

E AND R AMENDMENTS TO LB 1160

Introduced by Larson, 40, Chairman Enrollment and Review

1 1. Strike the original sections and all amendments
2 thereto and insert the following new sections:

3 Section 1. For purposes of sections 1 to 9 of this act:

4 (1) Department means the Department of Health and Human
5 Services; and

6 (2) NFocus system means the electronic data collection
7 system in use by the department on the operative date of this
8 section.

9 Sec. 2. The Legislature finds that:

10 (1) Nebraska does not have the capacity to collect and
11 analyze routinely and effectively the data required to inform
12 policy decisions, system development, and evaluation of its child
13 welfare system;

14 (2) The NFocus system is difficult to use and does not
15 provide the appropriate data for meaningful monitoring of the child
16 welfare system for children's safety, permanency, and wellness;

17 (3) The NFocus system does not easily integrate with
18 other computer systems that have different purposes, capacities,
19 file structures, and operating systems, resulting in silos of
20 operation and information; and

21 (4) The department needs leadership in developing a
22 uniform data collection system to collect and evaluate data
23 regarding children served, the quality of services provided, and

1 the outcomes produced by those services.

2 Sec. 3. It is the intent of the Legislature:

3 (1) To provide for (a) legislative oversight of the
4 Nebraska child welfare system through an improved data collection
5 system, (b) increased child welfare outcome measurement through
6 increased reporting by lead agencies and the department, and (c) an
7 independent evaluation of the child welfare system; and

8 (2) To develop a data collection system to integrate
9 child welfare information into one system to more effectively
10 manage, track, and share information, especially in case
11 management.

12 Sec. 4. (1) The department shall develop and implement
13 a web-based, statewide automated child welfare information system
14 to integrate child welfare information into one system. Objectives
15 for the system shall include: (a) Improving efficiency and
16 effectiveness by reducing paperwork and redundant data entry,
17 allowing case managers to spend more time working with families
18 and children; (b) improving access to information and tools
19 that support consistent policy and practice standards across the
20 state; (c) facilitating timely and quality case decisions and
21 actions by providing alerts and accurate information, including
22 program information and prior case histories within the department
23 or a division thereof or from other agencies; (d) providing
24 consistent and accurate data management to improve reporting
25 capabilities, accountability, workload distribution, and case
26 review requirements; (e) establishing integrated payment processes
27 and procedures for tracking services available to and provided to

1 children and accurately paying for those services; (f) improving
2 the capacity for case managers to complete major functional
3 areas of their work, including intake, investigations, placements,
4 foster care eligibility determinations, reunifications, adoptions,
5 financial management, resource management, and reporting; (g)
6 utilizing business intelligence software to track progress through
7 dashboards; (h) access to real-time data to identify specific cases
8 and take immediate corrective and supportive actions; (i) helping
9 case managers expediently identify foster homes and community
10 resources available to meet each child's needs; and (j) providing
11 opportunity for greater accuracy, transparency, and oversight of
12 the child welfare system through improved reporting and tracking
13 capabilities.

14 (2) The capacity of the system shall include: (a)
15 Integration across related social services programs through
16 automated interfaces, including, but not limited to, the courts,
17 medicaid eligibility, financial processes, and child support;
18 (b) ease in implementing future system modifications as user
19 requirements or policies change; (c) compatibility with multiple
20 vendor platforms; (d) system architecture that provides multiple
21 options to build additional capacity to manage increased
22 user transactions as system volume requirements increase over
23 time; (e) protection at every tier of the system in case of
24 hardware, software, power, or other system component failure;
25 (f) vendor portals to support direct entry of case information,
26 as appropriate, by private providers' staff serving children,
27 to increase collaboration between service providers and the

1 department; (g) key automated process analysis to allow supervisors
2 and management to identify cases not meeting specified goals,
3 identify issues, and report details and outcome measures to
4 cellular telephones or other mobile communication devices used
5 by management and administration; (h) web-based access and
6 availability twenty-four hours per day, seven days per week; (i)
7 automated application of policy and procedures, to make application
8 of policy less complex and easier to follow; (j) automated prompts
9 and alerts when actions are due, to enable case managers and
10 supervisors to manage cases more efficiently; and (k) compliance
11 with federal regulations related to statewide automated child
12 welfare information systems at 45 C.F.R. 1355.50 - 1355.57,
13 implementing section 474(a)(3)(C) and (D) of Title IV-E of the
14 federal Social Security Act, 42 U.S.C. 674(a)(3)(C) and (D), as
15 such regulations, act, and section existed on January 1, 2012.

16 Sec. 5. On or before December 1, 2012, the department,
17 with assistance from other agencies as necessary including the
18 State Foster Care Review Board data coordinator, shall report in
19 writing to the Legislature on a plan for the data collection system
20 described in section 4 of this act. The report shall include a
21 review of the design, development, implementation, and cost of the
22 system. The report shall describe the requirements of the system
23 and all available options and compare costs of the options. The
24 report shall include, but not be limited to, a review of the
25 options for (1) system functionality, (2) the potential of the
26 system's use of shared services in areas including, but not limited
27 to, intake, rules, financial information, and reporting, (3)

1 integration, (4) maintenance costs, (5) application architecture
2 to enable flexibility and scalability, (6) deployment costs, (7)
3 licensing fees, (8) training requirements, and (9) operational
4 costs and support needs. The report shall compare the costs and
5 benefits of a custom-built system and a commercial off-the-shelf
6 system, the total cost of ownership, including both direct and
7 indirect costs, and the costs of any other options considered.
8 In conjunction with the report, the department shall prepare
9 the advance planning document required to qualify for federal
10 funding for the statewide automated child welfare information
11 system pursuant to 45 C.F.R. 1355.50 through 1355.57, implementing
12 section 474(a)(3)(C) and (D) of Title IV-E of the federal Social
13 Security Act, 42 U.S.C. 674(a)(3)(C) and (D), as such regulations,
14 act, and section existed on January 1, 2012. The advance planning
15 document shall describe the proposed plan for managing the design,
16 development, and operations of a statewide automated child welfare
17 information system that meets such federal requirements and the
18 state's needs in an efficient, comprehensive, and cost-effective
19 manner.

20 Sec. 6. On or before September 15, 2012, and each
21 September 15 thereafter, the department shall report to the Health
22 and Human Services Committee of the Legislature the following
23 information regarding child welfare, with respect to children
24 served by lead agencies and children served by the department:

25 (1) The percentage of children served and the allocation
26 of the child welfare budget, categorized by service area and by
27 lead agency, including:

1 (a) The percentage of children served by service area and
2 the corresponding budget allocation; and

3 (b) The percentage of children served who are wards of
4 the state and the corresponding budget allocation;

5 (2) The number of siblings in out-of-home care placed
6 with siblings as of the June 30th immediately preceding the date of
7 the report, categorized by service area and by lead agency;

8 (3) An update of the information in the report of
9 the Children's Behavioral Health Task Force pursuant to sections
10 43-4001 to 43-4003, including:

11 (a) The number of children receiving mental health and
12 substance abuse services annually by the Division of Behavioral
13 Health of the department;

14 (b) The number of children served annually at the
15 Hastings Regional Center;

16 (c) The number of state wards receiving services as of
17 September 1 immediately preceding the date of the report;

18 (d) Funding sources for children's behavioral health
19 services for the fiscal year ending on the immediately preceding
20 June 30;

21 (e) Expenditures in the immediately preceding fiscal
22 year by the division, categorized by category of services and by
23 behavioral health region; and

24 (f) Expenditures in the immediately preceding fiscal year
25 from the medical assistance program and CHIP as defined in section
26 68-969 for mental health and substance abuse services, for all
27 children and for wards of the state;

1 (4) The following information from each service area and
2 lead agency:

3 (a) Case manager education, including college degree,
4 major, and level of education beyond a baccalaureate degree;

5 (b) Average caseload per case manager;

6 (c) Average number of case managers per child during the
7 preceding twelve months;

8 (d) Average number of case managers per child for
9 children who have been in the child welfare system for three
10 months, for six months, for twelve months, and for eighteen months
11 and the consecutive yearly average for children until the age of
12 majority or permanency is attained;

13 (e) Monthly case manager turnover;

14 (f) Monthly face-to-face contacts between each caseworker
15 and the children on his or her caseload;

16 (g) Monthly face-to-face contacts between each caseworker
17 and the parent or parents of the children on his or her caseload;

18 (h) Case documentation of monthly consecutive team
19 meetings per quarter;

20 (i) Case documentation of monthly consecutive parent
21 contacts per quarter;

22 (j) Case documentation of monthly consecutive child
23 contacts with case manager per quarter;

24 (k) Case documentation of monthly consecutive contacts
25 between service providers and case managers per quarter;

26 (l) Timeliness of court reports; and

27 (m) Non-court-involved children, including the number of

1 children served, the services requested, the services provided, the
2 cost of the services, and the funding source;

3 (5) All placements in residential treatment settings made
4 or paid for by the child welfare system, the Office of Juvenile
5 Services, the State Department of Education or local education
6 agencies, lead agencies through letters of agreement, and the
7 medical assistance program, including, but not limited to:

8 (a) Child variables;

9 (b) Reasons for placement;

10 (c) The percentage of children denied medicaid-reimbursed
11 services and denied the level of placement requested;

12 (d) With respect to each child in residential treatment
13 setting:

14 (i) If there was a denial of initial placement request,
15 the length and level of each placement subsequent to denial of
16 initial placement request and the status of each child before
17 and immediately after, six months after, and twelve months after
18 placement;

19 (ii) Funds expended and length of placements;

20 (iii) Number and level of placements;

21 (iv) Facility variables; and

22 (v) Identification of services unavailable in the child's
23 community that, if available, could have prevented the need for
24 residential treatment; and

25 (e) Identification of services unavailable in the state
26 that, if available, could prevent out-of-state placements;

27 (6) From each lead agency, the percentage of its accounts

1 payable to service providers that are thirty days overdue, sixty
2 days overdue, and ninety days overdue; and

3 (7) For any individual involved in the child welfare
4 system receiving a service or a placement through the department
5 or its agent for which referral is necessary, the date when such
6 referral was made by the department or its agent and the date
7 and the method by which the individual receiving the services was
8 notified of such referral. To the extent the department becomes
9 aware of the date when the individual receiving the referral began
10 receiving such services, the department or its agent shall document
11 such date.

12 Sec. 7. (1) Each service area and lead agency shall
13 annually survey children, parents, foster parents, judges,
14 guardians ad litem, attorneys representing parents, and service
15 providers involved with the child welfare system to monitor
16 satisfaction with (a) adequacy of communication by the case
17 manager, (b) response by the department or lead agency to
18 requests and problems, (c) transportation issues, (d) medical and
19 psychological services for children and parents, (e) visitation
20 schedules, (f) payments, (g) support services to foster parents,
21 (h) adequacy of information about foster children provided to
22 foster parents, and (i) the case manager's fulfillment of his or
23 her responsibilities.

24 (2) Each service area and lead agency shall provide
25 monthly reports to the advocacy center that correspond with the
26 geographic location of the child regarding each child and family
27 not involved with the court system and currently receiving services

1 by the department or a lead agency. The monthly report shall
2 include the plan implemented by the department or lead agency for
3 the child and family and the status of compliance by the family
4 with the plan.

5 Sec. 8. On or before September 15, 2012, and on or before
6 each September 15 thereafter, the department shall provide a report
7 to the Health and Human Services Committee of the Legislature on
8 the department's process for monitoring lead agencies, including
9 the actions taken for contract management, financial management,
10 revenue management, quality assurance and oversight, children's
11 legal services, performance management, and communications. The
12 report shall include reviewing the functional capacities of each
13 lead agency for (1) direct case management, (2) utilization
14 of social work theory and evidence-based practices to include
15 processes for insuring fidelity with evidence-based practices, (3)
16 supervision, (4) quality assurance, (5) training, (6) subcontract
17 management, (7) network development and management, (8) financial
18 management, (9) financial controls, (10) utilization management,
19 (11) community outreach, (12) coordination and planning, (13)
20 community and stakeholder engagement, and (14) responsiveness to
21 requests from policymakers and the Legislature.

22 Sec. 9. (1) The department shall engage a nationally
23 recognized evaluator to provide an evaluation of the Nebraska child
24 welfare system.

25 (2) (a) The evaluator shall:

26 (i) Be a national entity that can demonstrate direct
27 involvement with public and tribal child welfare agencies,

1 partnerships with national advocacy organizations, think tanks,
2 or technical assistance providers, collaboration with community
3 agencies, and independent research; and

4 (ii) Be independent of the department and lead agencies,
5 shall not have been involved in a contractual relationship with the
6 department or a lead agency within the preceding three years, and
7 shall not have served as a consultant to the department or a lead
8 agency within the preceding three years.

9 (b) The department shall give consideration to evaluator
10 candidates who have experience in: (i) Outcome measurement,
11 including, but not limited to: Measuring change for organizations,
12 systems, and communities, with an emphasis on organizational
13 assessment, systems evaluation, and complex environmental factors;
14 assessing the quality of child welfare practices and services
15 across the continuum of care, with differential consideration of
16 in-home and foster care populations and advanced research and
17 evaluation methodologies, including qualitative and mixed-method
18 approaches; (ii) use of data, including, but not limited to: Using
19 existing administrative data sets, with an emphasis on longitudinal
20 data analysis; integrating data across multiple systems and
21 interoperability; developing and using data exchange standards; and
22 using continuous quality improvement methods to assist with child
23 welfare policy decisionmaking; (iii) intervention research and
24 evaluation, including, but not limited to: Designing, replicating,
25 and adapting interventions, including the identification of counter
26 factuals; and evaluating programmatic and policy interventions
27 for efficacy, effectiveness, and cost; and (iv) dissemination

1 and implementation research, including, but not limited to:
2 Measuring fidelity; describing and evaluating the effectiveness
3 of implementation processes; effectively disseminating relevant,
4 accessible, and useful findings and results; and measuring the
5 acceptability, adoption, use, and sustainability of evidence-based
6 and evidence-informed practices and programs.

7 (3) The evaluation shall include the following key areas:

8 (a) The degree to which privatization of child welfare
9 services in the southeastern and eastern service areas has
10 been successful in improving outcomes for children and parents,
11 including, but not limited to, whether the outcomes are consistent
12 with the objectives of the Families Matter program and whether the
13 cost is reasonable, given the outcomes and cost of privatization;

14 (b) A review of the readiness and capacity of the lead
15 agencies and the department to perform essential service delivery
16 and administrative management functions according to nationally
17 recognized standards for network management entities, with special
18 focus on case management. The readiness review shall include, but
19 not be limited to, strengths, areas where functional improvement is
20 needed, areas with current duplication and overlap in effort, and
21 areas where coordination needs improvement; and

22 (c) A complete review of the preceding three years
23 of placements of children in residential treatment settings.
24 The review shall include all placements made or paid for by
25 the child welfare system, the Office of Juvenile Services, the
26 State Department of Education, or local education agencies; lead
27 agencies through letters of agreement; and the medical assistance

1 program. The review shall include, but not be limited to: (i)
2 Child variables; (ii) reasons for placement; (iii) the percentage
3 of children denied medicaid-reimbursed services and denied the
4 level of placement originally requested; (iv) with respect to
5 each child in residential treatment setting: (A) If there was a
6 denial of initial placement request, the length and level of each
7 placement subsequent to denial of initial placement request and
8 the status of each child before and immediately after, six months
9 after, and twelve months after placement; (B) funds expended and
10 length of placements; (C) number and level of placements; (D)
11 facility variables; (E) identification of services unavailable in
12 the child's community that, if available, could have prevented
13 the need for residential treatment; and (F) percentage of children
14 denied reauthorization requests or subsequent review of initial
15 authorization; (v) identification of services unavailable in the
16 state that, if available, could prevent out-of-state placements;
17 and (vi) recommendations for improved utilization, gatekeeping, and
18 community-level placement prevention initiatives and an analysis of
19 services that would be more effective and cost efficient in keeping
20 children safe at home.

21 (4) The complete evaluation required pursuant to this
22 section shall be completed and a report issued on or before
23 December 1, 2012, to the Health and Human Services Committee of the
24 Legislature and the Governor.

25 Sec. 10. On December 15 of 2012, 2013, and 2014, the
26 Health and Human Services Committee of the Legislature shall
27 provide a written report to the Legislature, Governor, and Chief

1 Justice of the Supreme Court with respect to the progress made
2 by the Department of Health and Human Services implementing the
3 recommendations of the committee contained in the final report
4 of the study conducted by the committee pursuant to Legislative
5 Resolution 37, One Hundred Second Legislature, First Session, 2011.
6 In order to facilitate such report, the department shall provide to
7 the committee by September 15 of 2012, 2013, and 2014 the reports
8 required pursuant to sections 43-296, 43-534, 68-1207.01, 71-825,
9 71-827, 71-1904, and 71-3407 and subdivision (6) of section 43-405.

10 Sec. 11. Section 43-296, Reissue Revised Statutes of
11 Nebraska, is amended to read:

12 43-296 All associations receiving juveniles under the
13 Nebraska Juvenile Code shall be subject to the same visitation,
14 inspection, and supervision by the Department of Health and Human
15 Services as are public charitable institutions of this state, and
16 it shall be the duty of the department to pass annually upon the
17 fitness of every such association as may receive or desire to
18 receive juveniles under the provisions of such code. Every such
19 association shall annually, ~~at such time as the department shall~~
20 ~~direct,~~ on or before September 15, make a report to the department
21 showing its condition, management, and competency to adequately
22 care for such juveniles as are or may be committed to it and such
23 other facts as the department may require. Upon receiving such
24 report, the department shall provide a copy to the Health and Human
25 Services Committee of the Legislature on or before September 15 of
26 2012, 2013, and 2014. Upon the department being satisfied that such
27 association is competent and has adequate facilities to care for

1 such juveniles, it shall issue to such association a certificate
2 to that effect, which certificate shall continue in force for one
3 year unless sooner revoked by the department. No juvenile shall
4 be committed to any such association which has not received such
5 a certificate within the fifteen months immediately preceding the
6 commitment. The court may at any time require from any association
7 receiving or desiring to receive juveniles under the provisions
8 of the Nebraska Juvenile Code such reports, information, and
9 statements as the judge shall deem proper and necessary for his or
10 her action, and the court shall in no case be required to commit
11 a juvenile to any association whose standing, conduct, or care of
12 juveniles or ability to care for the same is not satisfactory to
13 the court.

14 Sec. 12. Section 43-405, Reissue Revised Statutes of
15 Nebraska, is amended to read:

16 43-405 The administrative duties of the Office of
17 Juvenile Services are to:

18 (1) Manage, establish policies for, and administer the
19 office, including all facilities and programs operated by the
20 office or provided through the office by contract with a provider;

21 (2) Supervise employees of the office, including
22 employees of the facilities and programs operated by the office;

23 (3) Have separate budgeting procedures and develop and
24 report budget information separately from the Department of Health
25 and Human Services;

26 (4) Adopt and promulgate rules and regulations for
27 the levels of treatment and for management, control, screening,

1 evaluation, treatment, rehabilitation, parole, transfer, and
2 discharge of juveniles placed with or committed to the Office of
3 Juvenile Services;

4 (5) Ensure that statistical information concerning
5 juveniles placed with or committed to facilities or programs of
6 the office is collected, developed, and maintained for purposes of
7 research and the development of treatment programs;

8 (6) Monitor commitments, placements, and evaluations
9 at facilities and programs operated by the office or through
10 contracts with providers and report its findings annually to the
11 Legislature. For 2012, 2013, and 2014, the department shall also
12 provide the report to the Health and Human Services Committee
13 of the Legislature on or before September 15. The report shall
14 include an assessment of the administrative costs of operating
15 the facilities, the cost of programming, and the savings realized
16 through reductions in commitments, placements, and evaluations;

17 (7) Coordinate the programs and services of the juvenile
18 justice system with other governmental agencies and political
19 subdivisions;

20 (8) Coordinate educational, vocational, and social
21 counseling;

22 (9) Coordinate community-based services for juveniles and
23 their families;

24 (10) Supervise and coordinate juvenile parole and
25 aftercare services; and

26 (11) Exercise all powers and perform all duties necessary
27 to carry out its responsibilities under the Health and Human

1 Services, Office of Juvenile Services Act.

2 Sec. 13. Section 43-534, Reissue Revised Statutes of
3 Nebraska, is amended to read:

4 43-534 Every department, agency, institution, committee,
5 and commission of state government which is concerned or
6 responsible for children and families shall submit, as part of
7 the annual budget request of such department, agency, institution,
8 committee, or commission, a comprehensive statement of the efforts
9 such department, agency, institution, committee, or commission has
10 taken to carry out the policy and principles set forth in sections
11 43-532 and 43-533. For 2012, 2013, and 2014, the Department of
12 Health and Human Services shall provide a copy of its statement
13 submitted under this section to the Health and Human Services
14 Committee of the Legislature on or before September 15. The
15 statement shall include, but not be limited to, a listing of
16 programs provided for children and families and the priority of
17 such programs, a summary of the expenses incurred in the provision
18 and administration of services for children and families, the
19 number of clients served by each program, and data being collected
20 to demonstrate the short-term and long-term effectiveness of each
21 program.

22 Sec. 14. Section 68-1207.01, Reissue Revised Statutes of
23 Nebraska, is amended to read:

24 68-1207.01 The Department of Health and Human Services
25 shall annually provide a report to the Legislature and Governor
26 outlining the caseloads of child protective services, the factors
27 considered in their establishment, and the fiscal resources

1 necessary for their maintenance. For 2012, 2013, and 2014, the
2 department shall also provide the report to the Health and Human
3 Services Committee of the Legislature on or before September 15.

4 Such report shall include:

5 (1) A comparison of caseloads established by the
6 department with the workload standards recommended by national
7 child welfare organizations along with the amount of fiscal
8 resources necessary to maintain such caseloads in Nebraska;

9 (2) (a) The number of child welfare services caseworkers
10 and case managers employed by the State of Nebraska and child
11 welfare services workers, providing services directly to children
12 and families, who are under contract with the State of Nebraska
13 or employed by a private entity under contract with the State of
14 Nebraska and (b) statistics on the average length of employment in
15 such positions, statewide and by health and human services area;

16 (3) (a) The average caseload of child welfare services
17 caseworkers and case managers employed by the State of Nebraska
18 and child welfare services workers, providing services directly to
19 children and families, who are under contract with the State of
20 Nebraska or employed by a private entity under contract with the
21 State of Nebraska and (b) the outcomes of such cases, including
22 the number of children reunited with their families, children
23 adopted, children in guardianships, placement of children with
24 relatives, and other permanent resolutions established, statewide
25 and by health and human services area; and

26 (4) The average cost of training child welfare services
27 caseworkers and case managers employed by the State of Nebraska

1 and child welfare services workers, providing services directly to
2 children and families, who are under contract with the State of
3 Nebraska or employed by a private entity under contract with the
4 State of Nebraska, statewide and by health and human services area.

5 Sec. 15. Section 71-825, Reissue Revised Statutes of
6 Nebraska, is amended to read:

7 71-825 The department shall provide an annual report,
8 no later than December 1, to the Governor and the Legislature
9 on the operation of the Children and Family Support Hotline
10 established under section 71-822, the Family Navigator Program
11 established under section 71-823, and the provision of voluntary
12 post-adoption and post-guardianship case management services under
13 section 71-824, except that for 2012, 2013, and 2014, the
14 department shall also provide the report to the Health and Human
15 Services Committee of the Legislature on or before September 15.

16 Sec. 16. Section 71-1904, Reissue Revised Statutes of
17 Nebraska, is amended to read:

18 71-1904 (1) The department shall adopt and promulgate
19 rules and regulations pursuant to sections 71-1901 to 71-1906.01
20 for (a) the proper care and protection of children by licensees
21 under such sections, (b) the issuance, suspension, and revocation
22 of licenses to provide foster care, (c) the issuance, suspension,
23 and revocation of probationary licenses to provide foster care, (d)
24 the issuance, suspension, and revocation of provisional licenses to
25 provide foster care, (e) the provision of training in foster care,
26 which training shall be directly related to the skills necessary
27 to care for children in need of out-of-home care, including,

1 but not limited to, abused, neglected, dependent, and delinquent
2 children, and (f) the proper administration of sections 71-1901 to
3 71-1906.01.

4 (2) The training required by subdivision (1)(e) of this
5 section may be waived in whole or in part by the department for
6 persons operating foster homes providing care only to relatives
7 of the foster care provider. Such waivers shall be granted
8 on a case-by-case basis upon assessment by the department of
9 the appropriateness of the relative foster care placement. The
10 department shall report annually to the Health and Human Services
11 Committee of the Legislature the number of waivers granted under
12 this subsection and the total number of children placed in relative
13 foster homes. For 2012, 2013, and 2014, the department shall
14 provide the report to the Health and Human Services Committee of
15 the Legislature on or before September 15.

16 Sec. 17. Section 71-3407, Reissue Revised Statutes of
17 Nebraska, is amended to read:

18 71-3407 (1) The purposes of the team shall be to (a)
19 develop an understanding of the causes and incidence of child
20 deaths in this state, (b) develop recommendations for changes
21 within relevant agencies and organizations which may serve to
22 prevent child deaths, and (c) advise the Governor, the Legislature,
23 and the public on changes to law, policy, and practice which will
24 prevent child deaths.

25 (2) The team shall:

26 (a) Undertake annual statistical studies of the causes
27 and incidence of child deaths in this state. The studies shall

1 include, but not be limited to, an analysis of the records of
2 community, public, and private agency involvement with the children
3 and their families prior to and subsequent to the deaths;

4 (b) Develop a protocol for retrospective investigation of
5 child deaths by the team;

6 (c) Develop a protocol for collection of data regarding
7 child deaths by the team;

8 (d) Consider training needs, including cross-agency
9 training, and service gaps;

10 (e) Include in its annual report recommended changes
11 to any law, rule, regulation, or policy needed to decrease the
12 incidence of preventable child deaths;

13 (f) Educate the public regarding the incidence and causes
14 of child deaths, the public role in preventing child deaths, and
15 specific steps the public can undertake to prevent child deaths.
16 The team may enlist the support of civic, philanthropic, and public
17 service organizations in the performance of its educational duties;

18 (g) Provide the Governor, the Legislature, and the public
19 with annual written reports which shall include the team's findings
20 and recommendations for each of its duties. For 2012, 2013, and
21 2014, the team shall also provide the report to the Health and
22 Human Services Committee of the Legislature on or before September
23 15; and

24 (h) When appropriate, make referrals to those agencies as
25 required in section 28-711 or as otherwise required by state law.

26 Sec. 18. Sections 10, 11, 12, 13, 14, 15, 16, 17, and
27 19 of this act become operative three calendar months after the

1 adjournment of this legislative session. The other sections of this
2 act become operative on their effective date.

3 Sec. 19. Original sections 43-296, 43-405, 43-534,
4 68-1207.01, 71-825, 71-1904, and 71-3407, Reissue Revised Statutes
5 of Nebraska, are repealed.

6 Sec. 20. Since an emergency exists, this act takes effect
7 when passed and approved according to law.

8 2. On page 1, strike beginning with "define" in line
9 1 through line 4 and insert "amend sections 43-296, 43-405,
10 43-534, 68-1207.01, 71-825, 71-1904, and 71-3407, Reissue Revised
11 Statutes of Nebraska; to define terms; to state intent; to require
12 development of an information system as prescribed; to provide
13 for reports, an advance planning document, surveys, employment of
14 an evaluator, and an evaluation; to change provisions relating to
15 certain reports; to harmonize provisions; to provide operative
16 dates; to repeal the original sections; and to declare an
17 emergency.".