-identified is not protected health information and can be lawfully released. HIPAA allows for two methods of de-identification, safe harbor or expert statistical analysis. De-identification under safe harbor requires the removal of 18 identifiers. When data cannot be de-identified under safe harbor, the data must be reviewed by a statistical expert to determine that it has been sufficiently de-identified.

Currently, DHHS has two roles that serve as statistical experts. The Chief Data Strategist and the Deputy Data Strategist. When assessing a report to determine if the information has been sufficiently de-identified, DHHS uses a probability calculation that considers the following factors:

- Data source and the associated nuances
- Demographic characteristics, which includes age, gender, race, ethnicity, and language spoken
- Geographic location for both the service received and residence of the person receiving services
- Time period of the report, if the time period of the report is shorter than a year such as quarterly this increases the probability of identification

In addition to an overarching HIPAA requirement, DHHS is subject to numerous statutory requirements which protect the identity and personal information of the youth served by DHHS. For example, Neb. Rev. Stat. § 28-725 and 28-726 require records related to child abuse and neglect reports and investigations to be confidential. Neb. Rev. Stat. § 43-2,108 governs the confidentiality of juvenile court and probation records. This statute specifically identifies records provided to the juvenile court by agencies and institutions as confidential record information. The same de-identification standards apply to meet the confidentiality requirement of the above referenced statutes and the HIPAA de-identification statutes.

For this particular report, the information being released (1) relates to the last quarter, (2) relates to a population that is between the ages of 0-19 years, and (3) relates to incidences experienced by the population that may have occurred between one and five times during the period. The probability of identifying the individuals involved in the incidences being reported is high when using other publicly available information in combination with the information released. As such, the release of the actual number would allow for re-identification of the individuals when the instance is between one and five. However, knowing that there were more than zero is still meaningful when interpreting this information. Masking those counts between one and five offer privacy protection of those children who were involved, while still releasing a level of meaning about those specific occurrences in the report population.