

NEBRASKA

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DEPT. OF HEALTH AND HUMAN SERVICES



Jim Pillen, Governor

February 15, 2026

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

Subject: YRTC Grievances Report

Dear Ms. Carter:

Neb. Rev. Stat. § 83-105 requires the Youth Rehabilitation and Treatment Centers (YRTCs) to submit a quarterly report regarding the number of youth grievances filed, a categorization of the issues to which the grievance relates, the process for addressing such grievances, and any actions or changes made because of such grievances.

Sincerely,

A handwritten signature in blue ink that reads "Kathleen M. Stolz".

Kathleen Stolz
Acting Director, Division of Children and Family Services

Attachment

Division of Children and Family Services: Office of Juvenile Services

YRTC Grievances Report

February 2026

Neb. Rev. Stat. § 83-105

Grievance Process

Youth placed at any of the Youth Rehabilitation and Treatment Centers (YRTC's) can file a grievance by filling out the Youth Grievance Forms located in each living unit. Youth can complete the form and place it in a secure drop box in their unit, accessible only to the Nebraska Department of Health and Human Services (DHHS) Compliance Team.

The Compliance Team reviews each grievance and assigns it to the appropriate party to address. If the grievance is related to verbal, physical, or sexual abuse of a youth, the situation is handled by the Compliance Team and reported promptly to the Nebraska DHHS Hotline and the Nebraska State Patrol for proper investigation. Youth have several ways to report abuse, including the grievance process, a verbal report to staff, or a phone call to the Nebraska DHHS Hotline that the youth can access without staff assistance.

Grievances are categorized upon completion as either substantiated, unfounded, or resolved. A substantiated grievance is defined as having sufficient information to determine that the basis of the youth's grievance is accurate. A determination of unfounded is defined as either the basis of the youth's grievance being false or a lack of sufficient evidence to determine whether the incident occurred. The facility's internal Compliance Team handles grievances about a youth's rights, as defined in the DHHS Office of Juvenile Services (OJS) Standard Operating Procedure (SOP) on Youth Rights.

Grievances noted as resolved are about issues that are not defined in the DHHS OJS SOP on Youth Rights. These types of grievances could be, for example, a youth disputing their progress in programming, a disagreement with another youth, or a youth requesting not to be served a particular food item due to personal preference. Youth are encouraged to write a grievance on any issue that they feel they cannot resolve on their own.

Substantiated and resolved grievances are addressed through mediation with the youth's treatment team or process improvement within the facility, as recommended by DHHS Compliance.

Actions or Changes as a Result of Grievances

Grievances can be considered resolved if followed up by the proper administrative review. The grievances received this quarter mainly consisted of Staff Actions and Youth Actions. Any response that a youth did not agree with was directly forwarded to the Facility Administrator for review and action. DHHS Compliance can recommend policy or practice changes across facilities, on any grievance that has been resolved.

Number and Categorization of Grievances

Grievances below are for the YRTC's from October 1, 2025, through December 31, 2025.

YRTC - HASTINGS

Summary of Grievances

In Hastings, 13 grievances were submitted by the youth this quarter.

Month/Year	# Substantiated	# Unfounded	# Resolved	Total Grievances
October 2025	0	0	*	1-5
November 2025	0	0	*	1-5
December 2025	0	0	8	8

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

Grievance Types

Category	October	November	December	Total Grievances
Accounting/Business Office	0	0	0	0
Barber/Grooming	0	0	0	0
Bullying/Retaliation	0	0	0	0
Canteen	0	0	0	0
Case Management	0	0	0	0
Confinement Procedure	0	0	0	0
Counsel/Court Access	0	0	0	0
Daily Routine	0	0	*	1-5
Disciplinary Procedures	0	0	0	0
Food	0	0	0	0
Grievance Procedure	0	0	0	0
Housing Assignments	0	0	0	0
Issued Clothing	*	0	0	1-5
Library	0	0	0	0
Mail	0	0	0	0
Medical Services	0	0	0	0
Mental Health	0	0	0	0

Category	October	November	December	Total Grievances
Mutual Fighting/Assault	0	0	0	0
Personal Hygiene	0	0	0	0
Phone	0	0	0	0
Physical Abuse Staff to Youth	0	0	0	0
Physical Abuse Youth to Youth	0	0	0	0
Physical Facility	0	0	0	0
Possession/Contraband	0	0	0	0
Professional Care	0	0	0	0
Programming	0	0	0	0
Property Damage	0	0	0	0
Recreation	0	0	0	0
Religious Beliefs	0	0	0	0
School/Education	0	0	0	0
Showers	0	0	0	0
Staff Actions	*	*	6	8-16
Staff to Youth Sexual Abuse	0	0	0	0
Staff to Youth Sexual Harassment	0	0	0	0
Staff to Youth Sexual Touching	0	0	0	0
Staff to Youth Voyeurism	0	0	0	0
Verbal Abuse Staff to Youth	0	0	0	0
Verbal Abuse Youth to Youth	0	0	0	0
Visiting	0	0	0	0
Youth Actions	*	0	0	1-5
Youth Searches	0	0	0	0
Youth to Youth Sexual Abuse	0	0	0	0
Youth to Youth Sexual Harassment	0	0	0	0
Youth to Youth Sexual Touching	0	0	0	0

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

YRTC – KEARNEY

Summary of Grievances

In Kearney, 132 grievances were submitted by youth this quarter.

Month/Year	# Substantiated	# Unfounded	# Resolved	Total Grievances
October 2025	*	*	33	35-43
November 2025	*	*	51	53-61
December 2025	*	*	29	31-39

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

Grievance Types

Category	October	November	December	Total Grievances
Accounting/Business Office	0	0	0	0
Barber/Grooming	0	0	0	0
Bullying/Retaliation	0	0	0	0
Canteen	0	0	0	0
Case Management	0	0	0	0
Confinement Procedure	0	0	0	0
Counsel/Court Access	0	0	*	1-5
Daily Routine	0	*	*	2-10
Disciplinary Procedures	*	0	*	2-10
Food	*	*	*	3-15
Grievance Procedure	0	0	0	0
Housing Assignments	0	0	0	0
Issued Clothing	0	0	0	0
Library	0	0	0	0
Mail	*	0	0	1-5
Medical Services	0	*	0	1-5
Mental Health	0	0	0	0
Mutual Fighting/Assault	0	0	0	0
Personal Hygiene	0	*	*	2-10
Phone	0	*	0	1-5

Category	October	November	December	Total Grievances
Physical Abuse Staff to Youth	*	0	0	1-5
Physical Abuse Youth to Youth	0	0	0	0
Physical Facility	0	0	*	1-5
Possession/Contraband	0	0	0	0
Professional Care	0	*	*	2-10
Programming	*	*	0	2-10
Property Damage	0	0	*	1-5
Recreation	0	0	*	1-5
Religious Beliefs	0	0	0	0
School/Education	0	0	0	0
Showers	*	0	0	1-5
Staff Actions	23	33	10	66
Staff to Youth Sexual Abuse	0	0	0	0
Staff to Youth Sexual Harassment	*	*	0	2-10
Staff to Youth Sexual Touching	0	0	0	0
Staff to Youth Voyeurism	0	0	0	0
Verbal Abuse Staff to Youth	0	*	0	1-5
Verbal Abuse Youth to Youth	0	0	0	0
Visiting	0	0	0	0
Youth Actions	*	9	12	22-26
Youth Searches	0	0	0	0
Youth to Youth Sexual Abuse	0	0	0	0
Youth to Youth Sexual Harassment	*	0	0	1-5
Youth to Youth Sexual Touching	*	0	*	2-10

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

YRTC – LINCOLN

Summary of Grievances

In Lincoln, 20 grievances were submitted by the youth this quarter.

Month/Year	# Substantiated	# Unfounded	# Resolved	Total Grievances
October 2025	0	*	*	2-10
November 2025	*	0	*	2-10
December 2025	0	*	*	2-10

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

Grievance Types

Category	October	November	December	Total Grievances
Accounting/Business Office	0	0	0	0
Barber/Grooming	0	0	0	0
Bullying/Retaliation	0	0	0	0
Canteen	0	0	0	0
Case Management	0	0	0	0
Confinement Procedure	0	0	0	0
Counsel/Court Access	0	0	0	0
Daily Routine	0	0	0	0
Disciplinary Procedures	0	0	0	0
Food	0	*	0	1-5
Grievance Procedure	0	0	0	0
Housing Assignments	0	0	0	0
Issued Clothing	0	0	0	0
Library	0	0	0	0
Mail	0	0	0	0
Medical Services	0	0	0	0
Mental Health	0	0	0	0
Mutual Fighting/Assault	0	0	0	0
Personal Hygiene	0	0	0	0
Phone	0	0	0	0

Category	October	November	December	Total Grievances
Physical Abuse Staff to Youth	0	0	0	0
Physical Abuse Youth to Youth	0	0	0	0
Physical Facility	*	0	0	1-5
Possession/Contraband	0	0	0	0
Professional Care	0	0	0	0
Programming	0	0	0	0
Property Damage	0	0	0	0
Recreation	0	0	0	0
Religious Beliefs	0	0	0	0
School/Education	0	0	0	0
Showers	0	0	0	0
Staff Actions	*	*	*	3-15
Staff to Youth Sexual Abuse	0	0	0	0
Staff to Youth Sexual Harassment	0	0	0	0
Staff to Youth Sexual Touching	0	0	0	0
Staff to Youth Voyeurism	0	0	0	0
Verbal Abuse Staff to Youth	0	*	0	1-5
Verbal Abuse Youth to Youth	*	*	0	2-10
Visiting	0	0	0	0
Youth Actions	*	*	*	3-15
Youth Searches	0	0	0	0
Youth to Youth Sexual Abuse	0	0	0	0
Youth to Youth Sexual Harassment	0	0	0	0
Youth to Youth Sexual Touching	0	0	0	0

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

APPENDIX A

Report De-identification Standard

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 released, absent a more restrictive privacy or confidentiality law. 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.

DHHS' Data Office serves as the statistical experts for the department. 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 include age, gender, race, ethnicity, and spoken language;
- Geographic location for both the service received and residence of the person receiving services; and
- 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 obligation, DHHS is subject to numerous statutory requirements that protect the identity and personal information of individuals 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. § 43-2,110 governs the confidentiality of juvenile court and probation records, and Neb. Rev. Stat. § 68-313 prohibits DHHS from disclosing information that could identify individuals applying for or receiving public assistance.

The same HIPAA de-identification standards apply to meet the confidentiality requirement of the above-referenced statutes. If information that is protected under these statutes can be de-identified using either standard, it may be released. However, sometimes numbers listed in the report will also require masking. Masking is required because there is a possibility that individuals referenced in these reports could be identified when the provided information is combined with other publicly available information. As such, the release of the actual number could allow for the re-identification of the individuals when the instance is between one and five. Masking counts between one and five offers privacy protection for individuals involved, while still releasing a meaningful level about those specific occurrences in the report population.