

# Child Welfare

## Non-Court Involved Cases

Nebraska Alliance of Child Advocacy Centers



Court Filings



Success Rates



September 2014

Appropriate Services



# Definitions

## Case Plan

The case plan identifies goals and services families must achieve.

## Case Closings

At closing, non-court cases are reviewed at team meetings coordinated by each CAC. These teams are comprised of county attorneys, initial assessment workers, ongoing caseworkers, and professionals from the community.

## Non-Court Involved Cases

Non-court cases include families who are offered ongoing services provided by DHHS (or a contracted agency like NFC), but do not have juvenile court involvement. These services are voluntary and may include family support, case management, and referrals to community agencies for mental health, substance abuse, or other resource assistance.

## Court Filing

At times, it may be necessary to file an affidavit in court on a non-court involved family who needs more intensive supervision.

## Criteria Examined At Case Closure

### Overall Success of the Case

**Completely:** Family met all case plan goals

**Somewhat:** Family met some case plan goals

**Not at all:** Family did not meet any case plan goals or refused voluntary services

### Parental Compliance

**Good:** Parents are consistently working toward completion of case plan

**Fair:** Parents are inconsistently working toward completion of case plan (e.g. they need multiple reminders to complete tasks, make appointments, etc.)

**Poor:** Parents are not working towards completion of case plan and/or they refused voluntary services

### Appropriateness of Services Offered to the Family

**All appropriate:** Caseworker referred family to all services that could help them

**Some appropriate:** Caseworker referred family to some services, but may have missed others (e.g. referred for substance abuse services but not domestic violence services in a family with clear domestic violence issues)

**None appropriate:** Caseworker did not refer family to any services that could help them

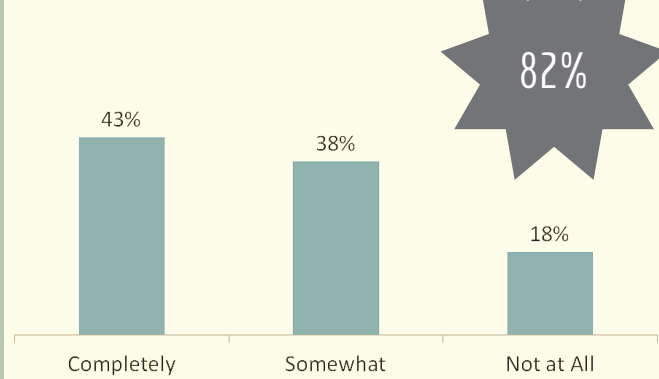
**No services offered:** Caseworker did not have a chance to refer to services (e.g. family refused voluntary services)

# Case Results

## Non-Court Involved Cases

August 2013 - June 2014

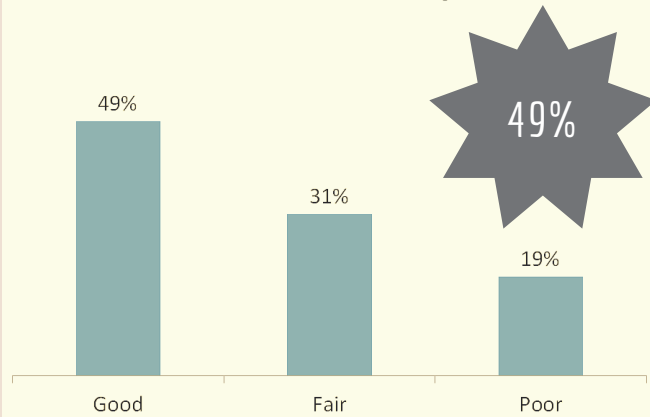
### Overall Success Rate of Closed Non-Court Cases



82% of closed cases were either "completely successful" or "somewhat successful."

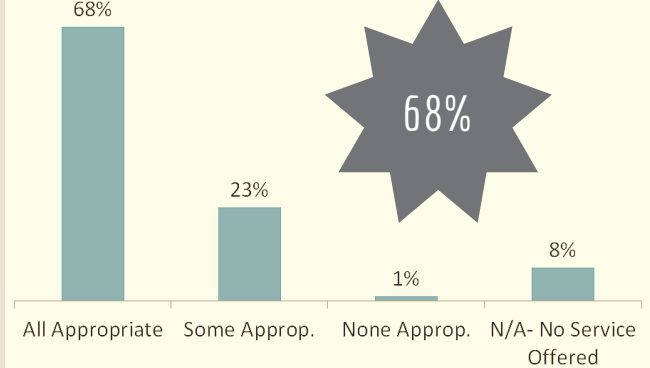
1120  
New Cases

### Overall Parental Compliance



49% of non-court involved caretakers had "good" parental compliance.

### Overall Appropriateness of Services Offered



68% of cases closed with an agreement that all of the services provided to the family were appropriate.



- ★ 948 non-court cases or 86% of cases closed with NO court intervention
- ★ On average, cases stayed open 156.8 days, approximately 5 months

# Case Results

## Non-Court Involved Cases

August 2013 - June 2014

### Case Difficulties

Occasionally, appropriate services are provided but the families hit a wall and case progression stands still. Should these cases be closed as fully successful and compliant? Does the family need a more formal intervention? These particular cases exemplify how each family has its own set of circumstances to take into account when it comes to what is the best option for them in the end.

### Areas Needing Focus

#### Data Documentation

- Several CACs found that some of the non-court cases are not showing up on the monthly report received from DHHS. By the time the CAC is aware of the case's existence, the case has already closed or is closed shortly thereafter.
- CACs identified continued concern about active case plan information not being documented in NFOCUS. Several expressed how expired case plans are in the system and if a case is opened and closed within 30 days, no case plan is created.

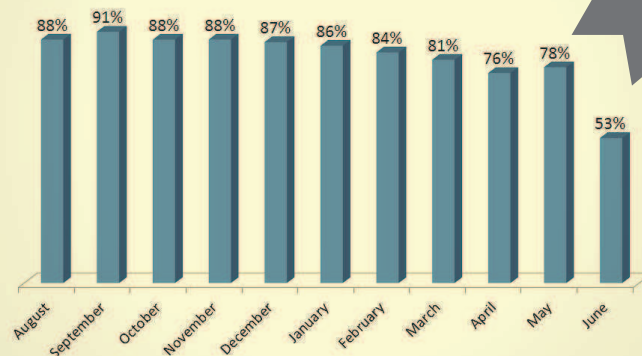
#### Premature Closure and Family Participation

- 18% of cases were closed as not at all successful. Once families learn they can decline services and the case will close, they decline to participate in a Non-Court Case and the risk factors remain "very high or high" but no interventions are put in place leaving children at risk.
- In several cases, the Non-Court case is closed and within several days of closure a new intake is accepted which contains the exact same allegations that were reportedly reduced at the time of the Non-Court case closure.

#### Service Identification and Accessibility

- The teams are working diligently to identify that the correct services are in place, such as access to evidenced based therapies. Also, the teams have recognized a lack of accessibility to services for children and families available in the outer reaching counties, such as behavioral counseling, appropriate treatment centers, and resources.

### Percent of New Cases with a Case Plan Upon Closing

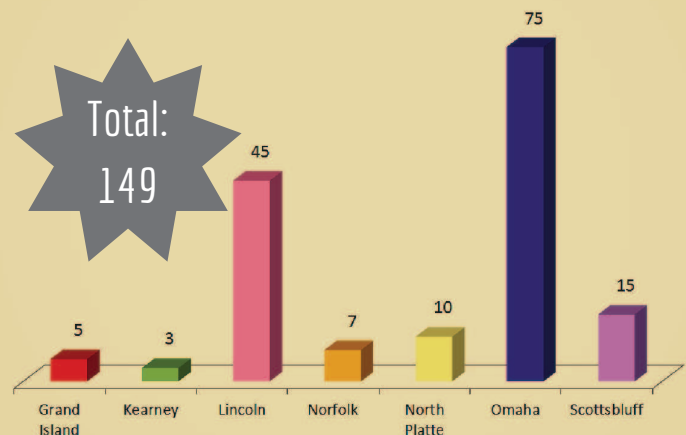


82%

Overall, 82% of cases had an active case plan that identified goals and services that families must achieve.

At times, filing an affidavit in court may be necessary for a family who needs more intensive supervision. 149 cases (14%) this year resulted in a court filing.

### Total # of Court Filings per CAC



Total:  
149

# Success



## Case Example



A mom with a ten year history of methamphetamine use had failed to secure stable housing for herself and her one year-old son. When the intake came in, they were living in a hotel and mom was allegedly using methamphetamine. Involved grandma convinced mom to go to a shelter where staff confirmed she was actively using drugs. The Non-Court Team recommended a mental health evaluation, regular urinalysis testing, a chemical dependency evaluation for mom, and an Early Development Network evaluation for the child. This case closed as completely successful as mom completed all services included in the case plan. All of her completed urinalysis tests were negative and she rarely missed a test. Mom also participated in dual-diagnosis treatment and moved out of the shelter and into a new home with her son. She worked successfully with her Family Permanency Specialist to implement the recommended services that would help her achieve and maintain sobriety so she could be a safe and stable parent.

## Successes

Across the state, CACs recognize that successful cases result in successful team processes.

The most successful teams have:

- consistent team participation and attendance
- thorough case discussion
- members who are open to feedback outside their agency
- County Attorneys who are vigilant about taking an active role in cases, and
- members who are willing to collaborate with their professional partners to improve a child's situation

## Contact Information

Ivy Svoboda, State Chapter Coordinator  
Nebraska Alliance of Child Advocacy Centers  
11949 Q Street, Omaha, NE 68137  
402-595-1326 (phone), 402-595-1329 (fax)  
isvoboda@projectharmony.com  
www.nebraskacacs.com

