

September 10, 2012

Health & Human Services Committee  
Room 1402, State Capitol  
P.O. Box 94604  
Lincoln, Nebraska 68509



Dear Sen. Kathy Campbell:

As the Coordinator for the Northeast Nebraska Child Advocacy Center, it is my responsibility to review all new reports of abuse/neglect in our 24 county service area, along with the non-court involved cases in our service area. Our CAC serves a largely rural portion of the state, which is populated by around 200,000 people. We are aware that the portion of state that we serve is varied in the needs of those who populate this area, as well the resources available to them.

Enclosed you will find the Northeast Nebraska Child Advocacy Center report requested by LB1160. The report will show there are over 100 kids in non-court involved cases in our service area. The process that has been implemented to create this report is still being refined, as new issues are discovered the closer we look at the information. I feel that this report shows there are improvements taking place in the system, but there is still a long way to go. I do feel this is beneficial for the families receiving non-court involved services, and I hope in the future we see a decrease in the number of kids in state care as a result of these services taking place. I also feel that the information we have at this point in time helps us paint a better picture of what types of services the families in northeast Nebraska are receiving, as well as how they benefit the children in these homes.

If you have any questions or comments or need further information, please feel free to contact me.

Sincerely-

Christina Anderson  
Multidisciplinary Team Facilitator  
Northeast Nebraska Child Advocacy Center  
1500 Koenigstein Avenue  
Norfolk, NE 68701  
402-644-7402  
canderson@frhs.org

Northeast Nebraska Child Advocacy Center  
LB 1160 Annual Report 2012  
Non-Court Involved Children

The Northeast Nebraska Child Advocacy Center (NENCAC) is located in Norfolk and provides services and coordination for multi-disciplinary teams for 24 counties. These counties include: Antelope, Boone, Boyd, Brown, Burt, Cedar, Cherry, Colfax, Cuming, Dakota, Dixon, Dodge, Holt, Keya Paha, Knox, Madison, Nance, Pierce, Platte, Rock, Stanton, Thurston, Washington and Wayne.

NENCAC coordinates a total of two Investigative Teams, three Treatment Teams, and 18 Combined Investigative/Treatment Teams. Each team consists of professionals from our area.

The Department of Health and Human Services (DHHS) provided the CACs with two monthly reports. When DHHS provided the first report, we found a number of discrepancies and information that wasn't available. Thus, the lack of information reported in the July column in the data table below. In collaboration with fellow child advocacy centers involved with the Nebraska Alliance of Child Advocacy Centers and DHHS, we held several conference calls to refine the monthly report provided by DHHS.

From the second DHHS report containing the August data, NENCAC was able to extrapolate the following overview of the non-court involved cases for our counties.

Information	Data Summary- July	Data Summary- August
Number of Children (Cases) per month deemed as non-court involved	108	117
% of Cases with a plan in place	61 %	100%
% of Cases that had authorized services	Information not available	1% According to the report, very few cases had any services authorized. This could be due to the lag in time the workers had to input the information for the August report.
% of Cases closed with case plan resolved	Information not available	8% This percentage was what

		we found on the DHHS report. Upon consulting NFocus, far more cases were found to have actually closed during the reported time frame.
% of Cases that moved into court filings due to lack of progress or subsequent allegations	Information not available	2%

#### Overview of Implementation Process:

The implementation of this process has been lengthy, and according to DHHS is expected to continue to be until next summer when they will have modified the N-Focus system to where the necessary information will be easily accessed. We have discovered many things in the short two months since the process started. In one month, many improvements have been made due to numerous calls between the statewide coordinators and DHHS administrators, but there is still a long way to go. It is apparent that the system DHHS has used to track non-court involved cases has been lacking, as are their requirements regarding what information needs to be documented in such cases. With the current legislation, great strides have been made so far in the short time span since the issue has been brought to light, and there are hopes to where it will end up in the future.

#### Areas for Improvement:

During case review, it was apparent that the way DHHS was pulling their information from N-Focus was not providing an accurate representation of the non-court involved cases they currently have in their caseloads. In numerous cases, many children deemed 'non-court involved children' were not receiving voluntary services, but were instead in a master case where a sibling was a ward of the state. These cases should not even be included in this report. This was found to be true in 26% of the cases reported on the August report provided to the coordinators by DHHS. This leads to an opportunity to update their system to differentiate between children who are in fact part of non-court involved services, versus situations where a sibling is a ward and they are simply labeled as 'non-court involved children' as opposed to 'non-wards'.

### Systems' Issues Identified:

One issue that was apparent on the July report was the reported case begin dates and case end dates. This situation was rectified to an extent on the August report. The issue was that the case dates were often from an old court involved or non-court involved case, not the current case that was being reported. For example, of the 66 cases that were found to have a case closure date on the July report, 31 of them were from years prior to 2012. For 11 of the 66 cases, the case closure dates were dates listed in the future, so the case was still in fact open, but had a target closure date also listed as the case closure date. For the August report, only 11 cases had a closure date included, which was an improvement from the July report, but upon closer inspection, there were far more cases that had been closed that were found when consulting N-Focus. This could have been due to workers later adding information after the report was run, but on more than one case, the closure had taken place prior to the August report being run.

### Successes:

The information provided to each coordinator has opened the doors to make not only DHHS, but also the LB1184 teams more accountable for the cases that are deemed 'non-court involved'. We are no longer just relying on the fact that because a family has agreed to work voluntarily with DHHS that the problems that brought them to our attention are automatically resolved. It is very early to tell on case by case basis where successes may lie, but that is something that can hopefully be documented in future reports.

### Overview of Cases Reviewed outside of DHHS 1160 Report:

Through other means of review, other cases were identified as being non-court involved and were not included in the DHHS report. This could be due to the assignment of families to workers. For example, in one case, an initial assessment worker was still assigned as the current worker, and the family had not been assigned to an ongoing worker yet, which kept the case off the current list.

Another finding is that a case had been discussed about a month prior to receiving this report. When cases don't appear timely on the DHHS report, timely review of cases do not occur, especially since some of the investigation and treatment teams in our service area only meet quarterly. Belated reviews of cases could impede interventions with the children and families and ultimately have them remain in the system longer.

September 17, 2012

Health & Human Services Committee  
Room 1402, State Capitol  
P.O. Box 94604  
Lincoln, Nebraska 68509



Dear Sen. Kathy Campbell:

My name is Kellie Hoffart, and I am the Multi-Disciplinary Team Coordinator and Forensic Interviewer at the Central Nebraska Child Advocacy Center. I have been in my current position for just over one year, and in this position I service 11 counties within Nebraska, with team meetings scheduled quarterly, bi-monthly and monthly depending on the county attorney's preference.

Enclosed you will find the Central Nebraska Child Advocacy Center report requested by LB1160. In this report, you will note the number of children reported to be currently involved on a non-court/voluntary basis is 14 for July, and 30 for August. As the Central Nebraska Child Advocacy Center Coordinator, I have educated team members within my service area regarding the 1160 report, its purpose, and asked for input from each of them. Many of the challenges our office has encountered since the implementation of this report involves time and accuracy. One pronounced challenge regarding this report is allocating the time needed to accurately and fully complete the report in a way it benefits child welfare professionals without reducing hours in other areas here at the CNCAC. I believe that if/when these reports become increasingly complete and precise, the ability to be more efficient in reporting findings will occur, but until that point, the report will consume more time to ensure proper reporting. As Coordinator, I find I have spent ample time cross-checking my findings against the 1160 report from DHHS.

If you have any questions or comments or need further information, please feel free to contact me.

Cordially,

Kellie Hoffart  
Forensic Interviewer/MDT Coordinator  
Central Nebraska Child Advocacy Center  
721 West Koenig  
Grand Island, NE 68801  
Phone (308) 385-5238  
Fax (308) 385-5239  
[mdt@cn-cac.org](mailto:mdt@cn-cac.org)

CC: Ivy Svoboda, Nebraska Alliance of Child Advocacy Centers

## Central Nebraska Child Advocacy Center

LB 1160 Annual Report 2012  
Non-Court Involved Children

The Central Nebraska Child Advocacy Center is located in Grand Island and provides services and coordination for multi-disciplinary teams for 11 counties. These counties include: Adams, Clay, Garfield, Greeley, Hall, Hamilton, Howard, Merrick, Nuckolls, Webster, and Wheeler.

The Central Nebraska Child Advocacy Center coordinates a total of four Investigative Teams, four Treatment Teams, and seven Combined Investigative/Treatment Teams. Each team consists of professionals from our area.

The Department of Health and Human Services (DHHS) provided the CACs with two monthly reports. When DHHS provided the first report, we found a number of discrepancies and information that wasn't available. Thus, the lack of information reported in the July column in the data table below. In collaboration with fellow child advocacy centers involved with the Nebraska Alliance of Child Advocacy Centers and DHHS, we held several conference calls to refine the monthly report provided by DHHS.

From the second DHHS report containing the August data, the Central Nebraska Child Advocacy Center was able to extrapolate the following overview of the non-court involved cases for our counties.

Information	Data Summary- July	Data Summary- August
Number of Children (Cases) per month deemed as non-court involved	14	30
% of Cases with a plan in place	20%	3.3% (50% have a case plan in draft form) Howard County is currently the only county I show an active case plan. Hall County has a case plans in draft form, but the majority are sibling cases.
% of Cases that had authorized services	Information not available	56.7% Services include family supports, family therapy, case management and parenting classes.
% of Cases closed with case plan resolved	Information not available	6.67% The cases reported in this section are sibling cases from a single county.

% of Cases that moved into court filings due to lack of progress or subsequent allegations	Information not available	<b>6.67%</b> The cases reported in this section are sibling cases from a single county. Although section four is identical to section five, these findings are from two separate counties.
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#### Overview of Implementation Process:

Our office began this process by first discussing the addition of non-court case review/tracking with the teams at LB 1184 team meetings, e-mails, and telephonic meetings. The CNCAC created an initial form to record and track all cases and progress. The Alliance has since provided a spreadsheet for tracking purposes. Prior to the initial report in July, our office contacted area supervisors within DHHS to discuss any current non-court/voluntary cases and their status/progress, which was recorded on the CNCAC tracking form. CNCAC contact with the Hastings DHHS office was scheduled on a weekly basis until August 1<sup>st</sup> to ensure cases were being recorded properly. This was done with the Grand Island office supervisors on a more limited basis, and was completed both in-person and telephonically.

#### Areas for Improvement:

More accurate reporting by DHHS on monthly reports. It appears that DHHS caseworkers are not always updating information in a timely manner or being as thorough as necessary. I have also discovered at times incorrect information is being entered. This in turn effects what cases are listed on the 1160 report. Additionally, the 1160 report received from DHHS was incomplete. In the August report, my office only received information on two cases (sibling cases) in Hall County. No other counties were listed as they were the previous reporting month. Upon notification to DHHS of the situation and request for additional county information, my office received a more lengthy report for August. Caseworkers need to submit updates in a timely manner to accurately reflect the status of each case.

#### Systems' Issues Identified:

The reports received for July and August were incomplete. During conversations and team meetings with supervisors from both Hastings and Grand Island offices, I determined that not all non-court/voluntary cases were listed in the monthly report. Additionally, in some cases the information provided was not accurate or current. Some cases in which a juvenile court petition had been filed months prior to the implementation of the 1160 report, the cases were listed in the report for July, and in some cases, August.

#### Successes:

The cases listed on the report out of the Grand Island office tend, more often than not, to have a fairly detailed narrative. These narratives were found in the following sections: progress notes, informal/formal resources, as well as

strategies and outcomes and needs. These details make the report more user-friendly.

Overview of Cases Reviewed outside of DHHS 1160 Report:

The following case count reflects non-court/voluntary cases not included on the 1160 report received by coordinator alone, or with DHHS area supervisors.

Adams County: 1

Hall: 7

Webster County: 1

These cases appear to be proceeding at the same pace as the cases listed in the cells above. The cases in Adams and Webster Counties were reviewed by the team, and found to be satisfactory at this time. The Hall County cases were reviewed only by the Coordinator, but will be addressed at the next team meeting.



September 26, 2012

Health & Human Services Committee  
Room 1402, State Capitol  
P.O. Box 94604  
Lincoln, Nebraska 68509



CAPstone

NEBRASKA ALLIANCE  
OF  
CHILD ADVOCACY CENTERS



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CHILDREN'S  
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Dear Sen. Kathy Campbell:

Thank you so much for your patience while I completed this report for LB1160. There have been many demands on our Advocacy Center here in the panhandle and we are scrambling to keep up. We saw a 62% increase in interviews from 2010 to 2011 and in the first six months of 2012, another 67% increase from 2011.

Enclosed you will find the CAPstone report requested by LB1160. The number of non-court cases averaged close to the same for July and August and the Case Plans were close to the same. It has been interesting to learn more information about the DHHS process and find they have been more than willing to assist in the new LB1160 reporting requirements.

If you have any questions or comments or need further information, please feel free to contact me.

Sincerely-

Deborah G. Fitts  
Director/Coordinator/Interviewer  
CAPstone  
900 P Street  
Gering, NE 69341  
308-632-7274  
director@capstonenebraska.com

CC: Ivy Svoboda, Nebraska Alliance of Child Advocacy Centers

## CAPstone

LB 1160 Annual Report 2012  
Non-Court Involved Children

CAPstone is located in Gering and provides services and coordination for multi-disciplinary teams for the eleven counties of the panhandle. These counties include: Scotts Bluff, Morrill, Deuel, Garden, Cheyenne, Kimball, Dawes, Box Butte, and Sheridan.

CAPstone coordinates a total of 5 Investigative Teams, 5 Treatment Teams, and 4 Combined Investigative/Treatment Teams. Each team consists of professionals from our area.

The Department of Health and Human Services (DHHS) provided the CACs with two monthly reports. When DHHS provided the first report, we found a number of discrepancies and information that wasn't available. Thus, the lack of information reported in the July column in the data table below. In collaboration with fellow child advocacy centers involved with the Nebraska Alliance of Child Advocacy Centers and DHHS, we held several conference calls to refine the monthly report provided by DHHS.

From the second DHHS report containing the August data, CAPstone was able to extrapolate the following overview of the non-court involved cases for our counties.

Information	Data Summary- July	Data Summary- August
Number of Children (Cases) per month deemed as non-court involved	78	75
% of Cases with a plan in place	35	33
% of Cases that had authorized services	Information not available	0
% of Cases closed with case plan resolved	Information not available	10
% of Cases that moved into court filings due to lack of progress or subsequent allegations	Information not available	0

#### Overview of Implementation Process:

I think the implementation process was quite tedious but again we found DHHS very willing and helpful working through the process necessary to get CAPstone the information needed.

#### Areas for Improvement:

The process will improve as time goes on and we get some things streamlined and some hopefully some updates to the NFocus system.

#### Systems' Issues Identified:

The issues identified were also mainly resolved and that was that NFocus could not provide the necessary information in a spreadsheet form. The concern was that CAPstone would have to interpret the narrative and that would put it in our interpretation and since we are not trained in the DHHS process we did not feel that it would show a true picture. However DHHS did provide most of the needed information for the August reporting.

As always new legislation brings new challenges but I believe the new reporting will give us a better look into the numbers served and help us to better follow up with children needing more services.

#### Successes:

I think that LB1160 has opened up new communication and processes for CAPstone and DHHS. As it continues we will not only benefit as an agency but the children we serve will benefit by receiving more information but also increase services.

#### Overview of Cases Reviewed outside of DHHS 1160 Report:

CAPstone provides services to the eleven counties of the panhandle and meets with nine 1184 teams. In the perimeter counties we discuss all intakes that come through the NFocus system. In Scotts Bluff county time does not allow all intakes to be discussed so we bring all cases on a priority level and discuss as many as possible. Now that we have the LB1160 report we will be bringing all intakes to the Scotts Bluff county 1184 team because we will have all the needed information in the report to discuss.