[LB874 LB957 LB961]

The Committee on Health and Human Services met at 1:30 p.m. on Thursday, January 26, 2012, in Room 1510 of the State Capitol, Lincoln, Nebraska, for the purpose of conducting a public hearing on LB961, LB957, and LB874. Senators present: Kathy Campbell, Chairperson; Mike Gloor, Vice Chairperson; Dave Bloomfield; Tanya Cook; Gwen Howard; Bob Krist; and R. Paul Lambert. Senators absent: None.

SENATOR CAMPBELL: Good afternoon, and welcome to the hearings of the Health and Human Services Committee. I'm Kathy Campbell, and I serve as the senator from District 25 which is in east Lincoln and northern Lancaster County. The Sergeants at Arms are trying to make sure that everyone has a chair. If we get too many people standing, then we will move to an overflow room; and at that point, if we do go to an overflow room, I'm supposed to announce that anyone standing will have to go to that room, so they're doing some checking. For now, we're going to let people just stand until we can determine that. I'm going to go through some of the general instructions that we use at a hearing for the Health and Human Services Committee; but before I start that, as is our tradition, I'm going to have the senators introduce themselves, and we'll start to my far right.

SENATOR LAMBERT: Hello. I'm Senator Paul Lambert. I serve portions of Otoe, portions of Sarpy, and all of Cass County, District 2.

SENATOR BLOOMFIELD: Dave Bloomfield, District 17 in the northeast part of the state made up of Wayne, Thurston, and Dakota Counties.

SENATOR COOK: I'm Tanya Cook. I represent Legislative District 13 in northeast Omaha and Douglas County.

SENATOR GLOOR: Senator Mike Gloor, District 35, Grand Island.

MICHELLE CHAFFEE: I'm Michelle Chaffee. I serve as the legal counsel.

SENATOR KRIST: Bob Krist. I serve District 10 in Omaha and Bennington and parts of unincorporated Douglas County.

DIANE JOHNSON: And I'm Diane Johnson, the committee clerk.

SENATOR CAMPBELL: And our two pages today are Phoebe who's from Lexington, and Michael who's from Columbus, and they'll be glad to assist you if you have questions. Senator Howard is opening on a bill in another committee, so she will be joining us as she finishes there. I would ask that if you have a cell phone, you turn it off or at least put it on silence. It's very disconcerting for people testifying if they're listening

Health and Human Services Committee January 26, 2012

to a ringing phone in the background. Handouts are not required at this committee. However, if you do have handouts, we would like 12 copies; and if you need additional copies, the pages can help you. Each witness who appears before the committee must sign in using the fluorescent orange pieces of paper, and please try to print and be as legible as you can, because that's what the clerk uses. If you will not be testifying today but you would like to make a comment on the sign-in sheet, and I believe they're in white, you can say oppose, or I'm for this, or this is a comment. So feel free to do that if you would like to. When you come forward and testify, please state your name very clearly and spell it so that the clerk can make sure that it is correct; and also, you can hand to the clerk and the pages any handouts that you have and your orange sheets. We do use the lights. We will stay with a five-minute limit today, even though there are a lot of people, I think, who want to testify. When the green light goes on, you have four minutes. When it gets to yellow, then you know that you have one minute left, and when it gets to red, most likely who's running the meeting at that point will begin trying to get your attention. (Laughter). And I hope that you will all try very hard to stay within those limits, because we have so many people who want to testify, and we have three bills this afternoon. This afternoon I have asked Senator Gloor, who is the Vice Chair, who will actually be the Chair in charge of the first bill, as I will be opening for the committee. As our custom is here, each committee member then, if they open on a bill, does return to the chair. So I will turn the meeting over to Senator Gloor and begin the testimony.

SENATOR GLOOR: Thank you, Senator Campbell, and we'll give you a second to get organized and situated. Any time you're ready.

SENATOR CAMPBELL: (Exhibit 1) Thank you, Senator Gloor and colleagues on the committee. It certainly is my pleasure to introduce LB961 on behalf of the Health and Human Services Committee. LB961 is one of the bills introduced as a result of the recommendations from the Health and Human Services Committee's LR37 study. The LR37 report was the result of five public hearings, hundreds of hours of investigation, reports provided by major stakeholders, including the Legislative Performance Audit Committee and the Nebraska Auditor of Public Accounts. LR37 reveals and reviews the reality of the impact of Families Matter across the state of Nebraska. As you are aware, the recommendations of LR37, and its subsequent bills we have introduced, are meant to provide the state with a sustainable, stable path forward for the welfare of children in Nebraska. The bills are future-focused, collaborative, policy-based. They contain the keys to a foundation for child welfare from which together we can move forward. LB961 particularly provides that case management is a core component in fulfilling the state's responsibility for child welfare, and as such, should be provided by the state. Case management will be moved to the Department of Health and Human Services by department by September 1, 2012. LB961 further requires the department to develop case plans with specific services and actions for noncourt voluntary cases involving families and children. It requires the Children's Commission to include in its strategic plan a review of workload and comprehensive compensation, and requires average

Health and Human Services Committee January 26, 2012

caseload per caseworker to be reduced by 10 percent annually until caseloads are within standards established by the Child Welfare League of America. It reconfigures the central, western, and northern service areas so that no judicial district is included in more than one service area to assist in the coordination between judicial districts and child welfare. It provides that the department shall not extend existing contracts for services after those contracts terminate in 2014, and it provides that lead agencies shall not be reinstated in the central, western, and northern service areas. As I indicated, LB961 requires that case management be completed by the state, and I would like to provide some basic assumptions that we used. 1) The state of Nebraska has the legal responsibility for children in its custody. The state cannot contract away this responsibility. Accordingly, the state should maintain the decision-making authority inherent in the case management of child welfare services. The state's worker must have direct knowledge of the child and provide independent decision making and oversight of the child's care required by Nebraska law. The current statute 43-285 is very definitive regarding the role of the state. 2) Children, especially those who are victims of abuse and neglect, should have stability, continuity, and the absolute best system the state can construct to ensure safety and provide permanency for them. The current lead agency model of contracting for private case managers for children is always 90 or 60 days away from massive change. The circumstances the state is currently in is the result of a process entered into by the department with the lead agency model with no strategic plan experiencing subsequently one major change or crisis after another. The truth is that the transfer of case management to the two lead agencies was completed not as a result of a lengthy or thoughtful policy review and evaluation of how best to serve children in this state, but rather at the urging and insistence of lead agencies that this action would control costs. Both lead agencies continue to raise concerns, and they have to all of us, about the sustainability of the current system; but sustainability has not yet been reached. And I know that they continue to offer options for consideration. But in fact, as an example just this last November, a letter was sent by KVC providing notice to the department that despite a signed contract and the frontloading of payments, that agency did not have the ability to continue funding the Families Matter initiative and must be assured of a plan to sustain it or must formally initiate an appropriate transition. I know that that agency committed to continuing to work on a solution, but stated if there is no firm plan for resolution to make the initiative sustainable, KVC has no choice but to make this a formal notice of intent to exit this reform effort January 31, 2012. However, it cannot be lost on us that the children in the southeastern service area would have been only a mere 38 days from losing all case management. 3) Case management matters. Having highly trained, competent, stable work force is key to safety, permanency, and the well-being of children. LB961 recognizes that case management, caseload, case management stability are linchpins for children's safety, permanency, and well-being. Another bill that the committee will put forward, LB821, will call for the strategic plan for child welfare reform and will include improvements in case management that need to be made statewide. Research shows that permanency substantially drops with each case

Health and Human Services Committee January 26, 2012

manager that a child has. In one study, which was forwarded to us by the Foster Care Review Board, children with one case manager achieve permanency in 74.5 percent of the cases. However, for children with two or more case managers, it drops to 17.5 percent; and for children who have six or more caseworkers, the rate of permanency is 0.1 percent. LR37 reported that the Foster Care Review Board in its review showed that in the first six months of 2011, 21 percent of the children had four or more case managers. The LR37 survey of biological parents reported that when asked how many case managers had managed their cases in the past 12 months, 60 percent of them had between two and four caseworkers, and 9 percent of them had between five and ten caseworkers. In the LR37 report, both lead agencies provided good information to the committee on statistics on their turnover rates, and they have continually indicated to us that they are working on them. In the first three-month period, and this was in July through September, 24 percent of the families who were under KVC had changed caseworkers, and NFC's report dealt with the fact that on an annualized basis, their average would be about 29 percent; and we appreciated their providing those figures to us. In the current Families Matter initiative, any resources that are spent to develop highly trained, skilled, experienced case managers are lost when a company leaves. LB961 assures that the investment in case managers provide long-term benefits to the system. The Families Matter initiative has had a negative impact on the central, western, and northern areas through loss of services and funds owed by Boys and Girls Home to providers and the redistributed financing from those service areas to support the eastern part of the state. LB961 maintains the moratorium on the current lead agency's model that caused the reduction of services in these areas. LB961 would ensure that case management by the state in those areas would continue. For example, in the LR37 report, pages 11-13, and then 11-15, notes the difference in 2009 state wards to June 2011 state wards that resulted in a reduction of funds provided to the service areas for this fiscal year. And we have provided the latest chart for all the committee members that we received from the department. And I want to particularly note in those figures that the central service area had reduced by 107 state wards between 2009 and 2011, the greatest of any service area. And yet, the next year in their budget, they lost \$2.4 million. This is money that should have been reinvested in that area to provide services that had been lost. 5) Through the LR37 process and the subsequent report, it was made clear that child welfare reform is bigger than privatization. Privatization is a tool. It is not a child welfare reform. Additionally, child welfare reform is a highly complex systemic issue. There is much that everyone agrees on, and hopefully everyone in this room would agree, regarding the goals of child welfare reform. Key among them is when appropriate to provide early intervention and assistance for children and families to keep children out of the system, provide community based in-home services, provide safe out-of-home placement and services, and move children to permanency; throughout all of this process, being mindful of the importance of safety, as well as the child's well-being. However, as shifts of the child welfare system occurs, it is important to provide high level of care and institute processes for ensuring the desired outcomes and accountability. To that end, LB961

Health and Human Services Committee January 26, 2012

requires noncourt-involved voluntary cases to have a case plan. Noncourt-involved children are defined as families that Children and Family Services has determined that a safety threat exists, and the family agrees to work with CFS or the contractor. But as we struggle to ensure monthly visits to state wards, we see even more problems in monitoring noncourt-involved children. The LR37 report from information provided by our agency showed that from June through September, in some cases, we had 57 to 84 percent of the noncourt-involved children did not meet face-to-face with their caseworker once a month. And in another case, 81 to 87 percent of that time, case managers did not meet once a month with parents; and we have additional statistics that are involved in the report. Accordingly, in response to these concerns...and I want to add that I think most of us would agree that voluntary services are a good thing for family if we can achieve them; but if we are moving in this direction, and I think that we all agree we should, then we need to put into place what LB961 does, which requires that noncourt-involved children have documented case plans in the same manner that court-involved children do to track the issues with the case, the services provided, and the outcomes. In conclusion, the case manager is a pivotal position in the child welfare system. We heard from a past foster youth, a bio mother, and professionals involved in the juvenile court process, as we toured the state in five public hearings, of how case managers made a profound difference in the system. And I'm sure you will all remember the testimony that came, particularly from the foster youth and the bio mother. The profound difference for families and for children, their knowledge of the child is the key to permanency. They are at the core of our responsibility to children. Thank you, Senator Gloor. [LB961]

SENATOR GLOOR: Thank you, Senator Campbell, and for those people who can't see and those people who, for the record I guess, Senator Howard has joined us. Welcome, Senator Howard. Are there questions for Senator Campbell? Senator Howard. [LB961]

SENATOR HOWARD: Thank you, and this really isn't a question. I was across the hall in another committee giving them valuable information; but I wanted to thank you so much for bringing this in, because it's such a critical piece to delivery of services to families and children. And thank you for all the work you did on LR37, for all the work you continue to do, thank you. [LB961]

SENATOR CAMPBELL: Thank you, Senator Howard. It has certainly been my privilege to speak on behalf of the committee. [LB961]

SENATOR GLOOR: Any other questions? Thank you, Senator Campbell. We will start with proponents, and I would reiterate something that Senator Campbell pointed out, that is we have a light system. You have five minutes. It will be green for four minutes, and then the last minute will be yellow, and then it's red, which means please wrap it up. We don't want to cut anybody off; but with this many people and this many people who want to be heard, if we run a minute over here and a minute there and two minutes

there, with the number of bills to hear, there are people who would like to be heard who will have to leave, because they have other obligations. Not us, we'll stay here as long as we possibly can; but we want everybody to be able to get through the day and be able to say a few words. So bear with us. Bear with me if I have to encourage you to wrap up quickly. And with that, we'll start to proponents. [LB961]

LORRIE PALMER: (Exhibit 2) Thank you, Senator Campbell. My name is Lorrie Palmer, it's L-o-r-r-i-e P-a-I-m-e-r. I'm from Omaha, Nebraska. I better put my glasses on, or else I won't be able to read. I gave you my written, unfortunately it's probably 15 minutes' worth of testimony, and I have about a five-minute, hopefully five-minute testimony I will give you. I have lived in Nebraska for about 22 years. I've dedicated my life to helping children of our fine state. I've accomplished this mission as a licensed foster care parent, a child-specific foster care parent, a guardian, and an adoptive parent. I'm a parent of 14 children. Some of my children are biological, some adopted, some I have taken guardianship of. All of them are my children. Privatization of foster care was an attempt to take the burden off our state workers. Instead, untrained, unskilled, poorly paid workers have been left to manage our state wards. Privatization has left our state wards victimized by the very people that were supposed to protect them. Understanding victimization means hearing the words of our children. Here are a few words from a child that is a state ward. This is a child that in the last two years has had a minimum of five caseworkers, has had a minimum of five different placements. This is a little girl that I had in my home as a baby. She was taken from our home, placed in an agency-based foster home and then subsequently adopted, and then subsequently removed from that adoptive home because of sexual abuse by the foster father. She is now 15. This is what she said this week in her Facebook page. "Just moved into a new foster home, and I'm scared. Don't know what to do. Give me some advice." Another post, "I'm lost. I don't know who to turn to. My life is not going good at all. Just when I thought everything would be perfect, it disappeared in three months. It's not like it's going good in my life right now. I was just getting comfortable in my foster home when they took me out of it. It seems like nothing is going to be able to go right, and I'm just going to move from place to place until I turn 18." Another post, "I'm irritated with all the stuff that's going on. I'm surprised out of all the places I've been, none of them have been jail." Lastly, I would like to talk about a child we took guardianship of a few years ago. Because of her physical aggressiveness, she was arrested and placed back in foster care. I'll call her "C", because I don't want to use her name. She is mentally retarded. She does have developmental disabilities as one of her services. Chastity (phonetic) is one of six children. We took guardianship of Chastity (phonetic) two years ago. We had her five years in our home. That was the second time she was placed with us. We had her as a 3- to 4-year old...no, 3- to 5-year-old. Initially, she was locked up after she became physically aggressive in Douglas County. Then she was placed in CSI. She remained in CSI, Child Savings Institute, from September through Christmas. She was doing very well in CSI. CSI, of course, is a shelter. It's not the best place, but she does well in those kind of shelters. About a week before Christmas, just a few days before

Health and Human Services Committee January 26, 2012

Christmas, they found a foster home. They also at the same time found a developmental disabilities home for her, which is very difficult to find. When she turns 19, that's where she will be placed, in a developmental disabilities home. I was thrilled. That meant when she turns 19, ages out of the system, she doesn't have to be moved again. I called the case manager, and I said we need to hold off. We need to place this kid in that developmental disabilities home. They didn't. They went ahead and moved her into the foster home. I called the case manager. I said this is a mistake. I e-mailed, by phone, it didn't matter. They moved her anyway, and this was beyond any contact with me whatsoever. Now we have a new case manager. She has had three in four months now. Since privatization, the state's foster care system has simply imploded. Privatization began to help the children of Nebraska, but privatization has harmed them in ways we adults cannot begin to understand. Our fine Governor thinks we need to give privatization time to work. A day in the life of a child is a month or year to us. These are wounds that do not heal. This is baggage they carry with them into adulthood, and we sit and wonder why they repeat the mistakes of their parents. Multiple placements, corrupt foster parents, and case managers who are overloaded and simply do not care or have the answers. We cannot train our case managers and have enough expert staff and give them all the support if they do not have the numbers. They are overloaded. All the training and expertise, it's meaningless if we don't give them the resources. This cannot be accomplished overnight. We need to give this time. We need to allow them the experience that they need and the mentors that they need to be successful. Sorry, I went over. [LB961]

SENATOR GLOOR: Thank you, Ms. Palmer. You actually talked to us about children in foster care before privatization and after privatization. [LB961]

LORRIE PALMER: Um-hum. [LB961]

SENATOR GLOOR: I'm missing your point. Are you saying that you have noticed a significant difference since privatization or no improvement since privatization? [LB961]

LORRIE PALMER: I've seen even more implosion of the system since privatization. [LB961]

SENATOR GLOOR: Okay, thank you. [LB961]

LORRIE PALMER: Um-hum. [LB961]

SENATOR GLOOR: Other questions? Thank you very much. [LB961]

LORRIE PALMER: Um-hum. [LB961]

SENATOR GLOOR: Other proponents? [LB961]

Health and Human Services Committee January 26, 2012

AMBER FERGUSON: (Exhibit 3) Good afternoon. My name is Amber Ferguson, A-m-b-e-r F-e-r-g-u-s-o-n. I thank you guys, for the HHS Committee for allowing me this opportunity to support bill LB961. I currently work at Blue Valley Behavioral Health in Beatrice, Nebraska, as a licensed mental health therapist. I work exclusively with youth and families in the Beatrice community. My position is unique as a therapist in that my agency allows me to attend team meetings, court hearings, and any other important events for the youth as well as completing the therapy services in-home, at my office, or in the school setting. Approximately 50 percent of my caseload are state wards on a consistent basis. Due to the confidentiality in my position, I am not able to give you more specific examples, so I do apologize for that. There are many reasons why I support this bill, but I will touch on two key points. Though I feel that there has been much work that...there is much work and effort that needs to occur to greatly improve the child welfare system relating to the state wards beyond this bill. My first key point is that the lead agencies have had a bad pattern of unaccountability with many of the youth that I have had the opportunity to work with. For example, there have been issues such as hospitalization for suicidal ideation, running away, and physically harming others due to the lead agency "forgetting" to complete their paperwork for a permanency plan or not following through with a task that needs to be done for the youth in a timely manner. I know that I would not like to wait for an adult in my life, that I barely know, to tell me where I am going to live for the rest of my adolescent years and to wait on that plan for six to eight months. The time frames are unbearable for the youth that are put in difficult situations to begin with. My opinion in the reasoning for this is that no one holds the lead agencies accountable, so this in turn trickles down to the youth not being able to receive the services or the answers that they need in a timely manner to make progress. My second point: There is an enormous lack of communication between the lead agencies and the families, youth, and other providers. Team meetings need to occur monthly so all providers and team members can stay on the same page for the youth. There are youth that I have that have had one to three team meetings in a six- to nine-month time frame. I have also had to work with eight different caseworkers in one year's time for one youth. There is no consistency or follow through because you have to start all over with the new worker. I have heard several times from lead agency workers that there is no current information in the computer system, so they have no idea what is currently happening with the case; therefore, calling a provider or family member to ask about all the information for maybe the last two or three years that has been occurring with this youth. Also, phone calls are not returned in a timely manner. My expectation is 24 hours, and that is consistently not happening. Also, I often receive voice mail messages where voice mail boxes are full for lead agency workers, and therefore, I cannot even leave a message. There is a lack of providers and members of the team that are not being invited to team meetings; therefore, we cannot stay on the same page and follow through as adults to be a team together for the youth. Again, I am in support of this bill and would like to see smaller caseloads for caseworkers, more accountability, and effective communication skills and

techniques used on a consistent basis. As this is what I teach and suggest to my clients and families, I expect the same from those that are in charge of the welfare and well-being of children. Thank you. [LB961]

SENATOR GLOOR: Thank you. You made your points very clearly and succinctly. Are there questions? Senator Krist. [LB961]

SENATOR KRIST: I should have asked this before, but I'll just confirm. Based on the address for Ms. Palmer, when you're referring to your comments, those were referred to KVC or NFC? [LB961]

LORRIE PALMER: KVC. [LB961]

SENATOR KRIST: And so for the record, it was KVC. And your response, it is KVC or NFC? [LB961]

AMBER FERGUSON: KVC is who I work with, yes, because I'm in the southeast service area. [LB961]

SENATOR KRIST: Thank you. Thank you, Senator Gloor. [LB961]

SENATOR GLOOR: Other questions? Thank you, Amber. [LB961]

AMBER FERGUSON: Thanks. [LB961]

SENATOR GLOOR: Other proponents? Good afternoon. [LB961]

DAVID HERNANDEZ: Good afternoon, Senators. My name is David Hernandez, and I happen to be, me and my children... [LB961]

SENATOR GLOOR: Could I ask you to spell your name for the record, please? [LB961]

DAVID HERNANDEZ: Oh, David Hernandez, H-e-r-n-a-n-d-e-z. [LB961]

SENATOR GLOOR: Thank you. [LB961]

DAVID HERNANDEZ: You know, I heard about this bill that was going on; I happened to sit at home and read it in the paper. You know, I can see that it's about moving the case manager back to the state. You know, like I said, me and my children were involved with the state. We've been involved with them since 2008, so we were there before, during, and after the change, and we're still there now. You know, I just feel that there was a lot more, how do I say, personal, you know, personal communication prior to the change, and when there was a change I know, from you know, I've seen over 100

Health and Human Services Committee January 26, 2012

workers. If I had a nickel for every case manager I've been through, I would have close to \$1.00, maybe \$1.50, okay? (Laughter). You know, during this whole entire time, I went from working at McDonald's to going to get my GED, and now I'm a college graduate with a degree and working for a company that I'll never leave, hopefully. But my thing is, you know, during the change, even workers that were with us, at least they warned us that we're not going to be around anymore, you know; and then there was reports, I was getting feedback from the workers that there's hundreds, 500 families, that just stopped missing visits and everything. You know, like someone prior testified, you know, there's, you can call the worker, you get their voice mail, you know? I've been having court-ordered drop-ins for the last two years. I haven't seen a worker at my house in a year, and that's through KVC, okay? There are scheduled UAs. I haven't took a UA in I'd say two months. There's no consistency. I asked them to help, help find day care, provide transportation for me and my children, but yet I work seven days a week 10-hour shifts, and I have to drive an hour to work and an hour back in Valley, Nebraska, at Valmont. There's no help. I cannot get a hold of a worker. I can't get a hold of anybody. They tell me, well there's, you know, they point out, you know, you can go here or go there. What are you employed for? What is the state giving you guys money for but to help the families grow? All we are is just another paycheck for them, and that's it. They just collect the paycheck and just throw us out to the wind. Everything I do, I do on my own. I mean, everybody here, most of this is KVC here. I've been in the trenches four years with them. I've never seen one of these people here, not one. Not on a visit, not even passing in court, nothing. Not even come to say hi to the kids. You know, I've got three children of my own, I've got three more children that are with their moms, you know. I'm the proud father of 12 kids, most of them stepkids, and a grandson. Okay, they talk about consistency and structure for the children. Well, let's do that. Let's return case management back to the state. Okay, let's return it back, because you know what? That was just a big waste of time having KVC involved. You know, I'm probably shooting myself in the foot, and I'm probably going to have repercussions for sitting up here. You know what, so I hoped at least it might, you know, at least you guys might hear it, maybe that will help in the long run. I'm finished. [LB961]

SENATOR GLOOR: Thank you, Mr. Hernandez, and I would assure you, I don't think you have to worry about repercussions; but if you do, you let us know. [LB961]

DAVID HERNANDEZ: Yes, sir. [LB961]

SENATOR GLOOR: Are there questions? Thank you for taking your time. [LB961]

DAVID HERNANDEZ: You have a good afternoon. [LB961]

SENATOR GLOOR: Other proponents? Good afternoon. [LB961]

MARY BOSCHULT: (Exhibit 4) Good afternoon, Senator Gloor, Senator Campbell, and

Health and Human Services Committee January 26, 2012

members of the Health and Human Services Committee. My name is Mary Boschult, it's B-o-s-c-h-u-l-t, and I'm here to testify in support of LB961. Thank you for raising this issue for discussion in the Legislature. I retired from state government about six years ago. In my current life, I'm a citizen, and I do volunteer work. I worked for Health and Human Services at the state and at the county level for 33 years. I also taught graduate public administration classes for UNO for five years. I served as the assistant director of the department for 10 years until 2006. My primary work responsibilities involved budgets, staffing, contracts, and coordination for audits or legislative studies. The privatization of child welfare services concerns me on several levels. From a public policy perspective, I believe that the decision making for the safety and welfare of the children of Nebraska placed in the state's custody should be with the state and with the state agency employees that the state authorizes, trains, and supervises. The decisions made in this work are critical, life changing, and affect the rights of parenthood and childhood. The authorizing and funding of a state agency to perform a function according to the laws of this state is a contract of sorts between the Legislature and the agency. The Legislature has oversight responsibilities and also provides an ombudsman function to those impacted by the activities of the agency. From a service management perspective, a one-provider monopoly is a service crisis waiting to happen. If something happens to the staff, the organization, or if the owner decides to stop doing the work on Monday, the children and families are left in the cold. What is plan B? Who's in charge now? Where is the accountability? Limiting the provider network also limits the scope of the safety net in Nebraska communities and therefore limits the number of participants involved in addressing the problems in their communities. From a public values perspective, I am troubled by reports that the lead contractor has included clauses that prevent the subcontractors from making any negative comments about them. This does not fit with Nebraska values or open government practices. Nebraska is known for its open legislative process. I spent many hours listening to public testimony about HHS in legislative hearings, as well as taking calls of complaints, concerns, and solutions from clients, the public, service providers, senators, county boards, and county attorneys. Public agencies know they are open to public scrutiny and legislative oversight. Thank you for the opportunity to comment on this legislation. I would be happy to answer questions if you have them. [LB961]

SENATOR GLOOR: Ms. Boschult. [LB961]

MARY BOSCHULT: Yes. [LB961]

SENATOR GLOOR: Let me thank you for your years of service to Nebraska and Nebraskans. [LB961]

MARY BOSCHULT: You're welcome. I loved every day. [LB961]

SENATOR GLOOR: I'm tempted to ask you to fill out a job application before you leave

just in case we have ... (laughter). [LB961]

MARY BOSCHULT: Thank you. [LB961]

SENATOR GLOOR: Are there questions? Senator Howard. [LB961]

SENATOR HOWARD: Thank you. Thank you, Senator Gloor. You and I talked for a minute in the hall, and I just want you to know how much I appreciate everything you did and the work that you've done for children. It's made a difference, and you did it for the right reasons. [LB961]

MARY BOSCHULT: Thank you. [LB961]

SENATOR HOWARD: You're welcome. [LB961]

MARY BOSCHULT: Thank you for your service, too, Senator. [LB961]

SENATOR HOWARD: Thank you. [LB961]

SENATOR GLOOR: Other questions? Thank you again. Other proponents? Good afternoon. [LB961]

CAROL CRUMPACKER: (Exhibit 5) Good afternoon, Senator Campbell and members of the committee. My name is Carol Crumpacker, it's C-r-u-m-p-a-c-k-e-r. I'm the executive director of the Child Guidance Center, a nonprofit children's mental health center in Lincoln, Nebraska. I'm a licensed psychologist, and I've provided treatment services to children and families in our community for over 32 years, and I oversee an agency that provides an array of treatment programs for children and families. I am here to support LB961, a bill that returns case management for children in the child welfare system to the state. I have previously testified at LR37 hearings regarding the failure of current lead agencies to provide appropriate case management for children receiving treatment services from the Child Guidance Center. Previous testimony provided many case examples and a summary of issues. The LR37 report was commendable in its scope, presentation of facts, analysis, and recommendations. The child welfare system has been paralyzed, and the final report offered true solutions to problems that have plaqued the system and frustrated child advocates for years. Therefore, I am pleased to support LB961. As an agency, we have made every effort to communicate with and collaborate with KVC, the lead agency for the southeast region. Despite frequent communication of problem areas and individual meetings with leadership, little has changed. Issues related to a lack of training, communication, collaboration, accountability, and oversight continue to be significant barriers to vulnerable children being treated with respect they deserve and to the inclusion of treatment providers in making informed decisions about their care. As in previous examples, children are held

Health and Human Services Committee January 26, 2012

in detention for months without treatment and no planning for permanency despite efforts by providers to offer plans to treat those children. Youth are discharged to adult shelters due to a lack of planning and accountability by the lead agency. Permanency planning is started one month before a child is ready to age out of the system. Children's treatment is stopped with no transition planning. Interpreters are not provided for parents who speak another language. Children, and I'm talking about 8- and 9-year-olds, are pulled out of school and sent to residential treatment with no opportunity to say goodbye to parents or foster parents where they're living. As the legal quardian, the state staff CFOMS do not know the children that are in their guardianship. They're not involved in their care beyond reviewing reports and signing off on plans that are too few and have too little information, and they are generated by a third party that has demonstrated no accountability or follow through; and I ask, is this true guardianship by the state who has the responsibility for that child's care? Taken in concert with other bills generated from the LR37 report, LB961 can offer a stable, accountable system that is responsive to the needs of Nebraska's children. One may question the wisdom of reversing course and returning case management to the state. However, this bill is just one of several that together would transform the system of care for children in our state. We, in essence, would not be reversing course but charting a new course. Year after year, Health and Human Services promises change for children with new slogans and goals, but there has been very little change. The reorganization envisioned by LR37 will make changes that force the current competing systems within HHS to come together for children and families. Thank you. [LB961]

SENATOR GLOOR: Thank you, Dr. Crumpacker. Are there questions? Senator Krist. [LB961]

SENATOR KRIST: Doctor, your experience is mostly with which contractor or both? [LB961]

CAROL CRUMPACKER: KVC. We have some with NFC because we have a residential treatment program. [LB961]

SENATOR KRIST: We've had a comment critique that when LR37 stopped, so did our data collection; that would be approximately August-September time frame. In terms of what you've seen--and you've been active in the process in November, December, January--has anything changed? Have the statistics started... [LB961]

CAROL CRUMPACKER: No. No. We continue to...when issues arise, we continue to talk to KVC about those issues. We continue to send Senator Campbell...we continue to send her data on what's happening, and nothing has changed. [LB961]

SENATOR KRIST: Thank you for your past testimony, and thank you for coming today. [LB961]

CAROL CRUMPACKER: Thank you. [LB961]

SENATOR GLOOR: Any questions? Thank you very much. I think we'll go over here. We don't want you to keep walking back and forth... [LB961]

SENATOR COOK: Wearing out the carpet. [LB961]

SENATOR GLOOR: ...and wearing out the carpet, that's right. Welcome. [LB961]

SHARINA SNYDER: My name in Sharina Snyder, S-n-y-d-e-r. First off, I can say I've been in the system since I was 13, so I've dealt with CPS when it was '97 until about five years ago when I got my kids home, and I'm currently reinvolved with the state again. Back then, you can actually get a hold of a caseworker. Not with KVC. I called my caseworker for two weeks straight and finally got a phone call back yesterday, the day before we had court. We had court this morning. My attorney looked at her to try to get answers to find out what I needed to have done to get my children returned home. She could not give a direct answer. She was sitting there, going uh, uh, uh, and could not say what needed to be done to have my children returned. You can call and call and call and not get returned calls back. I have a daughter who just turned one in December who had RSV when she was three months old. For the past six visits now, I have been telling KVC that my daughter needs to go to the doctor. I scheduled a doctor's appointment for her yesterday at 6:30. I ended up having to call and cancel it because they cancelled my visit because they said I was making appointments during the visits. Well, I gave them 24 hours to get my daughter to the doctor. They refused to do so. I talked to the foster care lady, and she said that she can't be in two places at once. My son had a 5:30 doctor's appointment, and my daughter had a 6:30. My son got done at 6:15, and she could have had her other daughter take my daughter to the doctor. So (inaudible). [LB961]

SENATOR GLOOR: So, I'm sorry... [LB961]

SHARINA SNYDER: Go ahead. [LB961]

SENATOR GLOOR: Did you have other testimony? I want to make sure I understand. So are some of your children with foster parents? [LB961]

SHARINA SNYDER: All three of my children... [LB961]

SENATOR GLOOR: All three of them are. [LB961]

SHARINA SNYDER: Well, I have four altogether. My first one I ended up adopting out, and then my two older ones was involved with the state four years ago. I got them home

after fighting for five years with ICCU and their help. I had them, and we finally got them home, was doing good, and then November they came in and said that my house was not appropriate when it just didn't have a kitchen, so they came in again and took my children, and now I can't get a hold of my worker. My worker won't return calls. She won't listen to me when I say my children need to go to the doctor. And with the state, when I was involved, when the state had control over it, they actually listened and tried to help. [LB961]

SENATOR GLOOR: Okay. Other questions? Senator Howard. [LB961]

SENATOR HOWARD: Thank you. Thank you. Did anyone sit down with you, the case manager most likely, when your children returned to foster care and do a case plan with you so you would know what's expected and who would be putting what into place? [LB961]

SHARINA SNYDER: Nope. I asked them. They took my kids out of my home at 2:30 in the morning. I asked them before they left my house what needed to be done. They said they cannot say, that there is too much, and that the CPS worker will be at my house tomorrow. Ask my CPS worker. I took a camcorder to my house, recorded my whole house, showed the CPS worker what they said. They said this is why they took my kids, because my kitchen, and I had some baskets of clothes around it that were clean, I just hadn't got folded. I'm a single mom. I work two jobs. I go to school for 46 hours a week, and I have one child with a disability; and so I don't have time. And I was working on getting my house cleaned, and they said that they would tell me, and they have yet to tell me. They said that my house needed to be, that I needed to have my...first, it was I needed to have my kitchen done. Got my kitchen done within two weeks of them taking my children. Then they were like, well, there's a problem. There's a reason your house is that dirty. I'm like no, I've just been busy. [LB961]

SENATOR HOWARD: So how many workers have you had? [LB961]

SHARINA SNYDER: I've had this worker since it started. [LB961]

SENATOR HOWARD: Since the recent pickup? All right, and you've tried to reach her, and you can't reach her. [LB961]

SHARINA SNYDER: I called her for two weeks straight, and I finally got a phone call back yesterday. [LB961]

SENATOR HOWARD: Does she have a supervisor, someone else you can reach? [LB961]

SHARINA SNYDER: Yep. I've called her supervisor. I even called the gentleman that's

the head of HHS altogether. I can't think of his name. I've even tried getting a hold of him, talked to him, he said he was going to look into my case, and have yet to hear back from him. [LB961]

SENATOR HOWARD: Okay, and you've asked them, maybe you didn't know to ask them for a case plan or some... [LB961]

SHARINA SNYDER: I have asked them. [LB961]

SENATOR HOWARD: ...outline of what the expectation is for you in terms of what you need to do to have the kids returned? [LB961]

SHARINA SNYDER: Well, this isn't my first round with them, so I know, you know, we're supposed to have our team meetings. We're supposed to have a, you know, everything in black and white. [LB961]

SENATOR HOWARD: Right. Absolutely. [LB961]

SHARINA SNYDER: I looked at them. I said, in black and white, what do I need to have done with my house? [LB961]

SENATOR HOWARD: Right. [LB961]

SHARINA SNYDER: They looked at me. They told my attorney that my house needed to be cleaned up, my front yard needed to be done, and have the city inspector come through. I've had all that done. Now I'm playing the waiting game. Okay, what's next? They keep coming up with...KVC keeps saying, well, uh, uh, uh, uh. Now they want me to do a pretreatment assessment or something like that. [LB961]

SENATOR HOWARD: And you're visiting with your children every week? [LB961]

SHARINA SNYDER: I'm supposed to; but KVC now, we had it set up that I had visits Tuesday, Wednesday, and Sundays. My past three Sunday visits they either didn't show up, or we had to end early because the foster home did not send my son's medication with him. And I was supposed to have a visit last night, and they couldn't find somebody to cover, because the person they had doing my Tuesday and Wednesday visits, they decided to pull off my case. So now I'm back to square one. [LB961]

SENATOR HOWARD: So you didn't get a visit because they didn't have a worker. [LB961]

SHARINA SNYDER: They didn't have a worker, and I scheduled my daughter's doctor's appointment. [LB961]

SENATOR HOWARD: Okay. [LB961]

SHARINA SNYDER: They said, well, now we have to find workers to cover. So it was like, okay, am I going to get to see my kids now because you guys pulled this worker off my case? Now I'm back to square one of not getting visits, because I had to fight in the beginning to get visits because they didn't have workers. [LB961]

SENATOR HOWARD: All right. Thank you. [LB961]

SENATOR GLOOR: Other questions? Thank you very much. Other proponents? Good afternoon. [LB961]

LISA KOPERSKI: (Exhibit 6) Good afternoon. Madam Chair and members of the committee, my name is Lisa Koperski, K-o-p-e-r-s-k-i. I am here today to share our story and experience with the current foster care system. My husband and I entered into the role of foster parents with the intention of providing love, consistency, and stability, while ensuring the well-being of a child. We received our first placement, a 3-month-old little boy, in June of 2010. At that time, we had a state caseworker, a family support worker from CEDARS, which is the organization that licensed us, and a family permanency specialist from CEDARS. Each of the individuals kept in regular contact with our home and visited our foster son on a monthly basis. Within a few months of our placement, the family permanency specialist, or FPS worker, transitioned his employment to KVC as the new changes in the foster care system began to be implemented. I would like to talk about these changes and how it affected our case. First of all, the loss of our state caseworker. Our foster son had some medical history issues that required him to have appointments at Children's Hospital fairly regularly. Each appointment would require the hospital to contact and receive permission for treatment to occur. Initially, the hospital would do this with our state worker. However, in November 2010, when her position was removed, it became difficult to know who to contact to grant consent. Treatment was delayed on several occasions because neither the state nor the FPS worker could agree on whose responsibility this was. Our second concern involved the visitation workers. We had conservatively 30 different visitation workers throughout our case who would transport our foster son from our home to visits with his parents. They were responsible for monitoring and documenting their time together. Sometimes one worker would come and pick up our foster son from our home and a different worker would bring him back. On one occasion, I had a visitation worker show up to pick up our foster son, and when I asked for him to show his ID, he did not have it. Another time, I had a worker show up at the designated visitation time, knock on our door and ask, "Is there a foster kid that lives here?" She then gave his last name. I said, yes, he's here, to which she replied, "Oh, he's a boy. How old is he?" I informed her of his age and then commented wow, you really don't have a lot of information about him, do you? To which she replied, "No, I was just told this morning to come here and pick up the foster kid.

Health and Human Services Committee January 26, 2012

Someone else will bring him back, but I don't know who." She then asked me if I knew his parents' names or had their phone number. She literally had only my address and his last name, yet she was supposed to recognize concerns pertaining to the case and report them back to KVC. The visitation workers likewise need to be able to ensure the safety of the foster child during a visit. However, during a doctor's appointment at which myself, the biological parents, the foster child, and the visitation worker were present, questionable behaviors by the parents were occurring in regards to the child's safety. When I turned to the visitation worker so that she could address these issues, she was texting and continued to do so throughout the appointment. In regards to the family permanency specialist role, our foster son was placed with us for just over 18 months. and in that time, we had six FPS workers from KVC. Each month when our CEDARS family support worker would come to our home as required, she would invite the FPS worker as well. Out of those six workers, only three of them made visits to our home, and out of the 18 months to which home visits were to occur, they came only eight times. When our foster son had been placed, his visitation times were in four-hour increments, and 10 months into the case, he was seeing his parents five days a week, four hours each day. The goal continued to be reunification. My husband and I asked the FPS worker to come over for a meeting. During this meeting, we asked her where she felt the case was going. Her reply was, "He'll go back. His parents don't use drugs, and they show up for all their visits." When asked if this was the standard of parenting, her response was affirmative. We then asked her if the visit time could be lengthened. We wanted his parents to have more realistic parenting encounters. We asked if maybe they could have two or three visits a week for eight or ten hours each visit. Her response was, "If I go to my supervisor and ask for that, they won't pay for it." It was 14 months into the case that our foster son then drastically moved from four-hour visits to 24-hour visits overnight. This was when we began to notice an increase in aggressiveness. He would return to our home on a Saturday around noon hungry and tired. His nap would last five or six hours. He then would wake up, eat dinner, have a bath, then go back to bed. He would sleep for another 12 or 13 more hours, and when he woke up on Sunday morning, he was mad. We began to see an increase in head butting, biting, kicking, hitting, and spitting. At only the tender age of one-and-a-half years old, this little boy was letting us know he did not feel secure. With patience and perseverance, we reassured him, and then after some time, he would relax and return to his normal easygoing, happy self. This cycle continued. One time the FPS worker had monitored the overnight visit herself. KVC was short on coverage for visits, so she would fill in occasionally. The visit was to end at noon on a Saturday, and twenty minutes before noon, the FPS worker called us. She informed us that KVC had run out of car seats for the weekend, and the biological parents did not own one. She wanted to stop by and borrow ours so she could transport him from his visit back to our house. I could not understand how KVC could have run out of car seats. Likewise, I could not understand how she didn't realize this until it was time to bring him back. She had over 18 hours to recognize there was no car seat, and thankfully, there was also no emergency. By October, our foster son had moved into 48-hour-long visits, and by

Health and Human Services Committee January 26, 2012

November, he had 72-hour-long visits. I know my time is short; but if I could summarize our feelings, I would say that this experience has left us disappointed, frustrated, and unappreciated. We, the foster parents who spent the majority of the time with the child, had such a little voice. In our personal case, we attended team meetings for six months, and then we were told to please stop coming. Even that being the case, not once did the FPS worker call us prior to or following a team meeting to hear our thoughts, concerns, or achievements. We were merely a babysitter. If ever any information was shared, it was because we the foster parents initiated it through phone calls, messages, or e-mails. The turnover in our case was unacceptable. Individuals making life-changing decisions for a real human being had very limited knowledge of the history of the case. There is confusion as to where the responsibility laid. There was laziness, lack of communication, lack of preparedness, and overall lack of professionalism. The system failed to provide adequate services for the foster child, foster parents, biological parents, and the taxpayers of Nebraska. Thank you for the time, and I hope that some of our story helped you to get insight into the Nebraska foster care system. [LB961]

SENATOR GLOOR: Thank you for being considerate for other testifiers and summarizing, and thank you for the written testimony. It gives us a chance to have that to review also. Questions? Senator Howard. [LB961]

SENATOR HOWARD: Thank you. Are you still a foster parent? [LB961]

LISA KOPERSKI: We are not currently. [LB961]

SENATOR HOWARD: Okay. I'm sorry that you--where do I begin?--weren't treated with more respect, weren't regarded. And you loved that little boy? [LB961]

LISA KOPERSKI: Of course. [LB961]

SENATOR HOWARD: Thank you. [LB961]

LISA KOPERSKI: And so did his parents, you know. [LB961]

SENATOR HOWARD: You (inaudible). [LB961]

LISA KOPERSKI: Yep. Thank you. [LB961]

SENATOR GLOOR: Thank you very much. Other proponents? [LB961]

ROMNEY REUTZEL OLSON: (Exhibit 7) Senator Campbell and members of the committee, my name is Romney Reutzel Olson. I am a longtime volunteer child advocate. I've worked in prevention, intervention, both professionally and for more than 30...probably more than 40 years. And I would just like to read my short testimony, and I

have copies of it for you. When the state takes a child into its care and custody... [LB961]

SENATOR GLOOR: Excuse me for a second. May I ask, would you please spell your name for us? [LB961]

ROMNEY REUTZEL OLSON: (Exhibit 7) Oh, I'm sorry. It's R-o-m-n-e-y, and the middle name is R-e-u-t-z-e-l, and my last name is Olson, O-l-s-o-n. Thank you for reminding me. When the state takes a child into its care and custody, the state becomes responsible, in loco parentis, for that child. Even with good intentions, many resources, and loving foster families, we cause a trauma to this child as well as saying to his parents, indeed his or her whole family, you are a fundamentally flawed human being who is incapable of rearing your own child or children. To say the state has assumed a responsibility is self-evident. Everything that happens to or because of that removal, the results are borne by us all. Therefore, we must proceed with great care and attention to make sure that our actions do not cause further harm to that child. We all know that privatization is being challenged. I give you my perspective based on more than 40 years of working professionally and as a volunteer with children and families. Some of my early experiences came in California, and the knowledge that California provided made me more determined to make sure that Nebraska's children were treated with great care. I believe in collaboration. I believe in listening to each other to form a consensus about moving ahead into uncharted territory. That wasn't done, and voices of many were silenced. Now we are faced with how to move forward when so much is at stake and so little is working the way it should. Bureaucracies are working in a defensive mode. A private company is working at the behest of a Governor who won't listen to reason. Courts are up in arms about the decisions that have to be made without the scrutiny and thoughtfulness that they know is right. What possibilities exist should be more carefully and thoughtfully considered. Please let the report guide your thinking. Do not dismiss the collective wisdom gathered. It was masterfully crafted, and the recommendations are designed to protect children and families. In the end, I believe it will save the precious resources of Nebraska's taxpayers. Instead of chaos, the children will be monitored and managed by trained, dedicated, and professional workers who have the support and respect of the people who work in the juvenile court area. They will be accessible and answerable to the judges, guardians ad litem, and the parents' attorneys. Most of all, it is only just to have the state be directly responsible for the children and the decisions made about them when their parents are not able to do this safely. The chaos that has been created needs to be rectified with all possible speed. The hope for Nebraska's future, its children, rests on the shoulders of Nebraska's Legislature. I thank you very much. Do you have any questions? [LB961]

SENATOR GLOOR: Thank you for your masterfully crafted comment about the report. We worked hard at it, but we were masterfully guided by Senator Campbell and the Legislative Council, so we had good leadership on this. Are there questions? Seeing

none, thank you. Good afternoon. [LB961]

GEORGE NICHOLS: Good afternoon, Mr. Chairman. [LB961]

SENATOR GLOOR: I don't think you'll find the chair too low like some people do. (Laughter). [LB961]

GEORGE NICHOLS: I came in today to support the bill. I've had people that work with... [LB961]

SENATOR GLOOR: Could I ask you to introduce yourself and spell your... [LB961]

GEORGE NICHOLS: I'm George Nichols, N-i-c-h-o-I-s. My daughter was taken out of the house of her mother in November. I was notified by her mother. I was going to come pick up the daughter. I've been working with the mother since she has been born. She's 13 months old as of the 20th of this month. KVC would not let me take my daughter. They knew who I was. They was like, since you ain't with the mother, we haven't seen your house, we ain't letting you take your daughter. Okay. I was like, we've been, I've been taking my daughter instead of her going to day care that the state was paying for, I was taking her during the day. Her mom would pick her up at night and take her home. I would do it every day. We had the plan worked out. We were working together, not fighting like most people that split together and have kids, they usually fight. We weren't. We were making effort to work things out, and when the state came into her house, oh, this is wrong, this is wrong. I took my time off of work, came in, helped do the house fix all up. Now the state's...KVC's like oh, this needs to be done, this needs to be done. After we asked them in the house when they do the walk-throughs, they won't tell us what needs to be done until court. Every time we go to court, it's a whole new list of stuff. It's come to the point I don't know what to do, because every time you turn around, we had one caseworker we've called, we've called, we've called. We might get a phone call back. You can call her supervisor. Oh, it's me that she calls right back after her supervisor chews her ass out for not calling back. I've left messages, and it just, I don't know where it can go, because KVC...I've had people work for them, at this point of the system have quit KVC because the turnover. And my daughter is basically getting lost in the system. She has been gone since a week before November. I've got eight visits in since November, two-hour visits, because they don't have workers or they say, okay, you have a visit Sunday. We show up at the visit with food and everything. Oh, the worker decided not to take the kids. Okay? That's...at least call the parents, for KVC to call the parents and say, oh, the worker can't do it. My daughter's got RSV, had RSV. She's on breathing treatments. We had a doctor appointment scheduled for her. The foster parent wouldn't take them. They took the other kids to appointments then, oh, didn't have time for mine, so my daughter who had RSV, has breathing problems, they forget not to even go to the doctor's appointment. The mother had to cancel it. It's bad when my daughter comes to visit, she's got chunks of snot stuck to the top of her lips

Health and Human Services Committee January 26, 2012

and just running out, and they won't take her to a doctor. Then if they do take her to a doctor, we never know about it until the other two kids what's in foster care tells us that your daughter was in the ER. It's like there's no communication with the caseworkers, and people that bring the kids to the workers, we...I...every time I go to visit, about every two visits, we have a different person. We get to know the person, how they want stuff done, we got a new one. It just, overturn keeps people keep...the workers just quit or they get taken off the case. It's just getting to the point I wanted to voice my opinion about KVC that they need to be taken...taken, get rid of them. Because my friend worked for, before KVC took over, went into KVC, and within a year of when KVC took over, she couldn't handle it. She couldn't stand lying to the parents about why they couldn't take the kids or ...everything. And it's bad when the KVC driver, people that drive the kids to the deals, don't even have the car seat buckled in. My daughter, first visit I showed up, my daughter was in her car seat, 11 months old, in a front-facing car seat, not buckled in. The car seat wasn't even buckled in the car. She was buckled in, but the car seat wasn't. [LB961]

SENATOR GLOOR: Mr. Nichols, how old is your daughter? [LB961]

GEORGE NICHOLS: She's now 13 months. [LB961]

SENATOR GLOOR: Okay. Thank you. Senator Howard. [LB961]

SENATOR HOWARD: Thank you. Thank you, Senator Gloor. Just a couple of quick questions. How long has she been in care, in foster care? [LB961]

GEORGE NICHOLS: Since weekend before Thanksgiving. [LB961]

SENATOR HOWARD: Three months. [LB961]

GEORGE NICHOLS: Yep. [LB961]

SENATOR HOWARD: Two and a half. [LB961]

GEORGE NICHOLS: And we went...the first court date we were supposed to have, they didn't tell us about. It was the weekend of Thanksgiving. Oh, we ain't having court. The mother of my child's lawyer was down there and looked up at the board and saw we were supposed to have court. This is 30 minutes before our court case. This is how good at communication they are when they told us we weren't supposed to have court. [LB961]

SENATOR HOWARD: Okay. Well, my next question is along the same lines. Has anyone from the agency, from KVC sat down with you and the baby's mother... [LB961]

GEORGE NICHOLS: No. They basically refuse to talk to me. [LB961]

SENATOR HOWARD: ...to draw up a case plan so that you have a clear idea of what the expectations are? [LB961]

GEORGE NICHOLS: No. Because the caseworker hardly ever talks to us. It's always has to be at court, has to be at court. She won't talk to us unless she's got all her little groupies with her. [LB961]

SENATOR HOWARD: So she hasn't come out to your home. [LB961]

GEORGE NICHOLS: She, the only thing she's came to the mother's home is inspect the house seeing what we've done to it. [LB961]

SENATOR HOWARD: And that was one time? [LB961]

GEORGE NICHOLS: She's been there like three times, and every time, she won't say what we need to do. It's always, oh, we have to talk to the litem, whoever's in foster care, and everybody else. [LB961]

SENATOR HOWARD: Okay. So you haven't had any team meetings. You haven't had a plan put in place. You're not clear on the expectations. [LB961]

GEORGE NICHOLS: No. No. I just... [LB961]

SENATOR HOWARD: Okay, thank you. Thank you. [LB961]

SENATOR GLOOR: Any other questions? Thank you, Mr. Nichols. [LB961]

GEORGE NICHOLS: Thank you. [LB961]

SENATOR GLOOR: I know there have been a couple of people over here that have been trying to get up. Go ahead. Thank you for all being respectful of the musical chairs that has to go on when we have this many people who want to be heard. Good afternoon. [LB961]

BETTY NISLY: Hi. My name is Betty Nisly, B-e-t-t-y N-i-s-l-y. I started doing foster care in 1980, off and on. I've taken breaks in between; but I am currently licensed with CEDARS, whom I think are wonderful, by the way. Okay. I have worked with KVC with several of my kids. The experience has not been an easy one. It appears KVC is overwhelmed with case overload and poor management. Contact with KVC case manager is close to nil. Except for court hearings, there is no contact. They do not answer their phones. Their messages are overflowed, so they can't accept a message

Health and Human Services Committee January 26, 2012

on their phone, and foster care parents are left dangling in midair. We don't know what the concerns are with the kids. They don't let us know. The only time I ever hear anything is through court or through my CEDARS worker who has a hard time getting through with KVC also. I have not had any past negative concerns with the state. They appear to have more concern for the children than KVC. I see no concern with KVC when it comes to the children, and that's what it's all about is the kids. My concerns are why the middleman? We need to put the money back where it belongs, and once again, I do support returning case management. In the years that I have done foster care, I have adopted six children. I have three state wards that hopefully soon I can adopt. We're in the process of that, and who knows how long it's going to take. The kids are anxious. They've written letters that they want to be adopted, and let's move on with this case. They've asked the courts and stuff, let's move on with this case; but it doesn't seem to be going anywhere. I haven't seen... I saw my KVC worker the beginning of this month, and it was, I think September, the last... I have three kids through KVC. The last time I saw a KVC worker was in September before this month. Phone calls, no. Their phones are full. They can't take my messages. One time I did get through, left a message, no response. And a lot of these to me are very good concerns. The kids have asked me to talk to KVC for certain things; but there's no response. So, like I mentioned, I think it needs to go back to the state. All the years that I've done it...I'm confused. I don't know what's going on with KVC. I just don't understand why they're there to begin with. To me, it's just an added expense. I mean, they do demand more money to run, because they can't run. I don't know where that money is going to. They're not putting enough...I've had...in the last year, I've had four different KVC workers on the same case, and it's, I don't know. They just ... and I've heard from other people there's a lot of no transportation for the kids. It's court ordered that they go for visitation, and there's no transportation for them. So yes, I think it's issues, and the car seat thing, yes, I've experienced that before in the past too, or no car seat. [LB961]

SENATOR GLOOR: Thank you. Are there questions? Senator Krist. [LB961]

SENATOR KRIST: You mentioned court ordered. We've been told in many cases that the judges may be overstepping their bounds. In the time that you've been associated with the foster care program, either with the state or now with the contract, have you ever been aware that a judge would have ordered something that might not have been appropriate or would have been overstepping, or what is your impression? [LB961]

BETTY NISLY: I think the judges prolong things. It's like how many times do I have to go to court for the same thing, and why five minutes? What's that about? You know, I don't know how many times I've gone to court for five minutes, and nothing was accomplished. I think it's a waste of money. They do, I do get a deal in the mail with my court papers. If I have anything to say, I can write it on there and send it to court. A lot of times it goes around and thrown in the trash, so I do... [LB961]

SENATOR KRIST: Is the...I'm sorry. Go ahead. Go ahead. [LB961]

BETTY NISLY: I do think that sometimes they go into it with, they're not really interested in the kids. It's a court case, and it's what we're supposed to do. The law says this, this, and this, and that's what's happening as far as what I see happening there. [LB961]

SENATOR KRIST: Is there any difference between the way things used to be and... [LB961]

BETTY NISLY: Things ran smoothly. My caseworkers from the state were always concerned about the kids. I never...I mean, they were always there when they were supposed to be. They transported the kids themselves. They didn't have people that don't show up for work working for them, so you know it's. [LB961]

SENATOR KRIST: Yeah. Thank you. [LB961]

BETTY NISLY: Yeah. [LB961]

SENATOR GLOOR: Ms. Nisly, settle in. I think you've got some other questions coming your way. Senator Howard. (Laughter). [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. First off, thank you for adopting. Thank you for taking those kids, giving them... [LB961]

BETTY NISLY: Permanency. [LB961]

SENATOR HOWARD: ...permanency, and they know where their lives are going to be basically. [LB961]

BETTY NISLY: Right. [LB961]

SENATOR HOWARD: Since you've had, you've worked both through the state and now for KVC. [LB961]

BETTY NISLY: Um-hum. CEDARS, but I do have KVC kids. [LB961]

SENATOR HOWARD: When you've asked for things for those children, and I know this has happened to you. You've gotten kids that came in with the clothes on their backs. When you asked the state, did you get a clothing order? [LB961]

BETTY NISLY: Yes, I did. [LB961]

SENATOR HOWARD: When you've asked KVC, did you get a clothing order? [LB961]

BETTY NISLY: I haven't asked KVC for a clothing order. [LB961]

SENATOR HOWARD: You haven't asked them for anything. [LB961]

BETTY NISLY: A lot of times, I don't know if it's still that way, I've just got it in my head from the past that they get a clothing order when they're initially put into foster care, but I don't know from transfers if they get...I don't think they get clothing orders. [LB961]

SENATOR HOWARD: Well, what I've heard is that foster parents, and I was interested in your experience, is that foster parents have requested this, and there are no more clothing orders. [LB961]

BETTY NISLY: See, I haven't asked, so I don't know. [LB961]

SENATOR HOWARD: Okay. Well, you're very self-sufficient. (Laugh). Thank you for what you're doing. [LB961]

BETTY NISLY: Okay, thank you. [LB961]

SENATOR GLOOR: Senator Bloomfield. [LB961]

SENATOR BLOOMFIELD: Thank you. The three children that you were hoping to move into adoption, how old are they? [LB961]

BETTY NISLY: Twelve going on 15 or 16 (laugh). I have one that's seven and one that's going to be, in a couple of weeks, she will be nine. [LB961]

SENATOR BLOOMFIELD: Thank you. [LB961]

BETTY NISLY: And they are siblings. [LB961]

SENATOR GLOOR: Other questions? I think the whole committee appreciates the fact you are giving some children permanency, so thank you very much. [LB961]

BETTY NISLY: Yes. Okay, thank you. [LB961]

SENATOR GLOOR: Other proponents? [LB961]

SENATOR KRIST: I think this lady stood up and sat down more than any of us. (Laughter) [LB961]

SENATOR GLOOR: It's part of the state's effort towards physical health. [LB961]

Health and Human Services Committee January 26, 2012

ALICIA HENDERSON: (Exhibit 8) (Laugh) It's my diet and exercise plan right there. Good afternoon. My name is Alicia Henderson. I'm from the Lancaster County Attorney's Office. It's A-I-i-c-i-a, Henderson, H-e-n-d-e-r-s-o-n. I testified in front of the LR37 hearing that was held up in Omaha, and so I'm not going to repeat what I testified to there simply to say that really nothing is much different than it was before. And I have sat through all the testimony today, and that's what I'm hearing is that nothing really is any different than it was then. So I think what I want to focus on today is I think that this committee has its work cut out for it to try to convince other senators that this is the right thing to do. Those other senators have access to the report that was, as we said, what was it, magnificently done, or...yes, it was (laughter) very thorough. It set forth what the issues are, very clearly; but this committee's members have to be able to convince other senators that this is really what's needed and that we're not going backwards. And so I just wanted to bring an analogy to the committee about, you know, this is just what I was thinking about, about a way to talk about it. I think what the root of the problem is what we need to focus on as you're talking to people, and as I'm going to be talking to people as well. So I want to talk about nails for a minute. Everyone else is talking about children, but let me talk about nails for a minute. Let's say you're on the board of director of a company, and your job is to make and sell nails for wholesalers, okay? And you're at a board meeting where the agenda item that they're supposed to discuss is, what is the core business of our company? Because that's what companies do. They talk about what is the essential core business of our company, and then they make decisions about what they are going to contract out and what they're going to outsource based on knowing what their core is. So, of course, they answer--it's a quick meeting, "We make and sell nails, right? That's what we do." Okay, so then we go to the next board meeting in a month, and the item for discussion at that board meeting is, "Should we contract with ABC Company to make our nails for us?" You're on the board. You say, "What's our core business? Well, making and selling nails." And somebody says, "Well, why would we contract with somebody else to do what is our core business? What if that other company starts making an inferior product, or what if they just stop producing? Is there another company that's going to pick up that contract or not? What if they keep charging us more money? Are we, you know, what are we going to have left of our business if we contract away our core business?" Now, at the next board...the answer is, "No, we're not going to do that." So at the next board meeting we're going to talk about, "Should we contract with another company or two to buy iron for our nails?" Nails are made of iron, aren't they, some of them? Okay, yeah. I hoped that was the case. Okay, at that board meeting, you have something to talk about, right? "Is buying iron part of our core business? Well, no, not really. We have to have iron in order to do our business, right? But it's not the core of our business, so let's go ahead, let's look into that. It might save us some money. It might provide us with better, more steady sources of iron. It might give us a cheaper product, whatever." Okay. You know, I probably don't have to go much further than just to say that, and you all know where I'm headed with this, right? Child and Family Services Division of HHS, if you think about it, is a

Health and Human Services Committee January 26, 2012

business, for a moment, What's its core business? Its core business is to look out for the safety and well-being of the children of the state of Nebraska. Now I bet if I polled every single person in this room, it is the one thing that we all agree with, that that is the core purpose of the Child and Family Services unit of the Department of Health and Human Services: safety and well-being of the children. So now we're at the board meeting of the Children and Family Services, and we say, what's our core business? Safety and well-being. Okay, should we contract out, to other agencies, therapeutic services? Well, why not? Is that part of our core business? Well, no. It's helpful to us just like the buying of iron is helpful to us. We might save money, we might get better services, etcetera. Let's look into that. But the next board meeting is, should we contract with outside agencies to provide case management? So then isn't the question really, is case management the core business of the Child and Family Services unit for the Department of Health and Human Services? I've listed on your handouts that you have there what a case manager does; and I probably missed some, and I apologize if there are case managers in the room. You know, I was doing this last night because I always do things at the last minute (laughter). Meeting and talking with children and family members, reviewing police reports, reviewing initial assessments, gathering information from schools, doctors, hospitals, and therapists. May I continue? It won't take long, I promise. [LB961]

SENATOR GLOOR: I'm going to say you're clear to the end, near the end, you're about... [LB961]

ALICIA HENDERSON: Making service referrals, monitoring the children, meeting with foster parents, observing interactions. And what do they do with all that information? They assess the current situation for what? Safety and well-being, both in the long term and the short term, and come up with that plan, the plan that Senator Howard has been talking about since we got here. Is there a plan? That is...and then that person goes to court and testifies with personal knowledge about these things. That's the core business. And I would submit and I think what I'm hearing here is the problems all come from we have outsourced the core business of maintaining the children of the state of Nebraska safely and having their well-being first in our minds. I'm very supportive of LB961. I'm delighted to support it. Thank you. [LB961]

SENATOR GLOOR: Let me ask you a question continuing your allegory or metaphor, I get the two confused. [LB961]

ALICIA HENDERSON: Or analogy or whatever it is. [LB961]

SENATOR GLOOR: Analogy or whatever. Yes. It's very good. I appreciate it. But what if you can't get out of the nail business? What if you just can't get out of the nail business, but you realize that you continue to make a poor product--and you've tried and tried to make a good product; and eventually you say...the board says, "We've got to go to

somebody else who we think can make a good product, because our efforts have just gone nowhere." [LB961]

ALICIA HENDERSON: Then you shouldn't be in the business. [LB961]

SENATOR GLOOR: But what if you can't get out of the business? [LB961]

ALICIA HENDERSON: Well, why could we not get out of the business? Could there not be a bill in front of the Legislature that says that all children and families who are in the court system can be served by this agency? I mean, that is a choice. I would submit to you that would not be a choice that I would be coming up and supporting, but that is a choice. What do you do if...I don't see us doing the same thing in any other place. I was also thinking about, you know, when you have the Department of Environmental Quality, aren't they the people who look at wells? [LB961]

SENATOR GLOOR: I... [LB961]

ALICIA HENDERSON: I think they do, right? They go out and look at wells, right? The actual people who work for the department go out and look at the wells and see if the wells are working, and you know, look at those. They haven't outsourced that. And I do think that I've heard a lot of testimony here today of people saying it wasn't perfect when the department ran it, but it's certainly better than it is now. So we know that we have ways to go. I also heard Senator Campbell talk about the central service areas, the place where we've seen the most progress about reducing the number of state wards, and they don't have the agencies there--so I think there's some evidence that we can make nails. [LB961]

SENATOR GLOOR: Okay. Thank you. Senator Krist. [LB961]

SENATOR KRIST: Thank you for your testimony in Omaha and again here. For the record--I think you said this but I just want to make sure--what you've seen since we concluded LR37 data, and you see it every day in the courtroom, nothing has changed from that time until now? [LB961]

ALICIA HENDERSON: I can say the one thing that I've seen changed is that the court reports are more timely. That's the one thing I have seen changed. I know that's been worked on. That's the one thing. Everything else is the same. [LB961]

SENATOR KRIST: Thank you so much. [LB961]

ALICIA HENDERSON: Um-hum. [LB961]

SENATOR GLOOR: Thank you. Senator Howard. [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. Continuing your nail analogy, do you think if your nail company was underfunded for decades that you'd have a little problem making a quality nail? [LB961]

ALICIA HENDERSON: Absolutely. (Laughter) And you know...and I am...I am preaching at the choir here, you know. I mean, as I'm sitting here, I'm thinking you heard everything. You've heard there's not enough money, and there has to be a way to make children and families our priority so that we can reunify quicker. How do you reunify quicker? When you have one person working on the case who knows everything, who can pull it together, and who the judge can look at and say, I trust you; I eyeball you; I know you're doing a good job. You pulled all this together; I'm going to send those kids home today. You know, that county attorney, she's a little conservative; you know, we're just going to set her aside for awhile; we're going to return those kids home today. That's what you need. [LB961]

SENATOR HOWARD: You've leaped ahead of me on my questions. [LB961]

ALICIA HENDERSON: Oh, sorry. [LB961]

SENATOR HOWARD: (Laugh) You and your nail business are effective. When you have a high turnover of case managers, and I know you see this, because this is... [LB961]

ALICIA HENDERSON: Oh, yes. [LB961]

SENATOR HOWARD: ...the part of it that you're dealing with on a daily basis. When you have that turnover, and I've heard it consistently, you know, the baby has, the baby is in care for five months and has four different workers and four different, maybe no case plan, apparently. But what happens? How does this affect the case, the permanency for the child and the length of the cases in the system when there is that continual turnover? [LB961]

ALICIA HENDERSON: Well, and as you know, it stalls out. It doesn't completely stop; but it stalls out, because that person has to get up to speed and has to understand what happened. I mean, that's what I'm talking about. The people who have read the reports, seen the people, lived with them through the process, watched for progress, seen relapses, those are the people who we will trust when they say: It's time to send the children home, or it's really time to find a different permanent arrangement for these children. So, I mean, and you need that to be one person. It's just...even if I pick up a case...I started doing this job, again, six years ago, and I inherited someone else's cases. I worked my rear end off for at least a year just trying to figure out what my cases were about, what the adjudicated facts were. And I don't even see all of these people.

I'm just the lawyer. I'm not the person who's actually going to make the plan. [LB961]

SENATOR HOWARD: Are you seeing continuation of cases? [LB961]

ALICIA HENDERSON: Oh, yes. Oh, yes. [LB961]

SENATOR HOWARD: Because the judge can't...the worker...I don't want to put words in your mouth. But my question is, do you have case managers from the agencies that are now coming in and they really aren't informed, and so then the case is continued because there's no information? [LB961]

ALICIA HENDERSON: Yes. And there are times when the person comes in: And I, you know, I just got reassigned this case; and, no, I didn't know that; I didn't know there was a psychological evaluation done; no, I haven't read it yet; no, I didn't take that into consideration as I was making my plan. You know, and we're asking them questions, because we're going: The plan seems a little off to us, because we know all those things. And then, yes, you'd have to continue it so that they can... [LB961]

SENATOR HOWARD: So then we fall in violation of the... [LB961]

ALICIA HENDERSON: Right. [LB961]

SENATOR HOWARD: ...six-month review if we don't have that scheduled on a... [LB961]

ALICIA HENDERSON: Correct. [LB961]

SENATOR HOWARD: Yeah, so federal requirements are kind of being... [LB961]

ALICIA HENDERSON: Well, you know, and the judges are always quick to do a review, if they have to do one by six months, but then we continue the rest of it. Do you know? We'll continue, you know, two of the ten recommendations for a further hearing. But then we all have to come back to court. [LB961]

SENATOR HOWARD: So a delay is permanency for the child... [LB961]

ALICIA HENDERSON: Right. [LB961]

SENATOR HOWARD: ... no two ways about it. [LB961]

ALICIA HENDERSON: Exactly. [LB961]

SENATOR HOWARD: Thank you. [LB961]

ALICIA HENDERSON: Um-hum. [LB961]

SENATOR GLOOR: Senator Bloomfield. [LB961]

SENATOR BLOOMFIELD: Thank you. I want to follow your nail analogy a little further. (Laughter) Every nail you have ever built in your factory, you hit it with a hammer, it squishes like a spring. So you say finally, "We can't make nails; we're going to farm that out to somebody." Every time you hit the nail they make for you, it splits. You say, "They don't make the nail any better than we did." (Laughter) And you go to them and say, "We're going to take that nail away from you." And they say, "Wait a minute, wait a minute; that last nail we made, you had to hit it twice before it split." (Laughter) Where do you go from there? Do you leave it there because they're telling you... [LB961]

ALICIA HENDERSON: Doesn't sound like anybody knows how to make nails. That's for sure. [LB961]

SENATOR BLOOMFIELD: They're telling you: We're getting better; we're getting better. [LB961]

ALICIA HENDERSON: Yeah. [LB961]

SENATOR BLOOMFIELD: And you know you don't make the best nail in the world, because it squishes. Do you give them another shot at that nail? Or do you say: Let's go find somebody else or a better way that we can get together and make nails. [LB961]

ALICIA HENDERSON: From my experience before the outsourcing, as I'll call it, of the core responsibilities, the Department of Health and Human Services had its issues. But the Department of Health and Human Services was still on the ball about things like sending me, our office, a request to file a termination of parental rights, for instance; you know, it's time, let's file it, let's send them. Last year--we keep track of this information--in the last two months, I received 2 of those from the lead agency that works with Lincoln. And we filed, I believe, and I don't have my numbers with me, but I think we filed in the last six months 48 terminations of parental rights cases on our own. Our office just did it, because we knew it was time, and the agency hadn't even given us the information that we needed in order to do it. I mean, that's not the way it was. I have never seen--and when I testified at the LR37 committee--I'd never seen judges actually entering the kinds of orders that have been entered in these cases about inadequate case management. Those didn't happen before. So I think the nail was better. [LB961]

SENATOR GLOOR: Senator Krist. [LB961]

SENATOR KRIST: I hate to take seconds, and I'm not using any nail analogies.

(Laughter) What you just... [LB961]

ALICIA HENDERSON: I got myself in trouble with that, I think. [LB961]

SENATOR KRIST: Yeah, you're going to be forever known as... [LB961]

ALICIA HENDERSON: The nail woman. [LB961]

SENATOR KRIST: ..."Nail Henderson," I think. What you've just described to me, and in terms of what I've heard from other sides of the issue, is that judges are doing more court ordering, and they're taking an active role because they have to. And I'm not putting words in your mouth, because... [LB961]

ALICIA HENDERSON: No. [LB961]

SENATOR KRIST: ...that's what... [LB961]

ALICIA HENDERSON: That is what I said. [LB961]

SENATOR KRIST: ... I think that's what I heard. [LB961]

ALICIA HENDERSON: That is what I said. [LB961]

SENATOR KRIST: So the accusation that judges are doing things that they don't need to be doing and ordering things...they're stepping up to the plate when there isn't anybody at bat, so to speak. [LB961]

ALICIA HENDERSON: And that's what, I mean, it is very clear that is what is happening. I mean, judges are calling caseworkers as witnesses, to ask questions. Just yesterday I came out of a court hearing and one of my lawyers was standing there. And I said: What are you doing here? And she says: Well, the lead agency worker is in the office, calling to see if we actually have placement for the child, because that was supposed to have been done before we came to court. So they had adjourned court, and the judge had ordered the lead agency person to go into the conference room and make a phone call and see where we're at with placement. I mean, that, you know, and I think the LR37 report commended the judiciary. I think that's accurate. I mean, sometimes I'm mad at them myself, you know, I'm not agreeing with everything they're doing; I mean, come on, I am a county attorney. But, I mean, they really have had to do things in order to plug a hole, as our office has, as guardians ad litem have, as the parents' attorneys have. I mean, everybody, if you're worried about a child, anybody who is worth half a salt is going to step up to the plate and try to plug that hole. [LB961]

SENATOR KRIST: If you've read the LR37 report and you were actively involved with it

and you really read it and understood it, that fact is there. But until we get it on the record a couple of times, the general population is not going to understand, and the other 44, whatever, I don't know how many are here... [LB961]

SENATOR HOWARD: (Laugh) (Inaudible). [LB961]

SENATOR KRIST: ...but...I'm bad at math. However, the rest of us are going to have to understand that it is something that comes to the table as... [LB961]

ALICIA HENDERSON: Right. [LB961]

SENATOR KRIST: ...a fact. [LB961]

ALICIA HENDERSON: Right. [LB961]

SENATOR KRIST: And the strength of LR37 is in its data and its facts. [LB961]

ALICIA HENDERSON: Yes... [LB961]

SENATOR KRIST: Thank you. [LB961]

ALICIA HENDERSON: ...absolutely. [LB961]

SENATOR KRIST: Thank you for your testimony. [LB961]

SENATOR HOWARD: I think it's LR42. [LB961]

SENATOR GLOOR: LR42. [LB961]

SENATOR KRIST: LR42. Thank you. [LB961]

SENATOR HOWARD: I was helping him too. [LB961]

SENATOR KRIST: (Laugh) [LB961]

SENATOR GLOOR: Other questions? Senator Cook reminds me of my heritage, which is that my family was in the lumber and hardware business. (Laugh) So I can assure you that the vast majority of nails... [LB961]

ALICIA HENDERSON: Oh, I did not know that. I did not research you. [LB961]

SENATOR GLOOR: Well, the number of nails not made out of steel is so infinitesimally small that you can continue using the steel... [LB961]

ALICIA HENDERSON: Iron. Okay. [LB961]

SENATOR GLOOR: ...analogy... [LB961]

ALICIA HENDERSON: And...okay. [LB961]

SENATOR GLOOR: ... if you would like to. [LB961]

ALICIA HENDERSON: All right. [LB961]

SENATOR GLOOR: Thank you again. [LB961]

ALICIA HENDERSON: Thank you. [LB961]

SENATOR GLOOR: And I would also say it's worth noting that when it comes to the report, when it comes to the testimony given as we went around the state, the county attorney representatives who showed up from location to location said pretty much the same sort of thing. That was one of the enlightening things for us, is the testimony in all areas was consistent from location to location and certainly with the county attorneys offices also. So thank you for your involvement in that... [LB961]

ALICIA HENDERSON: Thank you. [LB961]

SENATOR GLOOR: ...past and present. [LB961]

ALICIA HENDERSON: Thank you. [LB961]

SENATOR GLOOR: Other proponents? [LB961]

SENATOR _____: Competitive. [LB961]

SENATOR GLOOR: We will make sure you're next. (Laughter) We don't want your legs to give out from getting up and down, so...welcome. [LB961]

JENAE VANEVERY: Thank you. Thank you for letting me be here. My name is Jenae VanEvery, J-e-n-a-e; last name, VanEvery, V-a-n-E-v-e-r-y. And I am here in support of returning case management to the state. I've been a foster parent for five years, licensed through CEDARS. And we've had a very eventful five years. At the very beginning it was very nice. That's the whole reason we signed up for foster care, was the system of the support and help and guidance. And it's really been a big turnaround. There's no way we could be foster parents without the support of CEDARS, because to have...when you have those emergency situations and nobody answers their phone,

CEDARS does. You need somebody to talk to. I'm here...it's a hard one. [LB961]

SENATOR GLOOR: It's okay. Take your time. [LB961]

JENAE VANEVERY: From September 26 this last year... [LB961]

SENATOR GLOOR: Would you like to step away for a second and come back up? You're certainly welcome to do that. [LB961]

JENAE VANEVERY: I got it. [LB961]

SENATOR GLOOR: Okay. [LB961]

JENAE VANEVERY: It won't get any better. We got a call from CEDARS about midnight asking for an emergency placement of two little girls, 2 and 3. Our second call came that night about 3 a.m. from KVC confirming that we would take these children. They called back then again at 5 a.m. asking if it was okay they bring these girls by. And I said I cannot take them at 5 a.m. because I have class that Monday morning, and I have...we have three little boys of our own that I would have to get up and get to school and all of us to school by 8. And with five years' experience getting brand-new foster children, it's not a quick ordeal. It is a big ordeal. I know they've been up all night. I knew of the situation they came from, and it was pretty ugly. So I said I can't do it before school; I have to go to my class; I'll try to leave class early, if possible; the best I can do is about 1 p.m., and I can come get them. And she argued with me; she's like: No, can I please just bring them to the house, and when you have to leave, then I can take them back to the KVC office? I said, I can't do that. You get these kids at 5 a.m. in the morning; I can't turn around and take them back to an office. That's not going to happen. I know they've been up all night; they're 2 and 3; it's not going to happen. So we agreed that I would go get them. Goodness. I went to get them after class, about 1 p.m. I had a message on my phone from class saying that they would be at this address, to please pick them up there instead of the KVC office. So we went to this address. My husband and I walked in to get these two little girls, and they were in this back bedroom of this residence, sleeping in two twin beds. And we went to pick them up, they were filthy. They had been removed from their home because of unsanitary conditions. They were living in their own fecal matter. They were in KVC's care from around 3 a.m. that morning until we picked them up about 1 p.m., and nobody had washed their hands, washed their face, washed anything on them. They were covered in their own poo. The little 3-year-old's pants were torn on her rear end, and so her little bottom was hanging out. And it was just (inaudible) that nobody gave her a change of clothing, nobody cleaned them up, nobody washed their hands, washed their face. They were so, so dirty. So my husband and I, we grabbed the girls, we went straight to the car, with the windows down, because, oh, heavens, they were strong smelling. Got them home, straight to the bathtub, washed them up. And after their baths...it took about

Health and Human Services Committee January 26, 2012

three times washing to get them through. The assigned KVC worker and the assigned CEDARS worker came by and helped do the assessment on the girls, to look for bodily damage, sores, and just looking at their physical appearance. And they were both appalled that it had been that long of time between the call of asking to take them and, when I finally got them, that nobody had cleaned these children up or gave them a change of clothing. The clothing I took off them were stiff from urine and feces. And that the little 3-year-old girl's collarbone was rubbed raw from the stiff shirt. I don't understand why they were never changed. Sorry. CEDARS was very, very upset that the girls were in this condition after they'd been in KVC care for that time period. They asked me to call CPS and make a report on KVC for the situation. I did so. I have not heard anything in response back from CPS in regard to the report. That pretty much sums it up. [LB961]

SENATOR GLOOR: Thank you for having the courage to share an obviously painful story. Senator Howard. [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. Thank you for what you did, and thank you for caring. Sorry we didn't have any water earlier; we seemed to...the well ran dry, for some reason here. But thank you for taking them and...do you still have them with you? [LB961]

JENAE VANEVERY: Nope. They have since been moved to a possible adoptive home. [LB961]

SENATOR HOWARD: Well, that's a good thing. That's... [LB961]

JENAE VANEVERY: Yeah. We have three boys of our own, so we had five under the age of 8, so it was... [LB961]

SENATOR _____: A lot. [LB961]

JENAE VANEVERY: It was a lot. It was one of those... [LB961]

SENATOR HOWARD: So...and you still...and you still look good. (Laughter) [LB961]

JENAE VANEVERY: It was one of those emergency placements that go for three months. [LB961]

SENATOR HOWARD: Thank you. I think I can safely say that for all of us. [LB961]

JENAE VANEVERY: It was just hard to see the children in that shape when we arrived. It was just appalling and just shocking. [LB961]

SENATOR HOWARD: You have the right to expect better. You have the right to expect an agency is going to... [LB961]

JENAE VANEVERY: The girls have... [LB961]

SENATOR HOWARD: ...do the right thing for children. [LB961]

JENAE VANEVERY: ...the girls have a right to better treatment than that. [LB961]

SENATOR HOWARD: Absolutely. Absolutely. [LB961]

JENAE VANEVERY: Just the dignity of a little girl...to have her heinie showing. [LB961]

SENATOR HOWARD: Right. When we take a child out of a home, it's because there are safety issues primarily. And we don't need to compound the problem; we need to start to rectify it. [LB961]

JENAE VANEVERY: Um-hum. [LB961]

SENATOR HOWARD: So thank you. [LB961]

SENATOR GLOOR: Other questions? [LB961]

SENATOR LAMBERT: I just want to say there's no excuse. And thank you for telling us that. [LB961]

SENATOR GLOOR: Thank you very much. [LB961]

JENAE VANEVERY: Thank you. [LB961]

SENATOR GLOOR: Please. [LB961]

SENATOR LAMBERT: Thank you so much. [LB961]

SENATOR GLOOR: Good afternoon. [LB961]

CANDACE McPHERON: (Exhibit 9) Good afternoon. Sorry. That's tough. My name is Candace McPheron, C-a-n-d-a-c-e McPheron, M-c-P-h-e-r-o-n. And I am a proponent to LB961. I am currently a foster mom to five children, ages 17, 16, 14, 10, and 4. While I consider myself somewhat new to foster care and the system, I am concerned with the current situation of the child welfare reform. The reason I wanted to do foster care was to give the children in need a loving and stable environment. All children are our future. It is my belief that we need to take care of the children now so that we don't have to take

Health and Human Services Committee January 26, 2012

care of them when they are adults. I try to teach the children that I am raising the skills that they will need to live a productive life and be responsible, productive citizens. I must say that I do not know what all the solutions are; however, I do not believe that the current way of privatization with KVC is working as best as it can be. Currently in this world we are trying to teach our children that bullying is wrong. I believe that by KVC demanding more money from the state of Nebraska or they will back out is bullying. Would it be fair to our children if each of us foster parents came to you and demanded more money or we would abandon all of our children in need? No, it would not be tolerated. While I believe that payments to foster parents need to be addressed, I understand that today is not the day to address it. We as foster parents currently hear that our case managers, service coordinators, etcetera, are overloaded with cases. It is not the fault of our children there are not enough workers to care for our children. KVC is a private organization and a for-profit organization that has had the opportunity and ability to hire as many employees as needed to care for our children. However, they have not done this. They have been given additional funds and are still unable to provide the children with what they need to enable them to be the best they can be. There are several topics that are of concern and only a short amount of items that can be addressed today. Some concerns are: caseworkers are overloaded with cases and do not have the adequate time involved for each child. There are caseworkers who do not return phone calls in a timely manner. I have experienced full voice mails and therefore no return phone calls. This can go on for days and even weeks. While we need to work as a team to do what is best for our children, this is not always happening. I have routinely experienced not all team members being invited to team meetings; therefore, not everyone involved in the case is in the know. We have situations that are harmful to our children while on visits with parents that are not being addressed to visitation staff. I have had to explain to visitation workers what can and cannot happen on a supervised visit, because they have not been informed by the caseworker. Biological parents, foster parents, visitation workers, therapists all have the same complaints: very little communication and there must be more accountability. R-E-S-P-E-C-T, respect. While I am only the foster parent, as I have been told, the lack of respect for us foster parents is enormous. Please know that we foster parents are the ones who love and care for our children 24 hours a day, 7 days a week, and 365 days a year. There are no weekends off, no holidays, and we must always be available to care for our children. We are with them each and every day. While the biological parents might follow through with visits with their children, while the service coordinators meet them possibly once a month, while the guardian ad litem may see them occasionally, while their therapist sees them twice a week, we foster parents are their only constant and stable caretakers. However, what we have to say for the well-being of our children is very often ignored. I may not have a fancy certificate hanging on my wall that states I have a degree, but I know my children. I know what makes them happy. I know their fears. And I hear from them each and every day how they just want to be regular kids. Please, please, please, don't treat us as if we are nothing to our children. I have experienced a teen that was approaching 15 out of 22 months, time to send her home.

Health and Human Services Committee January 26, 2012

Teen states she knows it's not the best thing for her. I say I don't believe it's in her best interest to go home. KVC states, we need to get our numbers down. She goes home. Within months she is back in foster care. Placement at that time failed. Now she is in a higher level of care, in Geneva. I have experienced children waiting for months to know their future. Approximately six caseworkers in less than a year. No follow-through with case plans. Might I add, I am going to be doing guardianship for these three kids. I have experienced a child with medical needs. KVC staff is not trained to care for their needs. I have experienced caseworkers not communicating with all necessary team members yet leading team meetings and writing court reports. I have tried to do my best to advocate for my children and will continue to do my best. It is my responsibility to speak up for the children that I care for. While I do not know all the solutions to this disaster that we have in our system, I support this bill and believe it is in the best interest of our children of our state that DHHS take control of this situation and take back the leadership. Our children deserve the best that they can get. And I believe that privatization has had the opportunity to provide this and has failed. It's not about getting numbers down. It's not about what is best...it's about doing what is best for each and every child. It's not about how much money we spend now as children but rather how much we are investing in their future and how much we will be saving in the future. As I sit here before you today, I know many foster parents who would like to have the ability to be here to advocate for their children; however, due to sessions being held during working hours, they cannot leave their jobs to attend. I am licensed with CEDARS, and without their support I, too, would not be a foster parent. Thank you for taking your time to hear me out. And please know that I plan to continue to advocate for my children, all children. Thank you. [LB961]

SENATOR GLOOR: Thank you very much. Any questions? Seeing none, thank you. Can I see a show of hands of the number of people remaining who want to speak as proponents? Get them high, please. Okay. We'll continue. Next proponent. Good afternoon. [LB961]

MARY JENNINGS: (Exhibits 10, 11, and 12) Good afternoon. My name is Mary Jennings, J-e-n-n-i-n-g-s. There is a handout coming out that I would like to use to introduce my family to you. I'm not a public speaker; I'm a mom. And I get emotional about my family, so bear with me. This article was written about my family in 2005. In 2009 we started to deal with a lot of drama caused by my daughter Savannah's disabilities. She was diagnosed with FAS at age 2.5 at the Munroe-Meyer Institute in Omaha. She also has a diagnosis of ADHD, mild retardation, oppositional defiant disorder, and bipolar. Our home became a house of terror due to Savannah's violent and aggressive outbursts. I tried without success to obtain services to help with Savannah's behavior from all the agencies I could find. She was either too high-functioning or too low-functioning for every program I found. I even tried Villa Marie School in Waverly; it's for special-needs kids. And she was kicked out of there in less than 60 days for her aggressive, assaultive behaviors. After several assaults on the

Health and Human Services Committee January 26, 2012

vounger children and myself, a couple of stays at CAPS, assaults on care providers. assaults on teachers and students at school, and watching my three younger children sleep on the couch, the love seat, and in my bed because they were too afraid...they were afraid Savannah would hurt them in their sleep, I finally contacted the court system, hoping for court-ordered treatment. I adopted all four of these children. They used to be foster children; I was a foster mom for 14 years. And I adopted these four. At that time--it was October 2010--I found out that Savannah would have to be a state ward to receive the type of treatment she needed, which I don't understand. The adoption agreement that I have states, under General Provisions, number 8, the coverage for preexisting medical or mental care or treatment will be provided by the state if it is not available through Medicaid. But she had to be made a state ward to get treatment. Only a state ward qualifies, under Medicaid, to receive enhanced treatment. At that time she was admitted to OMNI treatment home in Columbus, and overseeing of the case was by KVC. The first couple months Savannah was at OMNI things went well. Then a new worker from KVC was assigned in January. From January to July I had no contact with KVC. They left me out of all the team meetings. I didn't meet the KVC worker until we went to court in July. When he was guestioned by the judge why I hadn't been included in the meetings, his response was that he thought he had a nonworking number or a wrong phone number for me, which would be really odd, because I've had the same cell number and house number for more than 12 years, and I've had the same work number and e-mail address for 23 years. At the time of that July hearing it was made known that OMNI in Columbus would be closing and that Savannah had to be moved. She was still exhibiting a lot of aggressive behavior and it was not safe, for the other children, to bring her home. Placement was discussed with KVC, and I strongly suggested another treatment center so that Savannah could continue to receive treatment which would enable her to return home. KVC's decision: to warehouse her in a foster home instead of treatment. I tried to explain that needing a place to live was not the issue with Savannah; Savannah needs treatment. I was told by my court-appointed attorney that KVC and the state were the legal custodian and decision makers and I needed to trust their decision. Everything continued to go downhill from there. In August my court-appointed attorney suggested I consider guardianship or adoption for Savannah as a new permanency plan. And I thought about it and realized how slow I had been to see the big picture KVC was giving me. I think they made that decision back in January when they started to leave me out of all the team meetings. I'm just so used to advocating for Savannah to receive every possible service to help her reach her full potential that I lost sight of what was going on right in front of me. To this day, I have only been included in two team meetings. They have continued to not be honest with me, such as sending me an e-mail the morning of a team meeting telling me it was just rescheduled that morning, only to find out that it was actually scheduled at the prior team meeting the month before. Even today, the only contact I have had with KVC is two court hearings and two team meetings. The court hearings have been horrible. I dread them, because I am treated like I am on trial. KVC has submitted untrue court reports, as well as the guardian ad litem. At the last hearing, it was witnessed by

members of NFAPA, who came as family support for me. I think they were as floored as I was at the way I was treated. If they can treat me like the bad guy, and I came to them for help, how must they treat the families that have had their children removed from them? It makes we wonder if they even have a chance of reunification. During this time, I've had three different caseworkers in 15 months. But the only time I see them is at court. [LB961]

SENATOR GLOOR: Thank you, Ms. Jennings. Are there questions for Ms. Jennings? Seeing none, thank you for taking the time. Other proponents? [LB961]

DEB STRUDL: Good afternoon. [LB961]

SENATOR GLOOR: Good afternoon. [LB961]

DEB STRUDL: (Exhibit 13) Senators, my name is Deb Strudl, D-e-b S-t-r-u-d-l. I have been employed with the Nebraska Department of Health and Human Services before it was called that; it's been over 26 years. I have worked as a children and family services specialist and before it was called that, when it was child protective services. I'm here today to speak on behalf of my coworkers, my past coworkers, and...as well as NAPE/AFSCME, who is a representative of the state employees for the state of Nebraska, to support LB961. You've seen a lot of reports; you've had a lot of hearings; and I don't think I'm going to tell you anything you don't know or you haven't heard. I will say this, the need to pass this bill, I believe, is urgent. The committee's first sentence of the bill, to me, was so powerful, and it's the crux to providing services to children and families in Nebraska. Those of us who have dedicated our lives, our careers, to looking out for the well-being, safety, and permanency--which, 26 years ago we called it different things, but it pretty much was the same--have been horrified by some of the stories that we've heard today...some of the foster parents I've heard, some of the parents I've heard. I've known Ms. Jennings for the entire 26 years I've done children and family services, and I wanted to cry back there with her. The department does, in fact, retain the legal custody of wards of the state. That does remain the responsibility of the department. When the department goes into court--I believe that Ms. Henderson indicated that--it isn't the contract agencies that the judges turn to. When the court finds the Department of Health and Human Services did not make reasonable efforts to assist a family to correct the conditions which led to them coming into the court system, it's not the contracted provider they're finding those no reasonable efforts on, it's the Department of Health and Human Services. Judge Rouse recently ordered that a meaningful and accurate court report be provided to the next review, and if it did not come in and have any meaningful, pertinent, current information, he was going to hold the department in contempt of court, not the contract agency, the department, because it's our responsibility to provide those. That's powerful. That says the courts, our judicial system, recognize this responsibility lies with the department. LR37, again, I'm not going to reiterate, everyone thinks it's wonderful, I think it's pretty wonderful. LB961 was also

Health and Human Services Committee January 26, 2012

crafted with the insight taken from all of the previous information this committee has obtained. It was said earlier, currently the taxpayers of the state of Nebraska are in a difficult spot: You can pay out millions of dollars, or the remaining agencies will fold. We have had issues with that, as they not only get paid the contract rate, they're able to bill the Medicaid Magellan because they have in-home therapists. That's a lot of money. I watched the presentation on NETV, and it said, "Privatization efforts typically cost more money; Nebraska believed it would be cheaper." In that same thing it said that Nebraska had a 27 percent increase in the cost of privatization. I think, historically, research that was done indicates privatization does indeed cost more money, and that doesn't necessarily mean you're going to get good services. The committee does realize that the cost of services to children and families can be impacted by that conflict of interest. It was indicated in the bill. We've lost a lot of providers, and not just the Visinets or the CEDARS or Boys and Girls Home; we've lost therapists within this community that have expertise in areas that our state wards need that expertise, because they're not being utilized. I will say this, that... I heard this from someone else, and I have to agree: the only nonprofit is the government. The state case managers, the children and family services specialists, or whatever they may be named in the future, whatever they were in the past, we do not get anything monetarily out of it. I've read the reports in the news, where people have said you do get...the more they keep children in foster care, the more money they get. That is not true with the state. I don't know if that's true of the other agencies. I obviously do have more information. I see that it's red. I do have a lot of information taken from other case managers within the department, which...they're not called that anymore. If the committee would like that, I will make it available to you upon request. [LB961]

SENATOR GLOOR: Thank you. And we are collecting information all the time. So if you would like to supply that, we'd love to have it. Are there questions for Ms. Strudl? Thank you. Senator Howard. [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. In the work that you've done, have you had situations where you worked with a family on a case plan or been involved in a case plan with a family? [LB961]

DEB STRUDL: That...that would be... [LB961]

SENATOR HOWARD: Maybe you didn't do it directly but... [LB961]

DEB STRUDL: ...no, that would be a core part of it. Not only have I been a case manager with the department, I was also in the Integrated Care Coordination Unit from its inception in 2002 until 2008, when I returned to case management and now children and family services specialist. So, yes, I did case plans, hundreds of them. [LB961]

SENATOR HOWARD: Good, good, good. So maybe you can share a little bit about why

that's important. [LB961]

DEB STRUDL: For several reasons. When a case initially comes from the intake worker to an ongoing case manager, the purpose of that is to develop a plan of corrective action. So the case plan is your plan of corrective action. It is the heart and soul of what you're doing with a case, with a family, with a child. It's there to provide that protection for that child and well-being. And I think well-being is a word that's bandied around and a lot of people don't know what it is. But as a case manager, we're trained; we've had training. I have three or four pages when I go into court as a witness, three or four pages of trainings I've had. So the purpose of that case plan is to determine what are the issues that brought this family to our attention, whether it is a court-ordered situation or a voluntary situation. From that, we look at what are the parents' capabilities. You know, are they able to go to inpatient treatment, are they able to go to outpatient, what has been recommended, what hasn't been recommended, what is realistic from the recommendations that have been made that they can do? And try to develop a plan that will help them correct whatever it is that brought them to our attention, whether it's drugs, whether it's domestic violence, whether it's poverty, whether it's poor parenting, lack of empathy, physical abuse, what is going on with them that they need to have corrected. And that case plan is there outlining what the problem is, what the strategies are, what the services are going to be to get this family fixed. [LB961]

SENATOR HOWARD: Do you feel it's important to have the parents involved, number one? And number two, do you feel it's important to get this done in a timely fashion? [LB961]

DEB STRUDL: I think it has to be done in a timely fashion. The case plan, when I was doing case plans, when my colleagues and coworkers were doing case plans, usually started at that first meeting with the parents. And it was well before court, it was well before, someone said, it had to be done. It was...the planning part was there...the parents have to be involved in it, because they have to buy into it. I can tell parents: You will do this. Judge Nuernberger, who has passed away, once told me, "This is a very wonderful plan." I was young then, probably my third case planning court report. "This is a very wonderful plan. It's not going to work, it's not practical, but it's a very nice plan." (Laughter) He kind of helped me redo that plan right on the spot. And it did make sense. When I'm telling someone, you will do this and you will do that, especially with adults, who have free will, it's a little different. But if they're telling me, we think this will help us, definitely, definitely, they need to buy into it, and then they will act on it. There are some absolutes, you know, that can't be given. But I think when that's presented to a parent, they can buy into it. And I think that's something that comes with skill and training, you know, as has been pointed out. When you have that skill, that training, that expertise, you definitely can talk to parents in a way that they will buy into it. [LB961]

SENATOR HOWARD: Well, not to imply that you've been doing this for a while, but you

are a good example why experience counts. [LB961]

DEB STRUDL: Thank you. [LB961]

SENATOR GLOOR: Other questions? Thank you for your service... [LB961]

DEB STRUDL: Thank you. [LB961]

SENATOR GLOOR: ...to our kids and to the state. [LB961]

DEB STRUDL: Thank you. [LB961]

SENATOR GLOOR: We're going to take a short break. We'll reconvene at a quarter till. It's good to stand up and move around occasionally. And then there's the issue of the house of comfort. So we'll be... [LB961]

BREAK

SENATOR GLOOR: Next proponent, please. Next proponent. Thank you for being brave enough to weather the noise in the background. It's usually when somebody starts talking, people calm down, so... [LB961]

MELANIE WILLIAMS-SMOTHERMAN: Uh-huh, exactly. Thank you, Senator Gloor. My name is Melanie Williams-Smotherman, M-e-I-a-n-i-e Williams-S-m-o-t-h-e-r-m-a-n. I did not come with prepared testimony for this bill, but I am working within my capacity as executive director of the Family Advocacy Movement to comment on it. We represent and advocate for birth families and their children who have been, in most cases, unnecessarily and/or unjustly caught up in the child protective services system. And now, increasingly, we're hearing from also families with children in the juvenile justice system. I have been asked on many occasions since the discussion over privatization to articulate whether or not the Family Advocacy Movement is in favor of Families Matter through the privatization of case management. And in former testimony to this committee, I have made it clear that in general and statistically, if we were to look at case management privatization throughout the country, that's not really the question that I wish we were asking. I understand the relevance, considering how this state has moved so rapidly toward this system without levels of accountability, input from stakeholders, and any really good foundation for justification that would put our minds at ease about that move, actually showing that Families Matter would actually flip the pyramid on the removal rates of children in our state and serve more children in their homes, which is the reason that is consistently put forward as justification for the privatization efforts. I'm here to say that we review cases and observe cases of many families who are caught up in the system. And we have been doing this since before the privatization effort. And I speak also from experience of being a parent whose family

Health and Human Services Committee January 26, 2012

was unnecessarily and unjustly caught up in the system. And we did have DHHS case management, and it was horrible. At every level and every layer of the process, there were inaccuracies, inappropriate behaviors on the part of officials, a lack of accountability, improper investigation, not even an interest in true investigation, a lack of due process, at every stage. And, you know, I've been testifying in front of this committee before Families Matter, and I've said those same things. With that said, we have heard so many complaints since KVC has taken over case management, which isn't a surprise to me. I warned about this as well, as I'm sure many other people did, that when we don't have a good foundation in place before such a move, we're not going to have a good one after the move. There were so many problems with the system prior to this privatization effort that were never addressed properly and still aren't being addressed properly, and we're going to continue to see the problems in our child welfare system within our state that place us as second in the nation for taking children from their homes. And that is the travesty. I can tell you that between KVC and NFC, NFC has fared much better with comments from families. And maybe there's a good reason for that that we all understand, and that is that it's based out of Boys Town, with a philosophy that children really do grow up better in homes. But I would like to say, and I believe that many from Boys Town would agree, that they grow up better in their own homes, with their own birth families. And that is what I would like this committee to make sure is built into any discussion, any legislation, is that recognition that birth families do not...they shouldn't be situated on a level playing field with any other stranger. That's not fair; it's not accurate; and it's not right for children. I hope that in this effort to reduce caseloads, that this committee isn't just looking at hiring more caseworkers. We need to really look at what the problems are in our state for this high rate of child removal. And I would implore you to put into place safeguards that consist of greater transparency, greater independent oversight, and real accountability in the system, so that when it can be shown that cases have been either maliciously brought or continued or there have been grave malfeasance and negligence in the system, that there is some sort of place for families to get relief and children to get relief. And with that said, I'll take any questions. [LB961]

SENATOR GLOOR: Thank you, Melanie. [LB961]

MELANIE WILLIAMS-SMOTHERMAN: And thank you. [LB961]

SENATOR GLOOR: Are there questions? [LB961]

MELANIE WILLIAMS-SMOTHERMAN: Thank you. [LB961]

SENATOR GLOOR: Seeing none, thank you again for your testimony. [LB961]

MELANIE WILLIAMS-SMOTHERMAN: Appreciate it. [LB961]

SENATOR GLOOR: Next proponent. Afternoon, Terry. [LB961]

TERRY WERNER: (Exhibit 14) Good afternoon, Senators. My name is Terry Werner, T-e-r-r-y W-e-r-n-e-r, and I'm the executive director and lobbyist for the Nebraska Chapter, National Association of Social Workers. Even though we are here officially supporting this bill, even though our Advocacy Committee officially supports this bill, we do recognize that we have members on both sides of this issue. Therefore I'm going to direct my comments to the bill's recognition of the high importance for training and competently providing services, reducing turnover, and the efficient use of taxpayer dollars. We also find that the provisions relating to the reductions in caseloads is critically important. The bill quite correctly emphasizes training, and it is no surprise that recruiting and retaining a competent child welfare work force is key to successful outcomes. A study by the Child Welfare League of America indicates that social work degrees are the most appropriate degrees for this field of practice. No other profession requires the practical experience at the bachelor's level, and few can match the master's level. I realize that there may not be enough social workers in Nebraska to fill the need, but the current practice of not having hiring standards is unsustainable in successful case management. I also don't believe that it is adequate to hire people and expect that they will have the necessary knowledge and skills with 10 to 16 weeks of state-provided training or, worse yet, to have no standards whatsoever. Consequently, NASW would like to make the following suggestions. One, that case managers should possess at least a bachelor's degree in social work or a field that can demonstrate similar training. Case managers should show experience in child welfare, either in their work history or in practicum experience. Case managers should be 21 years of age or older. Bachelor's of social work should be licensed in the state of Nebraska. All case managers, regardless of employer, should be required to have 32 hours of continuing education in child welfare over a two-year period, similar to the certified and licensed mental health practitioners are required to have over their two-year period. There should be safety training requirements as proposed in LB402. There should be loan forgiveness incentives statewide for social workers, not just in the underserved areas, as I believe the entire state is underserved in this area. The state must utilize federal Title IV-E funds for training social workers; this is federal funding that the state is not taking advantage of. And, last, one that you've heard before, we should have a master of social work school at UNK. I know that training is not the whole solution; it is only part of the solution. And I know that perhaps I even sound a little self-serving here today. But I am adamant that training must be part of the solution. And the suggestions I gave I hope you'll consider. And I'd be happy to take any questions. [LB961]

SENATOR GLOOR: Senator Howard. [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. Well, looking over your laundry list of suggestions, as you call them, which I wouldn't disagree with, do you feel that the supervisor of the worker should have an equivalent amount of training, experience,

education? [LB961]

TERRY WERNER: Absolutely. And there should be a supervisor... [LB961]

SENATOR HOWARD: Would you feel that the supervisor of the supervisor should have, maybe, that much knowledge and information? [LB961]

TERRY WERNER: (Laugh) Well, one would hope that's how they got there, but... [LB961]

SENATOR HOWARD: (Laugh) So we like to think. So what you're saying is in this particular field that requires knowledge that you might not get in the business world or Walmart as a greeter requires special training, special knowledge, special experience. [LB961]

TERRY WERNER: Absolutely. And as you all heard Auditor Foley say, that he found Taco Inn employees doing case management and...which is astounding. And social workers...there are...I don't know of any bachelor's level degrees that requires practicum field experience, as social workers do. Bachelor's level social workers are uniquely trained and should have top priority in the hiring process. [LB961]

SENATOR HOWARD: Well, and I will take this a step further, that in order to have the best possible system of delivery of services for children and families, possibly the person who is at the head of the organization should have knowledge in this particular area. [LB961]

TERRY WERNER: Of course. [LB961]

SENATOR HOWARD: Thank you. [LB961]

SENATOR GLOOR: Any other questions? Senator Krist. [LB961]

SENATOR KRIST: Carrying that analogy one step further, in a leadership position in the state, where there's oversight of the programs that go on, could you imagine that that person picked for a position of leadership would not have a degree of some kind in either social work or in a related field? [LB961]

TERRY WERNER: I can't imagine. [LB961]

SENATOR KRIST: I can't either. [LB961]

TERRY WERNER: I mean, I believe in credentials. And I believe that training is important and fundamental to the positions you're talking about. [LB961]

SENATOR KRIST: Thank you. [LB961]

SENATOR GLOOR: Other questions? Thank you, Terry. And as long as the afternoon has been, the committee should be thankful that Senator Hadley doesn't sit on it, or we'd be spending quite a bit of time talking about the UNK recommendation, I believe. (Laughter) [LB961]

SENATOR KRIST: Yes, we would. [LB961]

SENATOR GLOOR: Other proponents? Please, step forward. [LB961]

GAIL STEEN: Good afternoon. [LB961]

SENATOR GLOOR: Good afternoon. [LB961]

GAIL STEEN: (Exhibit 15) My name is Gail Steen, G-a-i-I S-t-e-e-n. I am an attorney in private practice here in Lincoln, Nebraska. I've been in the juvenile court arena for about 20 years. I've represented both the Department of Health and Human Services in juvenile court, as well as representing parents, being a guardian ad litem, and representing youth that are under either a truancy or a law-violation case. I have agreed with everyone that's been up here. You know the system is not working as it is. Privatization is not working. I'd like to focus on something else for my testimony. I have prepared testimony that kind of gives you my little story about what's going on. But rather than reading through it, as I know you all can read, I would like to focus on Section 3, which is about the case manager caseload. Whoever is in charge cannot do a good job if you have too many cases. All you're doing is putting out fires; you're not able to think, you're not able to react. That has been a consistent problem with the department as well as with KVC. So I think that part of the bill is also very significant to this issue. You've got to have a reasonable caseload so you can do your job. The current caseload is not reasonable. KVC is now advertising that they have 16 cases per worker; that's not true. They've got a bunch of new workers that don't know what they're doing. Some of them have five; some of their supervisors have five. They don't know what's going on. KVC is supposed to be serving the whole family. I have one that didn't even know there was other children in the house, other than the child that was adjudicated. We've got consistent problems with the service that's being given. Until there's a reasonable caseload we're not going to have anything better, regardless of who is in charge. Obviously you can read, so I'm not going to go through the rest of the testimony. But I'd be happy to answer any questions, happy to offer any suggestions that I have. [LB961]

SENATOR GLOOR: Thank you, Ms. Steen. And thank you for being succinct. [LB961]

GAIL STEEN: (Laugh) [LB961]

SENATOR GLOOR: Senator Howard. [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. Thank you for coming in. [LB961]

GAIL STEEN: Certainly. [LB961]

SENATOR HOWARD: You know, I start to feel like "This Is Your Life" when I see so many faces of people that I know. Thank you... [LB961]

GAIL STEEN: Um-hum. [LB961]

SENATOR HOWARD: ...for what you've done. When you...you've sat through most of the testimony this afternoon? [LB961]

GAIL STEEN: That's correct. [LB961]

SENATOR HOWARD: I hope you can stay around till...as long as it goes on. But when the...I fully expect the department to come in, Health and Human Services, and say: We've had problems in the past; we're working them out; things are getting better; we're on the right path; it's going to go along; you've got to give us time. What's your reaction to that? [LB961]

GAIL STEEN: Yada-yada-yada. We've heard that. We've heard that. It's not been changed. They...we were two years ago in the process of: this is going to be so much better; this is going to work; we're going to do this; we're going to do that. Nothing has ever gotten better. The only time that it's ever shown any promise is when we had both case managers and service coordinators. The service coordinators were the KVC workers that essentially assisted the case managers because that allowed the case managers to look at the big picture, to look at where are we going to head this bus. And the service coordinators were the ones that made sure there was gas in the tank, made sure that the tires were properly inflated, made sure the therapists got that stupid letter to the court. That was the only time this reform ever showed any promise. And the only reason, I think, that worked was because it effectively reduced caseload, that they allowed the worker to actually think about what makes sense for this family: How am I going to fix this? Does it make sense that we're having them take this parenting course when the child is not there and the person barely understands English? I don't think what they've put forth for, we're going to fix it, we're going to fix it, has ever fixed it, nor has it ever actually been what they said. [LB961]

SENATOR HOWARD: People that have come from working within the system have called me and have said: If only they would have put even a portion of the money that

they're spending now into the system that we had, it would have been so much better. [LB961]

GAIL STEEN: Exactly. This is going to take a lot of money to fix the system. And we have to figure out a different way of doing the same thing. I think it's ridiculous to call it reform when we're doing the exact same thing with just different people. That's not a reform; it's just a burden shift. We have to figure out how we're going to do it differently. But, you know, the committee is in the exact same boat as KVC, as HHS. We're too busy putting out fires to actually think what's going to work, what we're going to do. And until we figure that out, we can't make it any better. [LB961]

SENATOR HOWARD: Costs more and has, it sounds like in most cases less... [LB961]

GAIL STEEN: The effectiveness... [LB961]

SENATOR HOWARD: ...less-experienced workers. [LB961]

GAIL STEEN: We have less-experienced workers. I've got workers that don't understand basic premises about juvenile court, don't understand due process, don't understand they actually have to talk to the parents before they submit a case plan and court report. I've got foster parents telling me, as guardian ad litem, they're not allowed to talk to me anymore because it causes too much problems. And it's ridiculous. [LB961]

SENATOR HOWARD: It is ridiculous. Thank you. [LB961]

GAIL STEEN: Certainly. [LB961]

SENATOR GLOOR: Other questions? I notice in your testimony you say, "In short, I'm old, and I've been around." (Laughter) [LB961]

GAIL STEEN: I've got the gray hair, man, yep. [LB961]

SENATOR GLOOR: I assume you're trying to claim the wisdom that comes with age, so we'll grant you that. [LB961]

GAIL STEEN: That's definitely for other people to decide. I've been around a lot, and I can tell you what I've seen. [LB961]

SENATOR GLOOR: Thank you. [LB961]

GAIL STEEN: Thank you. [LB961]

SENATOR GLOOR: Thank you for this. [LB961]

GAIL STEEN: Certainly. [LB961]

SENATOR GLOOR: Other proponents? Good afternoon. [LB961]

REBEKAH HOYT: (Exhibit 16) Good afternoon. My name is Rebekah Hoyt, R-e-b-e-k-a-h H-o-y-t. I am here today because both my husband and I feel very strongly that something needs to change with how our state manages the children they are entrusted with. Our experience with the foster care system began seven years ago when we took placement of our first daughter and a few weeks later when we took placement of our other daughter and son. I wish we could say that our experience has been pleasant and fulfilling, but I cannot. It has been a long, drawn-out process of battling the system while trying to look out for our children and obtain for them the services they need. If we did not love our children and believe that there was hope for them, we would have given up years ago. I've been asked numerous times over the years to put the events that we have experienced down in writing, but it is too hard to do. Each time I begin to remember some of the events, I just want to shut down. Much of our story I am leaving out today because it is too traumatic to even remember, let alone put down in writing or tell you. My husband was in the first wave of soldiers that went over to Iraq and was stationed 30 miles or so north of Baghdad, but yet he did not come home with PTSD. Both my husband and I now have been diagnosed with PTSD. It did not take a war to break us, but a young child. Our son, and last adoption, is not an easy child; we've learned this throughout his foster placement and postadoption. But on good days we still have belief in the system and that there is hope for him. Our son Cody was in the system for a little over four years and had five state caseworkers and two agency workers. At this rate, they never got to know our children. Our son Cody is a classic case of everything that is wrong with the system. He came to us as a very confused 5-year-old, and each time he got a new caseworker she would change the direction of the case. I do not feel that the caseworkers nor individuals supervising visits are trained to handle intense bio parents, let alone understand the psychological impact of inappropriate behavior on visits. Our son has been diagnosed with attachment disorder, oppositional defiant disorder, bipolar, and symptoms of obsessive-compulsive disorder. He was kicked out of three after-school care programs, had numerous in and out of school suspensions, and has a penchant for running away. In addition to this, he is also verbally and physically destructive. All of these behaviors kept progressing through the case, and we kept pleading with caseworkers to help and that he needed to know he had permanency and stability. I was finally banned from speaking at team meetings because it upset the bio parents. Just prior to our son's adoption, his behavior had become so advanced that we finally agreed to med management. This led to entire new agony for us. We have since learned that Lincoln has very few pediatric psychiatrists. At my last count, it was only three. And I've taken my child to all three. And they were a joke. But they're all on the Medicaid list, so they must be competent. We now take our son up to Omaha and to a non-Medicaid provider in order to have a

Health and Human Services Committee January 26, 2012

competent doctor that knows him. But the cost of this is it takes him away from school. and Medicaid does not pay for this nor the medications. We've also experienced the same situation with therapists and now travel to Omaha to get counseling. We also delayed his adoption in an attempt to get a subsidy as inclusive as we could. By this time, his aggression had progressed to complete destruction of property and aggression towards both me and my husband. The cops were out to our house weekly, and he was being admitted to CAPS once or twice a month. But that was still not enough to get him admitted into a residential program. We thought we had gotten his subsidy correct, with it including both in- and outpatient treatment. We were wrong. We have now learned that once your child is out of the system, you are cut off from all services. Once we finally did get him into a program, Magellan discharged him after six months, claiming that he was stable. He was back in another residential program four months later. This time they kept him for two months and discharged him again, claiming he was stable. And this was also against the doctor's recommendation. Now, six months later, he has progressed back to hitting both myself and my husband, and CAPS will not keep him for longer than three days. We've run out of options and have tried every type of outpatient care in the state and inpatient too. It has now come down to the safety of the other children in our home. The only answer we have heard from three separate individual agencies is to turn him back over to the state. How can we turn him over to the state. when they are the ones who screwed him up in the first place? We got out of foster care when it was being privatized because we saw what was going to happen and that the care for our child was going to become even less than it was before. We have heard too many stories from the other parents that have turned their children over back to the state to get the services that are needed. That, right now, my family is at a complete loss about what to do with our son, that there are no more options for us to protect our other children or my husband and I. And we do not know what the state expects of us. That they created this monster, that the caseworkers were forewarned that he needed services back then, and nobody listened to us. And now we've been recommended by both the police, the psychiatrists and therapists, and also the hospital that he needs to be removed from our home in order to keep people safe. But I cannot give up on my child and turn him back over to the system that destroyed him, without any reassurance that they even have a program in place that can help him. That there is no reassurance, there is no inpatient treatment programs that help children with his diagnoses in the state. In conclusion, I would ask the state to put the children first. That my family has made many sacrifices for our son, and we'd hope that the state could learn from the past mistakes and see where it has made mistakes and fix them. We need a system that has caseworkers with less caseload so they actually know the children individually, with their needs. We need caseworkers, schools, and law enforcement agencies better trained and educated with the mental health impact on the children from the experiences they have had. We need to move the children through the system quickly so they can have as much chance of a normal life as possible. We need better mental health services, including trained providers and facilities that are equipped to help our children. And most of all, we need better laws that are enforced and children removed

from homes and given a chance to a life without dysfunction and doomed to repeat their parents' mistakes. Thank you. [LB961]

SENATOR GLOOR: Thank you for taking the time to put this together as well as share it with us. Questions? Senator Krist. [LB961]

SENATOR KRIST: This is the third time this afternoon I've heard about foster parents or parents being dismissed or asked to leave team meetings. Were you violent? Did you threaten them? What was...? [LB961]

REBEKAH HOYT: No, all I did was I spoke out that many team meetings the bio mom would not even show up to. And at those meetings I would lobby and lobby that the mom was not doing anything that the court was asking her for, could we switch from focusing always on providing her with services and maybe pay attention to the two children that she had given birth to. The caseworker told me she did not want to hear it, it was about reunification and the mother's services. When the mother was there, she would spend the entire team meetings accusing us of the food we were feeding were making the kids sick, we did not bathe the children properly, that the clothes that she sent the children home in were not being returned to her, even though it was the opposite, that she would just spend the entire time being petty and malicious towards us, to the point that the caseworkers told us: Do not open your mouth; anything you say will upset the caseworker... [LB961]

SENATOR KRIST: Well, I hope... [LB961]

REBEKAH HOYT: ... or not the caseworker but the bio parent. [LB961]

SENATOR KRIST: I hope the people that can do something about that situation, in allowing foster parents and parents to have a voice, are taking notes today. I think they probably are. That message is loud and clear for me and, I think, for the rest of the committee. Thank you so much for coming. [LB961]

SENATOR GLOOR: Thank you. Other proponents? [LB961]

SARAH HELVEY: Good afternoon. [LB961]

SENATOR GLOOR: Afternoon, Sarah. [LB961]

SARAH HELVEY: (Exhibit 17) My name is Sarah Helvey: first name, S-a-r-a-h; last name, H-e-I-v-e-y. And I'm a staff attorney and director of the child welfare program at Nebraska Appleseed. As other testifiers have said, and as I know the committee agrees, we strongly support LB961, because we believe that case management is a core government responsibility. While there is a role for public-private partnerships and

Health and Human Services Committee January 26, 2012

for private agencies to provide certain services, the state has the ultimate legal responsibility for children who are state wards. And because of that, we support accountable public management of the state's child welfare system. Returning case management to the state is necessary to address problems endemic to the current privatization structure. We are aware of concerns and anticipate that you'll hear testimony yet today that transitioning case management back to the state will cause further instability in the system. And while we are always concerned about instability in the system, as the legislative findings of the bill articulate, we believe the greatest threat to stability is the risk that a lead agency will terminate their contract and that the state will be left with no safety net and no opportunity to carefully transition cases as provided in LB961. We believe it's not in the best interest of the state's children to be dependent on private agencies in this way and that major policy decisions that affect the well-being of children and the rights of families should be made as part of an accountable process, not in closed-door negotiations with private corporations. We've also...there's also been a lot of testimony today about the old system, and I think we'd be the first to agree that the old system was failing. However, as has also been stated today, in the past years of the privatization, child welfare costs have increased significantly, 27 percent, and we've seen little to no improvements in the number of children in out-of-home care and other key outcome measures as well as some of the concerning testimony that you've heard today. In addition, while reform has brought with it some important policy changes, such as increased focus on in-home services and an increase in relative placements, this philosophical and policy shift is not necessarily specific to privatization and can and should be maintained with the state responsible for case management. The Governor has said that we can't go back to failed policies of the state. LB961 does not do that. It returns case management responsibilities to the state while establishing best practices to stabilize the work force through reduced caseload standards and identifies the need for improved caseworker support, training, and compensation, as well as the fact that it is part of a package of legislation associated with LR37. I would also note here that with regard to the caseload standards, I think Appleseed would suggest setting a standard at the outset rather than an incremental approach to that. And so I offer that as a suggestion for the committee to consider. We also support the provision of LB961 that requires a case plan to be developed when services are provided as part of a voluntary, or non-court-involved, case. We believe that perhaps even more oversight and legal protection are needed in those types of cases. But we think that provision is an important first step in addressing concerns in those cases. In conclusion, LB961, we believe, is critical to getting the state's child welfare system back on track, to creating an accountable and dependable system that is focused on the needs of children and not the bottom line, and establishing a case management system and an array of services as part of the larger LR37 package that has the capacity to achieve the outcomes that we all want for children and families. We thank the HHS Committee for your comprehensive assessment of the child welfare reform through the LR37 process and for your time and dedication to identifying core issues and advancing comprehensive solutions. [LB961]

SENATOR GLOOR: Thank you, Ms. Helvey. Questions? Seeing none, thank you. [LB961]

SARAH HELVEY: Thank you. [LB961]

SENATOR GLOOR: Other proponents? Good afternoon. [LB961]

SARAH STEELE: My name is Sarah Steele, and I think that, just from listening to the other testimony, I think people have been...done a very good job and very well spoken and pretty much said a lot of what I wanted to say. But I've been a foster parent for ten years. [LB961]

SENATOR GLOOR: Could I ask you to spell your name, please? [LB961]

SARAH STEELE: Oh, I'm sorry. S-a-r-a-h S-t-e-e-I-e. [LB961]

SENATOR GLOOR: Thank you. [LB961]

SARAH STEELE: My husband and I have adopted six children. We currently have two foster children in our home. We all know the foster care system in Nebraska has always been in need of improvement. The move to privatization I'm sure was a desire to improve our system. And just as you senators were elected to represent your communities' best interests, by your own communities, that is the same reason why I feel that the state can best represent the children in their state, rather than bringing in an outside source. They have a vested interest in the lives of our children. Just one example of KVC's poor management that I've witnessed in our home: one of our foster sons; he's currently 16 months old. He's the brother of our very first foster son, who came to our home ten years ago. We've stayed in contact with the family, including being their two boys' godparents throughout the ten years. When they were placed back in the system in May, we did not have an opening at that time. One of our foster sons that we had at that time had come to our home with the intent to move to the foster home where his sister resided. And at that foster home he had the potential for adoption along with his sister, which was in his best interest. So in May, when our current foster son came into the system, the other foster parent who had the boy's sister was asked if she would take our foster son that we had at that time. She said yes. It then took six months to move our previous foster son to the home to live with his sister. In the meantime, the baby was 8 months old at the time, who should have been coming to live in our home, was placed with his great-grandmother along with his 10-year-old brother. His great-grandmother has severe rheumatoid arthritis and a lot of times did not have use of her hands or legs. She could not care for the baby. There was no reason for the six-month delay that it took for an 8-month-old baby to move to our home, when all three foster parents were in the same position, that they all wanted the same thing for

the two children involved. Our system needs to be fixed to ensure the needs of our children are met; but the decisions for our children should be made by the state, not an outside for-profit agency. That's all I have. [LB961]

SENATOR GLOOR: Thank you. Nice job. Questions? Seeing none, thank you for taking the time to come and share your story with us. Other proponents? Are there any other proponents? Can I see a show of hands of anybody else who is a...considers themselves to be a proponent? Okay. One? Was that just one hand? Okay. [LB961]

TERRY COSSEL: You might get out of here yet. (Laughter) My name is Terry Cossel, T-e-r-r-y C-o-s-s-e-I. I'm from Beatrice, Nebraska. My wife and I were foster parents for over 17 years. That's a lot of time. We've had hundreds of...over 200 children in our home during that time period. And I want to point out that's about 9 million minutes. And you'll see in a little bit why I want to point that out. The old system had numerous faults, and so I thought maybe with privatization...might work, some of the problems might get solved. I didn't know if it would save money or not, but I didn't think that would be the priority. Getting the system fixed was mainly what was the...where it would count. But privatization seemed to start to implode almost before it started. We were at foster care conferences, they told us about the privatization, and we asked questions of who would be the lead agencies, that kind of stuff. Nobody had any answers, not one. And it was supposed to take effect, like, less than 30 days. (Laugh) They had no clue what was going on. And, like I said, I've always thought privatization would work. But I was wrong; this was just a disaster. What we have is, like I said, deplorable. About 14 months ago I wrote the Governor, hoping that someone from his office would at least look into the situation with the myriad problems and troubles, and I delineated some of those. But all I got back was a letter saying, go talk to DHHS, and they would take a look at it. They already knew what the problems were; it was on the news every night, you know. So I knew that wasn't going to do any good. So after 17 years, my wife and I guit foster care. We were frustrated; yeah, it just wasn't going anywhere. Privatization, like I said, it failed. The state was spending more money than ever. And my wife and I were never in this for money. If we were, you'd have to be stupid. You know, it pays about 20 cents a hour. And...but the thing of it was, is the money kept getting cut down for the foster parents and going more to the agencies. We were starting to now pay for these children out of our own pocket. You can't afford to do that for long, especially if you have four of your own kids. You know, you just can't do that. So, like I said, we just got frustrated and we guit. Finally I called Senator Campbell. I'd been reading the Lincoln paper saying that she was doing something with this. And she said they'd be having hearings in January to come, so that's why I'm here. Trained caseworkers, you've heard, might be a good idea. And what the (inaudible) us, though, is the role of foster parents; they know these kids. Under the old system, almost always, a caseworker would call about two to three days before court and say: Okay, what's this one's name; what does he do; what's his problems? And they'd go into court with this report, glowing report. It looked like they knew these kids intimately, I mean, they knew these kids every second, they

Health and Human Services Committee January 26, 2012

knew their problems. They'd never even seen them before until they entered the court. Same thing was true with the guardians ad litem. In 17 years, we met two guardians ad litem. And they're supposed to meet with the kid once a month. We met two in 17 years. You've heard somebody say today, and they're right: shifting responsibility from the lead agency back to the state, that's not reform; that's not going to work either. The state needs to take this back, though. They need accountability of the caseworkers, and not all of them are bad. But a lot of them, yeah, they have college degrees, but they don't know what they're doing. I'm sorry, they don't. They're not in the field; they don't understand these kids. And they've got a lot of caseworkers (sic), how can they know all the kids? And they can't. And I don't care, you can't hire enough caseworkers, just like you can't put a cop on every corner to stop every problem. You can't hire enough caseworkers, no matter how much money you put into this. So what you need to do is hold the caseworkers you have accountable and make sure they follow the laws you already have in place, hold the guardians ad litem accountable and make sure they follow the laws that are already in place. And the answer is not just throw money at them. Like I said, you can spend a lot more money, but that's not going to fix it. What you really need to do--and it's not the only answer--but what you really need to do is look at the true experts that you have, your foster parents. This isn't self-serving; I'm not a foster parent anymore. But look at what you have. You have foster parents that are with these kids every single day. Like I said, I want you to remember that 9 million minutes, because that's the time we spend. That's a lot of expert advice. [LB961]

SENATOR GLOOR: Thank you. And thank you for taking care of our kids. Are there questions for Mr. Cossel? Seeing none, I believe the next member of the family is up. [LB961]

KAREN COSSEL: My name is Karen Cossel, C-o-s-s-e-l. And, as he said, we've had over 200 kids in our home over 17 years. We've had them at all levels, I mean, emergency care to four and a half years. They've been...some have been in our home numerous times. I'm in support of this bill. Don't get me wrong, there were issues and problems before. But those issues and problems always at least got looked at and tried to get dealt with. Once KVC took over, nothing happened with anything. They didn't look at it; they didn't care; they didn't answer your phone calls. Nothing. And so we, you know, started getting frustrated right away because of that, especially when we'd been spoiled by so many years of having people return our phone calls. We had three boys in our last set of kids: 18 months, 4, and 5. During the time we had those kids, our experience with KVC was just horrible. The first time they picked the kids up for a visit, which was the case manager who did it because she couldn't find anybody else to do the visit, she was surprised the kids were so little; she didn't know their names; she didn't know anything about them. She proceeded to put them in the car, and I noticed there was no car seats. And so I went out and I said: You can't take them without car seats. And she says: Oh, really, I have to have car seats? And so from that day, I knew that they were very, very untrained. We worked with them and worked with them for

Health and Human Services Committee January 26, 2012

months and months and trained them the whole way with what we knew with these kids. And, you know, each one of them that came, every person that worked with us, it didn't change. They...just none of them were trained. In all the years of doing foster care, we had never, ever had this experience, with people not knowing anything about children at all. Even though the visits were fully supervised--and keep in mind that all these workers were untrained, and they were different workers all the time--the visits were just full of chaos. When the parents did decide to show up, there were no toys available, no food available. The kids would go six to eight hours without eating, without diaper changes. They would soil in their pants, no change of clothing, no nothing. We were told later on that it was our job as foster parents that we needed to supply all that stuff at visits; we should send toys, we should send food, we should send all this stuff. Again, we weren't used to that. There was abuse by the parents at the visits. One of the...the dad threw one of the kids against the wall. Another time he held one of them...their face down to the bed. There was lots of fighting, language, in front of the kids. And when we questioned them about this, the workers and the case manager, we were told that the parents get three chances per visit to correct their mistakes before that visit is then called off. We were just thankful that nothing really drastic happened. They also watched R-rated movies. Remember the ages of the kids. They got to watch Saw II; they watched the second Freddie Kruger movie. The kids were very, very scared. They didn't want to watch them. They complained. They wouldn't sleep at home, because they kept thinking about these movies and telling us all kinds of stuff. I hadn't even seen these movies. And then I finally did; I'm thinking, I understand why now. After months and months of this, we would talk to different people involved, and all we got was lying, lots and lots of lying by the case managers, by everybody involved with KVC. And I didn't understand that, because we had never been lied to before, and why would they want to lie to us, when we're just trying to, you know, be good foster parents in taking care of these children. And we love them dearly, but it's kind of hard to do that when they're just...there are no...helping you, they just want to keep lying to you about everything. I finally called the case manager to talk to her and asked her about the lying and to tell her my complaints after time and time of everything...keep happening months after months. And she put me through to her supervisor. Her supervisor then told me, after she heard that I was upset, she says that she was worried for the safety of the children that were in our care. And I asked her why. And she said that they were concerned due to the fact that I was angry. I should tell you, though, that during the conversation, before she said that to me, I told them that I felt that they, KVC, was abusing the children by making them go through this same stuff week after week after week and not doing anything about that. Well, anyway, when she said that to me, I felt it was a direct threat and that I'd better either shut up or I would lose the kids. Anyway, I feel like I'm able to speak now because we're no longer in fear of retaliation. We guit doing foster care, due to the stress. And (inaudible) for the kids. We've loved each and every child. We miss them. And they've blessed us in many, many ways. Thank you. [LB961]

SENATOR GLOOR: Thank you. And I'm sorry you're not foster parents anymore. I'll bet you're a great team. Any questions? Thank you again. I believe there were no more proponents. Can I see a show of hand of opponents of LB961? Okay. All right. We'll start with opponents, please. [LB961]

LISA LECHOWICZ: (Exhibit 18) I'm Lisa Lechowicz; it's L-i-s-a L-e-c-h-o-w-i-c-z. And I want to thank the committee. And I kind of wanted to go first, because I don't know, I mean, I hate to paint myself as an opponent, because I think we're all trying to do the same thing here, which is protect these kids. But I want to thank you also for an opportunity to tell my family's story in the child welfare system and also for your courage to look at this and try to find a better way, because it's very important work. I've been involved in the system since 1991, when I adopted my first daughter at age 7. She's now 25 years old and a college graduate. In fact, she's working on her master's in human services and wants to work in the system to help other children. When Danielle (phonetic) came to our home, she was halfway through first grade and she still could not read. During the summer between first and second grade, I created a summer reading program for her called The Reading Road to Walt Disney World, because when we first met her she said she wanted to go to Walt Disney World. So I used that to motivate her to read five books a week and complete a workbook every week as well over the summer. By the time she reached second grade, she was reading at grade level. And you can see from her current pursuit of a master's degree, that love of learning has not been diminished. When the caseworker saw what we were able to accomplish with Danielle, the state approached us about another little girl in the system from Grand Island. She was also halfway through first grade and couldn't read. She was on Ritalin, which was the drug of choice at the time for children, and she had been abused and neglected more than Danielle. Of course, once you meet the child, how do you say no? So we welcomed Joanna (phonetic) into our home, but the same motivational techniques didn't work for Joanna. We had no assistance from the state in finding resources to assist her. In 1996, at the age of 17, Joanna had a son, my grandson Colton (phonetic). Joanna and Colton lived with me for the first two years, but Joanna repeatedly ran away, brought strangers to our house even in the middle of the night, and engaged in other risky behavior. I hired a DBT therapist to come in weekly to work with Joanna during this time. KVC helped her with coping skills, parenting skills, and bonding. Unfortunately, these efforts did not significantly improve the situation. Joanna moved into an apartment with Colton in 2008. In September 2008 she left Colton unattended, and he was taken into protective custody. We had already at that time initiated a private adoption earlier that year and were waiting on a completed home study to go to court. Both parents had relinguished in my favor. When the state stepped in, they did not talk to family members; they did not look at the private adoption. They just told my daughter and the birth father that, quote, unquote, they did not need to give up their child, as the state would give them the resources they needed to keep him. This set up an adversarial situation and has continued for over three years as the state went through the motions of reunification. In seeing this system now for over 20 years and

Health and Human Services Committee January 26, 2012

viewing it as an adoptive parent, a mother, a foster parent, a business owner, a process and quality expert, a manager, a taxpayer, and now a grandmother, I know the system is broken. The process is broken. It doesn't matter who does the work, whether it's a state employee or an outsource vendor; the people in the process that I've met, for the most part, are dedicated professionals who work in this system to make a difference. But the process...but in a process this dysfunctional, even good people cannot be successful. What we need is a detailed, documented, and repeatable process that uses judgment, given circumstances. With a process as large, complex, and important as child welfare, having the delivery of the service separated from the management of the process I believe makes sense. The state Department of HHS must provide clear goals. expectations, and procedures first and foremost. If you are too enmeshed in doing the work, it's hard to see the forest for the trees. So I say, leave the vendors in place and have the state workers focus on my first recommendation, which is to define and fix the process. I have a list of process improvements that I have seen that need to be made, but the state needs to perform a total review of the process involved in child welfare. And without this, no one will be able to perform the job efficiently or effectively. Both process people and social workers are needed to collaborate on this project. Both perspectives are needed to ensure the process is set up correctly and managed properly going forward. There is danger in having the same people in the process today be the only ones looking at the process. As Albert Einstein said: No problem can be solved from the same level of consciousness that created it. My second recommendation is to balance the parents' right with their responsibilities. And I won't go into that; you can read that. And finally, I think we need to practice acceptance without judgment or blame. In my family, and possibly many others, my daughter had reasons why she can't parent. For one, she did not bond with her birth mother and, at 7 years old, was unable to completely bond with me. Without that bond, her ability to bond with her son was severely diminished. She loves her son and wants to be with him, but is not capable of being a parent. If we accept that for what it is and then encourage her to do the right thing for her son, which is allow him to move on and bond with another adult, then we haven't damaged him the same way she's been damaged. And, to me, that, in this situation, is the best outcome. We can do this without judgment and blame, but if we tell her the state can give her everything she needs to keep her son and then three years later she still can't, how does she feel then? And how does her son, who is now 6, feel when his mother is no longer able to be there for him? So I believe I've seen this for a reason and that my gifts, talents, and backgrounds can assist in improving this process for future generations. I'm willing to work with anybody in doing that. I want to also say many of the problems that were brought up on the proponents' side I have seen, and all of this experience has been with state caseworkers. So that's why I conclude it's a process problem; it's not about who does the work. So thank you. [LB961]

SENATOR GLOOR: Lisa, I noticed that you're CEO and founder of HDM Corporation. What...do you mind just... [LB961]

Health and Human Services Committee January 26, 2012

LISA LECHOWICZ: We're actually an outsource vendor. We do healthcare transaction processing, and so that's another way that I know. If a client comes to me and wants to outsource their claims processing, but they cannot tell me definitively how they do it, my success chance there is very low because I need to understand the requirements from them. And I think that's the step that we missed here when we outsourced the service. But we can go back and make that right by understanding the process and developing those clear guidelines for vendors so that they can do the work properly, because even the caseworkers at the state don't have those clear guidelines and expectations, that I've seen. [LB961]

SENATOR GLOOR: Are there other questions? Seeing none, thank you. [LB961]

LISA LECHOWICZ: Thank you. [LB961]

SENATOR GLOOR: Next opponent. [LB961]

BRANDI CONNER: Hello. [LB961]

SENATOR GLOOR: Hi. [LB961]

BRANDI CONNER: My name is Brandi Conner; it's B-r-a-n-d-i C-o-n-n-e-r. I'm here not only as a citizen of Nebraska and an employee of KVC as a family permanency specialist, but I'm also a former ward of the state of Nebraska. I was a ward of the state of Nebraska from the years of 1992 to 2002, so for ten years. In that time, I had lived in...well, I moved ten different times. I had lived in three different fosters, had more workers than I can count. And one thing that I just really want to focus on is the fact that a lot of this could have been helped had a worker seen me in the home, a lot of my problems that were going on. I lived in a small town; and, had a worker come and seen me in the home instead of me having to go to the worker's office, you know, a bunch of my needs could have been met, I'll put it that way. I strongly believe that what KVC is doing is in the right direction. I was in one of the homes for six years, and I begged and begged my worker to get me out of the home--my state worker--and they wouldn't listen to me. Oh, it's just two more years; it's just two more years; it's no big deal. Well, it's a huge deal. And it took me to the act of sneaking out--granted, yes; I know I do not condone it--to get their attention. And I believe with KVC leaving the kids in the home and seeing and be able to ask, you know, are your needs being met, are you happy here, are you...? To really be able to meet them where they need to be met, getting their spiritual, medical, and emotional needs met. I'm just so passionate about this, I've just...this is something I really strongly believe about, and it's just kind of hard to put into words. As I said before, both of the systems, KVC needs to work on things--of course we do. The way I was thinking about it, if you think of it as...well, yes, we're a young system and we need to develop and we need to be able to mature and to grow and to

be able to make those changes. I mean, it's only been two years. I mean, that's not that long to be able to change things overnight. And change takes time. And so I've just...(sigh). I just want to be able to say that I just believe that KVC is doing the right thing, and I thank you for your time. [LB961]

SENATOR GLOOR: Thank you. [LB961]

SENATOR COOK: Thank you. I have a question, Senator Gloor. [LB961]

SENATOR GLOOR: Senator Cook. [LB961]

SENATOR COOK: Thank you. And thank you for coming, Ms. Conner, and waiting so patiently. Can you tell me one specific thing that is different in terms of the way that KVC might have handled your particular situation versus the way the state handled it when you were a ward? [LB961]

BRANDI CONNER: The first home I lived in for six years was very filthy: dog feces all over the place. And towards the end of my placement I would...I was responsible at the age of 16 to take care of a 10-year-old and three 4-year-olds. I can't... [LB961]

SENATOR COOK: This was your foster placement? [LB961]

BRANDI CONNER: Yes. Yes, my foster placement. [LB961]

SENATOR COOK: Okay. [LB961]

BRANDI CONNER: I can speak for what I'm doing now: I see all of my clients in the home once a month. And I can say that if a worker had been in the home, they would...I would be able to tell them: I am not happy; I need some help; this is not working--and they can get more help in that home and more support for that foster mom. [LB961]

SENATOR COOK: Okay. Thank you. [LB961]

BRANDI CONNER: Um-hum. [LB961]

SENATOR GLOOR: Other questions? Senator Bloomfield. [LB961]

SENATOR BLOOMFIELD: Thank you. How many clients do you have? [LB961]

BRANDI CONNER: Sixteen. [LB961]

SENATOR BLOOMFIELD: Okay. Thank you. [LB961]

SENATOR GLOOR: Other questions? Thank you for your testimony and for what you do. Opponents. [LB961]

JOHN S. McCOLLISTER: (Exhibit 19) Senator Gloor, good afternoon, members of the committee. My name is John S. McCollister, M-c-C-o-I-I-i-s-t-e-r. I'm the executive director of the Platte Institute for Economic Research. The Platte Institute is a Nebraska-based free-market think tank which promotes free enterprise, limited government, and personal responsibility. In 2009, the Platte Institute started the public foster debate by publishing a policy brief highlighting the fact Nebraska removed too many children from homes compared with other states. About the same time, our state also received low marks from the federal Child and Family Service Reviews, which evaluates how well states provide safety, permanency, and well-being for children. Shortly thereafter, Nebraska began contracting with private companies and nonprofits to provide foster care services. As widely publicized, implementation of child welfare privatization and other reform has been problematic and was implemented without clear indicators of performance and valid cost estimates. Last December, the Health and Human Services Committee of the Legislature released a comprehensive report titled, "A Review, Investigation and Assessment of Child Welfare Reform," which was critical of the privatization process. In response to the report of the committee and the general foster care situation, the Platte Institute will soon release a policy study by Lisa Snell of the Reason Foundation. The report will not reanalyze the evidence that privatization and child welfare reform has been poorly implemented in Nebraska, but to offer suggestions about how to prioritize systemwide improvements. Our report will reject the overarching recommendation by the committee that Nebraska abandon child welfare privatization altogether and reorganize child welfare services into a new state agency instead. Instead, it calls on the Legislature to prioritize and embrace action-oriented recommendations that will immediately impact service enhancements for children and families, and call for a collaborative approach in implementing these recommendations with a true partnership between DHHS and the lead contractors. We will contend that states have embarked upon...many states that have embarked on this same path have had similar difficulties with privatization. Rather than reverse the privatization process once started, these states enlisted stakeholders to work through the fundamental issues that were contributing to negative outcomes for both the private and public sectors. So Nebraska, rather than attempting another disruptive reorganization, the Legislature should engage DHHS and the lead contractors in a collaborative process to initiate the same positive changes the body would make as if creating a new state agency. Our paper will be released soon, and the author, Lisa Snell, will be available for your questions. [LB961]

SENATOR GLOOR: Thank you, Mr. McCollister. [LB961]

JOHN S. McCOLLISTER: Questions? [LB961]

SENATOR GLOOR: As you are well aware, I'm sure, that with this hearing and after this hearing things could move very quickly, so when you say that this paper will be released soon, and I expect it will be good information that we should consider, are we talking about something that could be released within the next 48 hours or the next week or the next two weeks? [LB961]

JOHN S. McCOLLISTER: I'd say a week or no longer than ten days. [LB961]

SENATOR GLOOR: Okay. Thank you. [LB961]

JOHN S. McCOLLISTER: And we'll be anxious to engage the committee at that time. [LB961]

SENATOR GLOOR: Other questions? Senator Howard. [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. Mr. McCollister, I didn't realize that you were working on this issue. [LB961]

JOHN S. McCOLLISTER: We were indeed. In fact, we started in... [LB961]

SENATOR HOWARD: Well, can you tell me a little about your background in child welfare and your experience with social services? [LB961]

JOHN S. McCOLLISTER: Well, it's, as you must know, this issue has a big impact on finances in the state of Nebraska. And the issue came to our attention in 2009, and we did just a policy brief that highlighted that Nebraska had foster care issues. You know, using that nail company metaphor, there are 50 nail companies in the United States, and so we were able to identify those nail companies that were doing a good job, namely Florida. So we then compared Nebraska's performance with foster care with that state, and we will do that again. [LB961]

SENATOR HOWARD: Florida has had hideous experience with child welfare. They had an example of a child that actually was drowned in a toilet, and it hasn't been that long ago. Florida is not an example that you want to look at in terms of quality child welfare. Thank you. [LB961]

SENATOR GLOOR: Other questions? Thank you, Mr. McCollister. [LB961]

JOHN S. McCOLLISTER: Thank you. [LB961]

SENATOR GLOOR: Good afternoon, Mr. Director. [LB961]

SCOT ADAMS: (Exhibit 20) Good afternoon. I appreciate being here and the

Health and Human Services Committee January 26, 2012

opportunity for this, and to listen again to all of the energy about this issue. It is nothing but good news overall from the big picture for the state of Nebraska. Good afternoon. My name is Scot Adams, S-c-o-t A-d-a-m-s, and I'm the director of the Division of Children and Family Services for the Department of Health and Human Services. I am here to provide testimony in opposition to LB961. The next paragraph that you have will speak about a number of positive things going on with regard to child welfare reform statewide, and I urge you to read that. But I'm going to skip through that quickly to simply say that that information is on the Web, it is available, it is transparent, and we'd be happy to continue to provide information. What I want to skip to because of the time involved in here is to say that this is a very interesting spot that I am in. I work in part with contractors and lead agencies in part of the state, and I supervise directly those persons who are delivering the service in other parts of the state. And I want to talk today about the effort to move the state forward, not this section or that section but the entire state. And so I hope that you hear my comments in that regard to trying to move forward the entirety of the state of Nebraska. And while I understand that the amount of emotion wrapped up in the department's use of contractors for case management, it is critical to set that aside for the moment and to take the long-term view for the good of the state and view this aspect of child welfare reform. I do not discount that we have faced a number of significant challenges in our reform efforts. You would have to be deaf and dumb and blind to--and have missed the testimony today--to say that. We all wish that some things would have played out very differently, but we are in the middle of managing a dramatic shift in how we serve children and families. This requires the kind of leadership that holds to the vision of a greater good while managing the difficulties along the way. We are changing the tires as we are driving down the road. Changing course on this crucial element of case management at this time, in my opinion, would be a mistake, because it would bring more disruption to the lives of children and their families and would restrict the long-term advantages and assets that the lead agencies bring to Nebraska. Sometimes the case manager is the best thing going for the child and the families you've heard from today. We don't want to change that up now I don't believe. A number of states that have contracted for case management have shown and continue to show improvement for children and families, and attached to my testimony are some ratings and documentation of various states. I would encourage you to read that among the different states in terms of the different criteria there, and I call your attention to Florida and Kansas, in particular. States that have privatized have gone through very similar difficulties, but they persevered. They relied on the data and it paid off. I also want to share with you information from the study of Florida and Kansas privatization conducted by the Casey Family Programs, a private national organization which supports numerous child welfare activities across the country. The reference is in my testimony. "Commitment to change is essential. The most consistent message echoed throughout the interviews was that the first few years of the transition were extremely difficult and that a strong level of resistance from all sides to such a massive systems overhaul should be expected. According to those interviewed, many staff members in Kansas and Florida felt personally invested in the system at that time and

Health and Human Services Committee January 26, 2012

had tremendous difficulty adjusting to the change. It took time to earn trust and build a strong cooperative partnership between state workers and the private workers,"--and families. "However, it was also emphasized that, over time and with consistent efforts, the system stabilized, a strong public-private partnership developed, and capacity for services expanded. Informants reported that once that occurred, the system as a whole began to see improvements. They commented that the appropriate amount of transition time varied regionally, but that any state should expect the full transition to take at least three years." Now as a practical matter, the requirement in LB961 to return case management to the department by September of this year could result in additional instability now. I'm concerned that passage of this bill would result in an early or even immediate termination of those contracts by the lead agencies. This would cause difficulties in managing a transition that would negatively impact families and children. Another technical note: LB961 provides continuation of the KVC and NFC contracts only through July of 2013. Current contracts, signed legal contracts, terminate now in July of 2014. Legislative action to terminate a contract prematurely in this fashion raises serious constitutional issues that need to be carefully considered. There are additional technical issues. They are attached as additional comments for you to consider in the testimony. We are happy to continue to share information with you about our progress both here through this fashion and on the Web site. I believe that changing our approach now would be shortsighted, and I urge you to oppose LB961. Thank you for your time. [LB961]

SENATOR GLOOR: Thank you. Are there questions from the committee? Senator Howard. [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. Mr. Adams, I would like to know if you could tell me what it is about Florida and Kansas that you feel would be so exemplary that you want to use these as examples. [LB961]

SCOT ADAMS: Well, a couple of things. One, in those two particular cases we...in the case of Kansas, they're close by. We have visited with them; we have talked with them. We have seen their contracts; we have seen the two or three versions of their contracts. We have seen the evolution of that, and so we've had the opportunity to be there and to be close by. Secondly, when I was at Catholic Charities prior to coming here, I was aware of the traumatic changes going on in Kansas. People went bankrupt, people got out of the business--very, very parallel experience. And so I was interested in Kansas ahead of the game, if you will, in terms of my own experiences, including their entire health and human services system, and so that offered another example of someone coming from a very different angle to this issue. Finally, we were encouraged to consider those by consultants that we are working with, with regard to helping us to get better. [LB961]

Health and Human Services Committee January 26, 2012

SENATOR HOWARD: Well, then if you're familiar with those, and I'm sure you're familiar with the fact that, yes, Kansas did go bankrupt. They didn't have the funding to do the most basic of services, so they embarked upon the privatization. What they've done now is pulled back from that because it's become far more costly with far less services being delivered. We found that out not only from the officials down at the state that are delivering child welfare services, but also from legislators who have contacted us and said don't do this; this is the wrong way to go. And I'm sure you're familiar that in Florida among all of the other problems they've had, they actually did not know where a toddler was placed. They thought a toddler, this little girl, was placed with a foster family when in fact the foster mother had given the child to a relative, and the child turned up six months later when they located her and she had been killed. So these are not states that really are at the level that we would like to see our state. I'd like to hope that we could move forward and actually protect children and actually provide services and actually do what we say that we're going to do. [LB961]

SCOT ADAMS: I absolutely agree with you in wanting to be able to deliver safety and permanency to kids and to being able to be part of that. Our information with regard to the Kansas environment and the enthusiasm there among the legislators and also executive branch leadership differed from your experience--and so is the world, I guess. With regard to the Florida situation, I'm not sure what to say about an anecdotal case. We recently had kids found in dog cages in Nebraska, and so it is a difficult...it's a difficult piece of work everywhere. [LB961]

SENATOR HOWARD: And those children were not state wards. It's a terrible situation... [LB961]

SCOT ADAMS: Yes. Right. [LB961]

SENATOR HOWARD: ...but they were not wards of the state--yet. Thank you. [LB961]

SCOT ADAMS: Thank you, ma'am. [LB961]

SENATOR GLOOR: Other questions? [LB961]

SCOT ADAMS: Yes, sir. [LB961]

SENATOR GLOOR: Senator Lambert. [LB961]

SENATOR LAMBERT: Mr. Adams, and this is on point I think. As you were going through there you were concerned about what might happen if this bill moved on. And I think at one point you said we could lose services, like almost immediately. I had sensed some concern from you. What position have we put ourselves in, that that could happen? [LB961]

SCOT ADAMS: Well, we haven't today. That's my concern with this bill. [LB961]

SENATOR LAMBERT: I mean, what position are we in, dealing with a contractor, that that can happen? [LB961]

SCOT ADAMS: Well, I think that the long-term picture of that in terms of privatization and partnerships with any situation in how do we fix that, because it does feel perhaps like there's a single contractor and this and that. So I understand the energy of the question, I believe, that you're approaching this: What happens if? The state will always have to be there. It's a lesson I learned at Catholic Charities in terms of our experiences and our work with regard to things: the state is always the backup. And so here we are. And should something catastrophic happen, the state will always be there. Secondly, the marketplace, though, holds a variety of different other providers. The Department of Health and Human Services has, in fact, received a number of letters from others interested in this work. [LB961]

SENATOR LAMBERT: Okay. [LB961]

SCOT ADAMS: We are involved in contractual relationships today. Should that change, we would take a look at our next set of options. But I guarantee you that there are others willing and waiting to look at the next bidding period for this. [LB961]

SENATOR LAMBERT: I guess I didn't explain myself well enough there, and I apologize for that. How are we in a position where we're unsecured that a contractor can walk away from us? I mean, there should be a mutual bond there that holds us together. [LB961]

SCOT ADAMS: Well, and I think we are. But LB961 speaks to changing the nature of that contract. That's my point. You're talking about taking away changes in the contract that exist today. You're talking about changing the date of the contract. And so it becomes a situation where that bond of relationship, that bond of contract is changed by the state. [LB961]

SENATOR LAMBERT: I guess do we not have enough holdback or pay that we've got to get where this contractor is going to work with us? I mean, I don't even want that in the realm of thinking that somebody could drop us and walk away from us with something this important. That concerns me a lot. [LB961]

SCOT ADAMS: I think this is very important and I have confidence that the partners with whom we are working are with us. [LB961]

SENATOR LAMBERT: Okay. But that was something, and I sensed some concern in

your voice when you spoke to that. [LB961]

SCOT ADAMS: Yes, sir. [LB961]

SENATOR LAMBERT: And that gives me a lot of concern. I mean, I...you know, we're all business people, but we all secure our positions. And are we in a secure position where we can hold a contractor in place? [LB961]

SCOT ADAMS: Sir, we are in a period of time of great uproar, transition, noise, however you want to characterize this moment. But there is a lot of confusion. I mean, the committee has heard it. It's documented well in LR37 with regard to that. We have a contractual relationship. This bill seeks to change the nature of that contract, and so it adds additional noise, confusion, and change into an already chaotic system. [LB961]

SENATOR LAMBERT: Okay. If we've got a contractual agreement, how can somebody walk away from it? [LB961]

SCOT ADAMS: If we initiate the terms of that agreement. That's what LB961 does, it changes the terms of the agreement that's in place. [LB961]

SENATOR LAMBERT: But you feel it if passes there's a good chance or a possibility that our contractor could walk on us. [LB961]

SCOT ADAMS: I'm not going to rate the good, the bad, in terms of that. We and the contractors simply agree that we think that the case management function and the term of the contract, those issues addressed in this bill, are in the proper place at this time. And so we oppose this bill on those grounds. [LB961]

SENATOR LAMBERT: Okay. I guess you've raised some concerns in my mind now. And okay, thank you. You've answered my question. I appreciate that. [LB961]

SCOT ADAMS: Thank you, sir. [LB961]

SENATOR GLOOR: Let me do this, Scot. Let me follow up. Senator Lambert brings up a good point. And as we're talking about stability and since you mentioned case management, some of the stability has to do with whether we're able to come to an agreement on case management. And those discussions are happening without the Legislature's involvement, good or bad. But where are we on that, since the question is stability? This seems to be a very important part of whether we're going to have stability, certainly with KVC. Are we close to some sort of agreement? Have we reached some sort of agreement when it comes to case rate? [LB961]

SCOT ADAMS: Thank you, sir. I thought I heard you say case management at the

front... [LB961]

SENATOR GLOOR: I did. I...but it's case rate. [LB961]

SCOT ADAMS: Okay. But your question is about case rate. [LB961]

SENATOR GLOOR: And where we are in those discussions. [LB961]

SCOT ADAMS: We continue to make fruitful progress with regard to a case rate. We are not there today. [LB961]

SENATOR GLOOR: Okay. Soon, do we think? [LB961]

SCOT ADAMS: I think so. Soon. By soon, I think within this month. Uh, eh--first week of February--yeah. Yeah, first week of February maybe. [LB961]

SENATOR COOK: Which is Tuesday. [LB961]

SENATOR GLOOR: Okay. Senator Bloomfield, you had a question (inaudible). [LB961]

SENATOR BLOOMFIELD: We've talked back and forth about this contract, but did we not just go through a period where they told us if we didn't come up with an extra \$1.2 million, I believe it was, that they were going to abdicate the contract (inaudible)? [LB961]

SCOT ADAMS: There was...that was stated by the one organization, KVC, to us officially. It was I think a demonstration of the sense of concern with regard to that. And so as a result of that, we began the negotiations on a case rate approach to this, which I think helps to document the particular expenses as legitimate, what are legitimate, how (inaudible) have we been there. And so our attempt with the case rate methodology has been to get us to a more objective, clearer sense of that. [LB961]

SENATOR BLOOMFIELD: But for the talk of this contract, we are still at their mercy any time within 60 days they choose to get up and leave. [LB961]

SCOT ADAMS: Well, you know, fortunately we have not crossed that bridge. But in the current contract with that organization, we do not have...they do not have the right to walk away from the contract. [LB961]

SENATOR BLOOMFIELD: This is not out of any disrespect. I was supposed to leave five minutes ago. (Laughter) [LB961]

SCOT ADAMS: I understand. Thank you. [LB961]

SENATOR BLOOMFIELD: Yeah. (Laugh) [LB961]

SENATOR GLOOR: Yes. Actually Senator Lambert had his hand up to... [LB961]

SENATOR LAMBERT: Go ahead. Go ahead. [LB961]

SENATOR GLOOR: Senator Howard. [LB961]

SENATOR HOWARD: All right. Well, this may be helpful, and I appreciate Senator Lambert's line of questioning. I think we're on the same mind-set. They did, in fact...it goes beyond a verbal letting you know that they...they did, in fact, give you written...KVC did, in fact, give you written notice in November that they were terminating their contract unless additional amounts of money were paid, every month, and a case rate was established. Is that true? [LB961]

SCOT ADAMS: I...it's...yes, that's more or less true, Senator. [LB961]

SENATOR HOWARD: More or less? [LB961]

SCOT ADAMS: Well, we haven't crossed that bridge with regard to that last step. [LB961]

SENATOR HOWARD: Did they give you a written letter that... [LB961]

SCOT ADAMS: Yes, and I think you have a copy of that. [LB961]

SENATOR HOWARD: ...that informed you of this and spelled out what their expectations and requirements would be to continue providing services? [LB961]

SCOT ADAMS: Yes. [LB961]

SENATOR HOWARD: Okay. [LB961]

SCOT ADAMS: And in there was a two-step process, as you know, because you have the letter. And it said: unless, then--and so we haven't gotten to then. [LB961]

SENATOR HOWARD: Well, Kerry Winterer has explained to us that they had asked even more money every month. But he had negotiated down to \$1.8 million every month until the case rate was established and agreed upon by both the department and KVC. Is that correct? [LB961]

SCOT ADAMS: No. That would not be correct. [LB961]

SENATOR HOWARD: Then can you explain it? [LB961]

SCOT ADAMS: Sure. The \$1.8 million was a payment made in December, and that was that singular payment. [LB961]

SENATOR HOWARD: So there's not an ongoing amount pending? [LB961]

SCOT ADAMS: There is not today an ongoing amount pending for the next (inaudible), though we hoped to and expect to come to agreement on the case rate. [LB961]

SENATOR LAMBERT: Senator, if I may? [LB961]

SENATOR GLOOR: Senator Lambert. [LB961]

SENATOR LAMBERT: I guess, and I'm sure you're concerned and I'm sure you're going to check into this, Mr. Adams. But I'm sure they're doing a great job basically, but they're asking for more money, and then I hear these stories. I've sat here for three and a half, four hours, and listened to failures, and I think that's something. And I'm sure you're going to look into it. I'm sure it didn't fall on deaf ears with you either. [LB961]

SCOT ADAMS: Oh, not at all. [LB961]

SENATOR LAMBERT: I mean, you know, we need more than what we're getting in the contract. But yet we hear about failures. And I'm sure there's a lot of success stories too, but. [LB961]

SCOT ADAMS: Yes. Sir, since summertime of 2011, we have instituted a quality assurance plan and program that has involved not only the department's staff, but also the private and lead contractors' staff as well. And we are now having weekly and regular conversations on the data about the quality issues and about the measures. That system I think probably was missing for too long, but it allows us a means to be able to say, hey wait a minute, these numbers aren't looking right; we have to get to better. And so we have begun to grip in that area. Regardless of this bill, frankly, that quality assurance loop...and I really appreciated the woman who spoke first coming up on this section about that. She's absolutely right, we need to have those processes in place. We've been billing them since July. We've been having the conversations the last couple of months, and we can give you good data on stuff. [LB961]

SENATOR LAMBERT: Well, yeah. And I appreciate all that you're doing, Mr. Adams. And I feel and I know you do too, that...I mean, I'm not perfect, I know that, and I don't expect perfection from anyone out here. But when we're working with what we're working with, one failure is a child that we've let down, and we've got to work towards

perfection. And maybe we need to double those efforts or see where we're getting a lot closer to it than we are. [LB961]

SCOT ADAMS: I'm not happy with where the state of Nebraska is. [LB961]

SENATOR LAMBERT: At all. [LB961]

SCOT ADAMS: Well, I'm happy that we're getting better. So not at all is a high standard to say 100 percent, but we can get better and we've got to get better and we must get better. . [LB961]

SENATOR LAMBERT: And with working with these kids and these families, we've got to strive to be 100 percent. Are we ever going to hit it? We need to get very close to it. [LB961]

SCOT ADAMS: This is a business where we have to get very close to the... [LB961]

SENATOR LAMBERT: As best as we can. [LB961]

SCOT ADAMS: ...to 100 percent. Yeah. [LB961]

SENATOR LAMBERT: And I appreciate that and I think you're dedicated to that, and that's what we need. I appreciate your comments. Thank you. [LB961]

SCOT ADAMS: Thank you, sir. [LB961]

SENATOR GLOOR: Scot, on this graph there's no date. Do you have any idea what time frame we're talking about? [LB961]

SCOT ADAMS: That is, I believe, 2010 data. My apologies for that. [LB961]

SENATOR GLOOR: All of calendar year 2010? [LB961]

SCOT ADAMS: Yes. Calendar year 2010. [LB961]

SENATOR GLOOR: Could you check on that? [LB961]

SCOT ADAMS: I will double-check on that. Yes, sir. [LB961]

SENATOR GLOOR: Yeah, would you please. [LB961]

SCOT ADAMS: Thank you. [LB961]

SENATOR GLOOR: Other questions from the committee? Thank you for your testimony, Scot. [LB961]

SCOT ADAMS: Thank you very much. I appreciate it. [LB961]

SENATOR LAMBERT: Thank you, sir. [LB961]

SENATOR GLOOR: Other opponents, please. [LB961]

LESLIE BYERS: Good afternoon. [LB961]

SENATOR GLOOR: Good afternoon. [LB961]

LESLIE BYERS: My name is Leslie Byers. Leslie, L-e-s-l-i-e, Byers, B-y-e-r-s. As a parent who's been involved in the child welfare system many years ago in order to gain access for mental health services for my child, and now a foster parent and a family professional working to help current families navigate this system, I can say I have been intimately involved in this system for well over ten years, and I've experienced the numerous changes that have occurred. I'm going to primarily focus on what's occurred since the initial child welfare reform in 2009. I am really very grateful and excited, especially through the members of LR37, that we have the legislative body or representation involved in this very important issue and this very important, complex system. I would really like to see that, rather than returning to the pre-reform processes and structures, very much in regards to what the first woman had talked about, is look at the process and look at collaboration as well as look at the cost to going back and the impact to going back. As this bill proposes returning case management, it's only been a year since that was taken to the lead agencies. And so by going back, we're wasting one year of effort, dollars, and progress. And I think we're replacing a streamlined structure with one of multiple hand-offs. Again, I have a background besides my experience, lived experience in this system, of 25 years in information technology, so I'm very well-versed in process and project management. And so besides being concerned about the cost of going back, which we all know takes away from direct services, I think most importantly I'm really concerned, one change after another to the kids and to the families. A prior speaker had said we're going to talk about that. I don't want that to be minimized. That is very critical to these families, to these kids and families; so critical that in some cases...Senator Campbell, you talked about the impact of going from one foster home to another on the emotional impact of these kids and these families, but this delays sometimes to the point where it is significantly delaying the return of these children to their home. As I sit here and I listen to testimony lamenting the current child welfare system, I recall this very similar testimony and comments as the reason for reform. What this tells me is the solution to the kind of child welfare system that we expect and that we need is to have all--and I emphasize all--parties working collaboratively, and that "all" means you as the legislative body,

Health and Human Services Committee January 26, 2012

rather than making one party the villain and the other the victim as the reason for a need to change. It's obvious that in 2009 the initial reform got off on the wrong foot. Understanding process, understanding project management, understanding the need to carefully plan and collaborate, what I saw very early on was the lack of key players being invited to the table early on in the planning process. So, all of sudden, these changes were thrust upon judges, guardians ad litem, legal parties, families, consumers. And so, of course, the impact was poor implementation. Essentially we didn't plan to fail; we failed to plan. So what I really ask is that we look at going forward and getting all stakeholders, that is the legislative body, that is all the stakeholders, to say: What progress has been made?--because there has been progress; what progress hasn't been made; and what needs to be fixed? As a family member I need you and as a foster parent I need you to fight for me and not over me. Thank you. [LB961]

SENATOR GLOOR: Thank you. And since you brought up the issue of planning and all parties being at the table, that's good advice. One of the parties that I believe wasn't at the table in a meaningful way was the Legislature, so... [LB961]

LESLIE BYERS: And so that's why I'm so excited that...and this is a great opportunity now that the Legislature...I just ask that it not be a knee-jerk, but maybe we come together and say, let's rethink this. So thank you. [LB961]

SENATOR GLOOR: Okay. Thank you. Senator Howard. [LB961]

SENATOR HOWARD: Senator Gloor...or thank you, Senator Gloor. Leslie, if I may call you Leslie? [LB961]

LESLIE BYERS: Please. [LB961]

SENATOR HOWARD: Just so I completely understand: You're a foster parent. [LB961]

LESLIE BYERS: Yes. [LB961]

SENATOR HOWARD: And how long have you been a foster parent? [LB961]

LESLIE BYERS: Six months. [LB961]

SENATOR HOWARD: Oh. So a relatively new foster parent. [LB961]

LESLIE BYERS: Yes. Yes. [LB961]

SENATOR HOWARD: Well, how's it going? [LB961]

LESLIE BYERS: It's going great... [LB961]

SENATOR HOWARD: Good. [LB961]

LESLIE BYERS: ...because I take an active role and I have active participation with the caseworker. I could tell you when my daughter was in residential care for 27 months, her state caseworker never came to her placement in that entire 27 months. [LB961]

SENATOR HOWARD: Is this your bio daughter you're talking about? [LB961]

LESLIE BYERS: This was my bio daughter. I've been involved in... [LB961]

SENATOR HOWARD: Your biological child. [LB961]

LESLIE BYERS: Yes, my bio daughter was in out-of-home residential care. So... [LB961]

SENATOR HOWARD: So you are a foster parent to a different child now? [LB961]

LESLIE BYERS: I'm a foster parent to a...this was my bio daughter. I am a foster parent now just for a child. [LB961]

SENATOR HOWARD: All right. And your bio daughter is no longer in the system? [LB961]

LESLIE BYERS: Oh, no. She's 26. [LB961]

SENATOR HOWARD: Okay. [LB961]

LESLIE BYERS: Yeah. [LB961]

SENATOR HOWARD: Well, you have an interesting reflection there with your own experience... [LB961]

LESLIE BYERS: Yes. [LB961]

SENATOR HOWARD: ...and having your child placed out of home for that long a period of time. [LB961]

LESLIE BYERS: Yes. Yes. Correct. [LB961]

SENATOR HOWARD: All right. [LB961]

LESLIE BYERS: Correct. [LB961]

SENATOR HOWARD: Well, thank you for sharing your experience. [LB961]

LESLIE BYERS: Thank you. [LB961]

SENATOR GLOOR: Thank you, Ms. Byers. [LB961]

MISTY MURPHY: Thank you for letting me sneak in. It's been a long day for everyone, I know. My name is Misty Murphy; first name Misty, M-i-s-t-y, last name Murphy, M-u-r-p-h-y. I am here as a concerned citizen and in opposition to LB961. First, let me say that in all due respect to County Attorney Alicia Henderson who I've worked verv closely with over the last couple of years, I want to say that we don't make nails. Nails are brought to us broken and we are then asked to fix these nails and then fix what broke those nails. That is not an easy task. I moved to DHHS...I'm sorry, since 1999 I've been working in the field of human services. Over the last 11 years I've worked at several community agencies in very many different roles. I've gained a lot of experience and knowledge in adolescent offender issues, homelessness, poverty, domestic violence, child abuse and neglect, mental health, and the legal system. Originally I moved to DHHS from the nonprofit field because I figured if I couldn't beat them, I would join them. And I joined them. (Laugh) And I quickly learned and saw the barriers that all case managers face. This is a systems issue. This is not an issue of who does the work. It's an issue of how we're doing the work. For several years with varying perspectives I have seen different processes in place that have been very time-consuming and ineffective. If we don't address those issues, we are not going to change how we serve children and families. After being at DHHS for about four years and as a juvenile services officer and then as a court CFOM, I recently moved to KVC. I have been there less than a month and I would not have moved to KVC if I thought that they were going to bail out. I do believe also that they are making the changes that they need to be making, otherwise I wouldn't have moved there. Over this month I've seen the issues brought forth today being addressed. This obviously hasn't been a smooth transition and it wasn't very well planned out. I think we all agree that this could have...this transition could have been smoother. However, moving case management again and in a very short time frame, we will again cause further disservice to children and families, further disruption in placements and in assigned caseworkers. Retraining on yet another new approach after we finally just learned what we're doing now will cause so much more confusion, more turnover, and further failure to assist children. I've seen firsthand the training that's going on at KVC. I've seen changes in structure, changes in staffing, changes in improvements of how we're meeting kids' needs. They haven't been perfect and neither has the department, but they are making changes. I ask that you look to the future and that you learn from the past. Change is needed and it is necessary; however, in the event that case management does go back to the department, I urge you, please slow down. Address the true barriers because this is not a nail company. We don't make them. We help them live better lives. And I'd be happy to answer questions if you have

any. [LB961]

SENATOR GLOOR: Thank you. Senator Howard. [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. I'm interested in knowing...if I heard you, you said you came...you had been working as a CFOM? [LB961]

MISTY MURPHY: Yes, that's correct. [LB961]

SENATOR HOWARD: How long did you do that? [LB961]

MISTY MURPHY: I was officially changed to a CFOM in I believe October of 2011. [LB961]

SENATOR HOWARD: Okay. So you did that about five months, four months? [LB961]

MISTY MURPHY: I'm sorry, actually my role has changed so many times that I don't actually remember when I changed to being a court CFOM. I changed from a JSO to a CFOM, and I had generally duties that changed throughout that time period. Then I started in Judge Ryder's court in about October. [LB961]

SENATOR HOWARD: So before becoming a CFOM, you were with the Department of Health and Human Services? [LB961]

MISTY MURPHY: Yes, I was. [LB961]

SENATOR HOWARD: So can you tell me what you did as a CFOM? [LB961]

MISTY MURPHY: I've done all kinds of things. I have reviewed our data. I've reviewed our documentation systems, both the DHHS and the documentation that KVC has provided. I have looked at placements. I have completed what we call mini CFRs or mini reviews of cases to see if we're meeting federal guidelines. I have attended court, reviewed court reports, made sure permanency goals were in place, made sure KVC was on track to meet goals that were in place. I'm sure there's more. [LB961]

SENATOR HOWARD: But when you...when you...it's my understanding that CFOMs really are to be in the court, in the courtroom. [LB961]

MISTY MURPHY: There are difference roles of CFOMs. There are court CFOMs. There are CFOMs that are collocated at KVC that are providing some direct contact with KVC workers that do have active involvement in those cases and decisions that have to go through them. And there are also CFOMs that are "QA-ing" all the work that's being done. [LB961]

SENATOR HOWARD: Okay. Well, that's very helpful. Thank you. [LB961]

SENATOR GLOOR: Ms. Murphy, what is your responsibility now? What job do you have now with KVC? [LB961]

MISTY MURPHY: Right now, my title is family permanency specialist supervisor. I work with juvenile offenders and I supervise, I think right now, six to seven family permanency specialists and two PSWs. [LB961]

SENATOR GLOOR: Okay. You will be pleased to know that in one of the hearings yesterday we did talk about the issue of systems as opposed to blaming people, taking a look at the system and what could be changed. So that certainly is a theme that has been talked about here quite a bit and we recognize that need. [LB961]

MISTY MURPHY: Good. I appreciate that. [LB961]

SENATOR GLOOR: Thank you. [LB961]

MISTY MURPHY: Thank you. [LB961]

SENATOR GLOOR: Father Boes, you've tried to get up here several times. You're welcome to. [LB961]

FATHER STEVEN BOES: (Exhibit 21) I don't have a family to go home to, so I'm all right. [LB961]

SENATOR GLOOR: And in your spelling of your name, you need not spell Father. I think we can handle that. [LB961]

FATHER STEVEN BOES: Father Steven Boes, S-t-e-v-e-n B-o-e-s. And I just want to begin by thanking this committee for taking this subject up. I think certainly you've elevated the discussion of the needs of the kids in the state and have shined a light on a problem that's been around for a long time. I think that from the perspective of Boys Town I'd like to tell you that first of all what we think is important for creating good systems is to do two things. One is to listen to stories like the ones we heard, both the positive and the negative, and to listen very carefully to other data, survey data, outcome data like the CFSR data. Both of these have to be weighed carefully to make good decisions. And that's really the thing that makes us good at taking care of kids, is we look at both, and I would encourage you to do the same. One of the things we know about anecdotal data is it tends to skew negative. When you ask ten kids how's Boys Town, you're going to hear nine of them say something bad, and yet, when we do a survey of those same kids, nine of them say it's great. So I think that you have to weight

Health and Human Services Committee January 26, 2012

both. And I think that to dismiss an entire system like Florida or Kansas with one horrible story is easy, and you can do the same... I could do the same with other states that are...where all the caseworkers are run by the state. I mean, all of us could find anecdotal stories, you know, that are horror stories. And the reason Boys Town is interested is that we want to make those horror stories go away. Looking at the data that you gathered in LR37, one of the things is, in your anecdotal data there's lots of negative stories; but there are also positive stores about reform. In your survey data, there is something that I'm not sure you're aware of. Client satisfaction among biological parents is higher among lead agencies areas in 8 out of 10 measures, and in 9 of 11 measures for foster parents. That's in your own data. And the data that the state provides, which is CFSR data, which is sort of like big system change data, 4 of the 6 categories are better now with the lead agencies than with the previous system that was in place. So I think that it can be...a very clear interpretation of the data could be that this new lead agency model of reform is no worse than the previous system...I kind of skipped to C because I've got five minutes. But that there are glimmers...yeah, where the heck is he? But there are glimmers of hope in the lead agency model of reform, and if those glimmers weren't there, honestly, Boys Town wouldn't be involved in this system of reform. It's really those glimmers of hope that we're trying to pick up and say, let's try to improve on those. So for those reasons, you know, judging both anecdotal data and harder data, Boys Town stands officially in opposition to LB961 to keep that glimmer of hope alive. Like other people have said, it's going to take several more years of chaos to return to a system that is exactly the same as it is now. There's very little hope for Nebraska's kids. A whole generation will be lost again if we don't allow this to continue. That's my opinion based on the data. And lead agency case management officially began January 1, but I know enough talking to some of the people at NFC that it wasn't really implemented until the end of June. So case management with the lead agencies has really been in place for six months; and certainly everybody, including the Annie E. Casey Foundation and others, has said that the first three years is chaotic when you try to transfer case management. So a lot of the stories we hear could be expected given the nationwide data. Also, Boys Town's goal in all of this, the reason we're even involved at all and we've invested \$5 million of our dollars in this effort through NFC, is that we're interested in changing the culture of America. We want every system in America to try to keep kids home whenever possible and to get them home as quickly as possible. So that's our goal. We think the lead agency has the...is the right lever to push the culture in that direction. Third, a lot of people have said, you know, what's all this additional cost? Now, I'm not running NFC, but I've gathered a little bit of data--again, some anecdotal, some hard. The Nebraska system has been underfunded for years, and what you now have with the lead agencies in the room with DHHS is you have an advocate with power. The very letter that you show as something negative is actually an agency fighting for kids' rights. If Appleseed or somebody else was doing that, you'd...you know, everybody would like, rah-rah, go fight for some more money for the system. And I think that that's one of the things that happens with the lead agency model. You have somebody fighting for more resources for kids behind the scenes

Health and Human Services Committee January 26, 2012

where there's real power, and they're providing more accurate data to the state. Second, you had to run two duplicate systems for a while as you transfer from state caseworkers to other private caseworkers. Also, you've contracted with the leads for a lower case rate of about 14, and I know that NFC is pretty close to that, whereas it used to be 30 or 40. So you're adding cost to the system. Fourth, you've added tons of millions of dollars in new services, which didn't exist before, so you've made that change at the same time you made the lead agency change. And fifth, there's been cost-shifting within DHHS. Medicaid costs, which used to be paid by Medicaid, are now being shifted to the lead agencies as they try to tighten the regulations. And I'd be happy to take any questions. [LB961]

SENATOR GLOOR: Father... [LB961]

FATHER STEVEN BOES: Boy, that was pretty close to five minutes. I practiced good. (Laugh) [LB961]

SENATOR GLOOR: Remarkable. Remarkable. Do you think we'll be able to get to a case rate, as you heard the testimony, by the first week of February? [LB961]

FATHER STEVEN BOES: The answer is yeah, and it will probably stink and we'll probably have to fix it about ten times. That's what every state has had to do. Yeah, realistically that's what's going to happen. It will be poorly done and then we'll fix it and then we'll fix it again, and that's what every other state has had to do. [LB961]

SENATOR GLOOR: So... [LB961]

FATHER STEVEN BOES: But it's essential to moving in the right direction. [LB961]

SENATOR GLOOR: So it'll be a compromise that everybody can live with but nobody is happy with. [LB961]

FATHER STEVEN BOES: That's right. And then more data will come out and we'll set it again and more data will come out and we'll set it again. [LB961]

SENATOR GLOOR: Okay. Senator Howard, did you have a question? [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. It's like you can read my mind. (Laughter) Can you...I understand that you're advocating for a case rate. [LB961]

FATHER STEVEN BOES: Certainly. [LB961]

SENATOR HOWARD: Did you look at a case rate when the contract was initially put in? I'd like to know a little history. I'd like to know why you feel a case rate would be a

better...why you want this. [LB961]

FATHER STEVEN BOES: Great. Great. One of the reasons why I think having a lead agency in charge of placing...or at least suggesting which placement to have a kid in, is that the lead agency gets paid a certain amount per kid. And so their natural tendency, their own internal drive financially is to try to find the care that's closest to home for the child. You've baked that into the contract with the lead agencies. What you haven't done is done the same for the state worker who is overseeing the state agencies. They have no skin in the game. So requiring a case rate means that it hurts the budget of DHHS if it continues to pull kids out at the rate that it's doing. The agencies, again and again, believe that some children at least can be safely cared for at home. When they recommend that, they're overruled either by a judge or by human services or whoever else in charge. And having a case rate will be a lever to push for that kind of system reform that all of us have agreed on, which is keeping kids at home whenever possible, pulling less out of the home, and getting them home safely whenever it's possible. [LB961]

SENATOR HOWARD: Now when I've read through the material regarding the proposal for a case rate, two things really leap out at me. Number one, the case rate would always start at the first of the month no matter when the child was placed with the agency, so there's no prorating for the month. It doesn't start the day that...as we used to do it, the day when the child went into the foster home, that was the day the foster home was paid from. So what you're asking for is that case rate would start, if the child came in the 31st of the month, that rate would start from the 1st. [LB961]

FATHER STEVEN BOES: You know, Senator Howard, I'm not involved in the day-to-day management of this kind of detail. I'm the national executive director of Boys Town, so I don't know specifics about that at all. I couldn't answer that question. [LB961]

SENATOR HOWARD: Well, you might know this one. When you factor the child, it won't be a state ward case rate. It would be for children served, as I understand it, which would mean all the children in the family unit. [LB961]

FATHER STEVEN BOES: Again, I couldn't answer specifics about the negotiations because I don't do that on a day-to-day basis. [LB961]

SENATOR HOWARD: Okay. Well, my concern is coming from the adoption. You know, I'm just going to leave this as...use this as an anecdotal story, is that oftentimes we would place a child with a family that had other children. Now if I were to be the case...if I were to be the agency that operated on this case rate, with children served I could imagine that would be all the children that were in that family unit. [LB961]

FATHER STEVEN BOES: Oh. I could see that definitely has to be considered when

we're doing the negotiations about case rate. [LB961]

SENATOR HOWARD: I would think so too. Thank you. [LB961]

FATHER STEVEN BOES: Yeah. I agree. That's important. [LB961]

SENATOR GLOOR: Other questions? Thank you. [LB961]

FATHER STEVEN BOES: Thanks. [LB961]

SENATOR LAMBERT: Thank you. [LB961]

SENATOR GLOOR: Good afternoon, Sandra. [LB961]

SANDRA GASCA-GONZALEZ: (Exhibit 22) Good afternoon. Good afternoon, Senators. My name is Sandra Gasca-Gonzalez, S-a-n-d-r-a G-a-s-c-a hyphen G-o-n-z-a-l-e-z, and I am the president of KVC Behavioral HealthCare and I'm here today to speak in opposition of LB961. While KVC appreciates the time and effort taken to study the child welfare system, we oppose this bill for three primary reasons. You've heard a lot of reasons why. One of the reasons that I don't believe has been discussed enough is that returning case management responsibilities to the state would be a step backwards, because we are seeing positive improvement in outcomes for children and families. Number two, we do not believe that a conflict of interest exists by having lead agencies perform case management and having the ability to provide services. And, number three, the staffing ratios for lead agencies are at levels consistent with nationally recognized standards, and the bill does not make the same demands of DHHS. As a lead agency, KVC has been providing case management to 4,700 children in 19 counties, and the decision to transition case management from DHHS to the lead agencies was made to streamline communication and to improve service delivery. Even though our role expanded to be case management, DHHS retains key responsibilities around safety determinations for initial safety, and final determinations on placement and case closures. And you heard one of the other testifiers speak to the role of the CFOM. The bill states that case managers single-handedly plan and make decisions for children--and that is not true. There are judicial parties involved. You heard some of those speak today. And the judge on the case is actually the one who makes the final determination regarding the case planning process and the permanency plan. This bill contends that providing case management services while also providing direct services creates a conflict of interest for the lead agency. And the focus really should move from conflict to the other C word, which is continuity. We heard that a lot today. It's been very painful to sit here and listen to a lot of the testifiers talk about their experiences and the lack of continuity that they have experienced as a result of all the disruptions in the system, so there is nothing more frustrating for families than to deal with multiple professionals, having to start over and over and over again. And when I look at this

Health and Human Services Committee January 26, 2012

potential conflict of interest, what I see is that really we need to make it a priority to find consistency for families, and that might mean less professionals involved with the family. Further, this part of the bill is problematic because lead agencies are contractually bound by our "no eject, no reject" contract with the state to accept all referrals unconditionally, whereas subcontractors can and do deny referrals. That said, I do want you to refer to Attachment 1 which outlines the payments KVC has made to subcontractors for fiscal year 2011. The amounts paid to our subcontract network is to the tune of \$31 million for our fiscal year. That is almost half our budget. Clearly, KVC has shown a willingness to develop strong partnerships with subcontractors. This bill also infers that caseload size is a critical consideration in the recommendation to return case management to the department. Since this bill does not require reduced caseloads for DHHS staff, the bill falls short. It would be best practice, as many of you know, to require caseloads of 1 to 16 families for caseworkers statewide, as is required for the lead agencies. My greatest opposition to this bill is founded in the successes that the Families Matter initiative is now experiencing. If you refer to Attachment 2, Nebraska's performance has improved since the implementation of this initiative. Both of the privatized areas of the state have improved in five of the six outcome areas measured by the federal Administration for Children and Families. I'm going to read them because you heard a lot of negative today and I want you to focus on the positive things that have improved. The "Absence of Maltreatment Recurrence," "Absence of Maltreatment in Foster Care," "Timeliness of Permanency of Reunification," and "Placement Stability" outcomes have improved in both areas. Additionally, the Southeast Service Area, which is the Lincoln area, also has improved "Timeliness to Adoption," and the Eastern Service Area has improved "Permanency for Children in Foster Care for Long Periods of Time." The overarching theme is that by reviewing the outcomes that we monitor closely, children are safer and more stable than they were prior to implementation of reform efforts. There are a lot of concerns, but this is what the baseline compared to where we're at today is showing. In closing, I just want to say that as a nonprofit organization, KVC has made a \$14 million investment of private funding because of our belief in needing to reform a very broken child welfare system. We remain committed today and believe that LB961 would be a step backwards. Despite the contentious climate which is very contentious, we have demonstrated that we can and will improve outcomes for children and families. I urge you to acknowledge the successes in the present and build upon the momentum and lessons learned to improve the future by not advancing the bill in its current form. And I am guessing you might have questions for me. [LB961]

SENATOR GLOOR: Are there questions? Senator Howard. [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. I'm so glad you're here because I think you can answer some of the questions that other people didn't know. [LB961]

SANDRA GASCA-GONZALEZ: Sure. I'll do my best. [LB961]

SENATOR HOWARD: Tell me, did KVC give their written, I'll call it a resignation, in November? So you submitted that in writing to the Department of Health and Human Services. [LB961]

SANDRA GASCA-GONZALEZ: In 2009, we started talking to the department about a case rate methodology, and all along we knew that we would need to make an investment. Since that point in time, when CEDARS went away, when Visinet went away and our contract required us to take over, that was not something we had anticipated to do, and then Boys and Girls went away, we continued to focus on the need for a case rate methodology. We have consistently said that that is something that we need, and the reason being is we were told we would serve 3,000 children and we were given 4,700 children. So to answer your question, we have had these conversations repeatedly on a monthly basis, and when the point came to where we could not continue to invest millions of our own private funding, because we are a nonprofit, we needed to tell the state, look, this is urgent and we need to figure out an alternative. [LB961]

SENATOR HOWARD: So I will take that as a yes? [LB961]

SANDRA GASCA-GONZALEZ: Yes. If you read the letter, which I believe you have... [LB961]

SENATOR HOWARD: I have. [LB961]

SANDRA GASCA-GONZALEZ: ...we offered seven different options...six or seven different options. We do not want to go away. I want to be clear about that. Even if case management goes away, we do not plan to go away. We have made a significant commitment to our foster families, to the people that we provide services to, and so our intent has never been to go away. As I think Father Boes said it best, if it was an advocacy organization up here advocating for funding for the system, we would be having a different dialogue. [LB961]

SENATOR HOWARD: In the letter, in this written letter that we've agreed that was submitted, were you asking for an amount of money per month? [LB961]

SANDRA GASCA-GONZALEZ: What we told the state is that we have X number of kids beyond what was projected in our budget and this is what it's costing. In order for us to continue, there needs to be some change made to what's happening in the system or to provide additional funding. The other factor that impacted us besides the high numbers of kids coming into the system were the changes in Medicaid funding. And so when the PRTF changes happened, we saw over 100 kids that were funded through Medicaid dollars in June, July, to where they were no longer funded by Medicaid, and KVC was

paying for those services. [LB961]

SENATOR HOWARD: And yet that was included in the original contract as well as the provision that KVC, which was the only agency that agreed they could serve the entire state, you could pick up all of the regions in the state if you were asked to do that. [LB961]

SANDRA GASCA-GONZALEZ: I don't believe that's true. [LB961]

SENATOR HOWARD: It is outlined in the original contract. [LB961]

SANDRA GASCA-GONZALEZ: Okay, as the president of KVC, I am informing the committee that we have never had an intent of taking over the whole state. There was a contingency plan in there that required every lead agency to accept the responsibility for the service area that they were in. That was the contingency plan. And if there was no contractor available at that point in time, then the remaining lead agencies would need to take that over. That would be...those would be the only conditions in which that would have ever been discussed, but it wasn't... [LB961]

SENATOR HOWARD: And that was exactly right,... [LB961]

SANDRA GASCA-GONZALEZ: Okay. [LB961]

SENATOR HOWARD: ...and KVC was the only lead agency in the position or that would consider every area. [LB961]

SANDRA GASCA-GONZALEZ: That had to have been before my time. [LB961]

SENATOR HOWARD: Do you recall the information that was given to us regarding the case rate--case rate proposals? It's very extensive. [LB961]

SANDRA GASCA-GONZALEZ: Was this during the LR37 process? [LB961]

SENATOR HOWARD: I don't know your time frame, but this has been recent. Let me narrow it down for you. I asked Father Boes if he was familiar with the proposal that the case rate would be based on the month a child came in or was...the case was given to your agency. Not the date, not the 31st of the month if the child came in the 31st, but the entire month. Am I correct in that? [LB961]

SANDRA GASCA-GONZALEZ: There are a lot of different ways to do a case rate. In my 15 years of working in the system, you can have a referral-based case rate, you can have a family-level case rate, you can have a per-child case rate, you can slice it however you want; you can have a categories-of-care case rate. And that really is

dependent on whoever is putting that methodology together, and the state has been working with Casey Family Programs to put that together. [LB961]

SENATOR HOWARD: So you're saying you're not necessarily wedded to that. [LB961]

SANDRA GASCA-GONZALEZ: No. [LB961]

SENATOR HOWARD: To a rate for the month? [LB961]

SANDRA GASCA-GONZALEZ: You know, I think what's important here is to know that this is going to be an evolving process. I think Father said it really well with, it's going to change, it's going to continue to change. We are learning more and more every single day as we improve our data system and our data collection. So I think to say that I'm wedded to whatever document you're referring to? No, I'm not wedded to that. It really depends on what the state methodology is, how many children are in the system, where they're at. I mean, there are a lot of variables that go into determining a case rate. [LB961]

SENATOR HOWARD: Okay. And then I just have one final question for you. When you talk about children served, who does that refer to? [LB961]

SANDRA GASCA-GONZALEZ: Children served in our definition... [LB961]

SENATOR HOWARD: Yes. [LB961]

SANDRA GASCA-GONZALEZ: ...means state wards... [LB961]

SENATOR HOWARD: Children served. [LB961]

SANDRA GASCA-GONZALEZ: Children served in the home, out of the home, siblings, juvenile offenders, status offenders. Those are the categories that I... [LB961]

SENATOR HOWARD: So a family system, basically. [LB961]

SANDRA GASCA-GONZALEZ: Yes. [LB961]

SENATOR HOWARD: Children in the home, which includes more than the child that may be the state ward. [LB961]

SANDRA GASCA-GONZALEZ: Right. [LB961]

SENATOR HOWARD: So the case rate would be based on children served. [LB961]

SANDRA GASCA-GONZALEZ: Again, it goes back to how it gets defined in the methodology. It could...you can have a family case rate, you can have a child case rate if it's for out-of-home kids. There's a lot of different ways to determine a case rate. [LB961]

SENATOR HOWARD: Okay. Thank you. [LB961]

SENATOR GLOOR: Senator Krist. [LB961]

SENATOR KRIST: I want to apologize, but I was introducing a bill in Judiciary on a related subject for our committee and the issues that we have, so I'm picking it up in the middle. I listened to some of Father Boes on my way back through my office, and then some of yours, and so I'm going to ask just a couple of generic questions. And if you've already broached these issues, then just tell me you have and I'll look it up for myself. A comment, first, to start with. I think the whole contract process that the state went into is probably one of the most...one of the worst contracts I have ever, ever looked at in the services contract areas. It is unconscionable for me that anyone would have bound the state to the parameters in the contract. It is my experience in the services contract area that in order to have respect between the contractor and the state, you have to first start off with a contract that measures performance; it measures where we're going, goals and objectives; it tells you what your cap is; it tells you what you can earn, what you can expect to earn, and then where your motivation is to earn more by doing the job better. If we have...if I have anything to do with, with the bills that I have submitted since then, that part of it may be corrected, but probably not until 2014 as I'm reading the tea leaves. I did have an extensive conversation with your CEO, and at some point during that conversation I said what I'm seeing in contract and with the difference--and I think you heard most of the things that were being referenced today were to KVC--I said it makes sense to me based upon sitting through all the hearings and taking all the data and looking through all this for the last year, that a broker model that uses service providers seems to be doing, in my mind, a better job. And I don't know whose data to believe anymore, because yours is different than theirs, is different from the Foster Care Review Board, it's different from any data set out there. We'll deal with that in another bill. But is your company willing to talk about a remodeling process that puts a broker process in place with the same kind of function that NFC has in this state, if that's what we decide to go to, or will that be another parameter that you might have to pull out for? And I'm not being facetious. That's an honest question. [LB961]

SANDRA GASCA-GONZALEZ: I think we're open. We want to be a part of the conversation. So I don't think that anything is off the table for us in terms of how it gets set up. And we're committed to Nebraska. The broker model...you know, I heard Senator Howard ask earlier: Why the Kansas model? I came from that model. I was there when privatization began. I was a worker, front line, saw it down and dirty, and then I...promoted supervisor director. And what we focused on was that case

Health and Human Services Committee January 26, 2012

manager--me--I had a small enough caseload to go to the visitation, to be that expert with the family and learn from them, and then go and testify in court. It was...it worked. And it is evidenced by the fact that Kansas is ranked second in the nation for meeting outcomes. So, you know, broker models, you're right, there's all kinds of service delivery models. I believe in what I worked in and what I saw, and I believe it can work. But I also know that you can't just have your lead agency doing all the services. Where I worked, we had 50 percent of our services were subcontracted. And it's really looking at the mix of which services make sense to subcontract and which ones don't. [LB961]

SENATOR KRIST: Well, really privatization has been going on in this city, in Omaha, for years. The state can't provide all the services. Boys Town provided them. Other people provided them. This is just in terms of a fancy nomenclature, we put a contract on it and said now you're bound to provide those services. And again, the contract...let's not talk about the contract. But my last question has to do with dollars and cents. Obviously, the frustration level has come through loud and clear: How much money is it going to cost? And again, in that private conversation with your CEO, I asked that guestion. So somewhere, somehow, in the next few weeks, we need to turn the volume down, we need to focus on what it's going to cost, and it's not I need another 2.2, I need another 2.2, I need another 1.4, because we're going to have to come to it. And I understand your methodology, and Boys Town and Father Boes's methodology at this point is to tell me a case rate is going to do that. Well, we've been hearing a lot of promises about what's going to do it. So I don't disagree that we need to give it time for the case rate to be developed and actually evaluated. But there's got to be an end to the money that's being spent, I mean...or at least a quantifiable amount of money that we know what we can budget for. Because, at the present time, I would say, you know, the big question from the Governor when he said you're proposing all these really neat things; what is it going to cost? My response was, I don't know; what does yours cost? Because DHHS can't tell us what the present system has cost. We've asked that question, and I don't think it's rude of me to say that when you ask it routinely and you don't get an answer that really quantifies where you're going, how are...? That's our job. We're supposed to appropriate; they're supposed to execute. How can we appropriate if we don't know how much money is there? I'm sorry. Go ahead and respond. [LB961]

SANDRA GASCA-GONZALEZ: I was just going to say that one of the advantages of having moved to this system really is that we do know what it costs. When we entered this, we said...we were told we would have a certain number of kids. I appreciate the bill that you've introduced, by the way, around N-FOCUS and the data management system, because that is very much needed. Over time, we have learned how many kids are really in the system, going back to child served, and we have learned how much it's going to cost. And we've met with Liz Hruska. I mean, we've provided that information. So one of the advantages is that we can't go into another fiscal year and not pay providers. We have to manage our budget within the fiscal year. We're audited. So those are all advantages that I think should be taken advantage of so that we can look

at the case rate and what it actually costs. We are not going to get rich off of this. We have not gotten rich off of this. We want to cover our costs and that is what we've said to the department. [LB961]

SENATOR KRIST: Thank you. [LB961]

SENATOR GLOOR: Senator Lambert was talking to the director about the risks the state has had of people walking away from their contract. And then the discussion was fulfilling that contract, how many days' notice does KVC need to give in the contract? I want to make sure I get this right. [LB961]

SANDRA GASCA-GONZALEZ: Our contract provision, as with CEDARS and Visinet and Boys and Girls, is 90 days. [LB961]

SENATOR GLOOR: Okay. Does KVC consider the November letter as official notification if a case rate agreement isn't reached? [LB961]

SANDRA GASCA-GONZALEZ: We believe that the state is making good progress towards the case rate, so we have been working with the state to get that finalized. [LB961]

SENATOR GLOOR: But from a formal and official process...legal...legally... [LB961]

SANDRA GASCA-GONZALEZ: Um-hum. [LB961]

SENATOR GLOOR: ...could that letter and is that letter being looked at as a formal notification? [LB961]

SANDRA GASCA-GONZALEZ: I don't believe so. No. [LB961]

SENATOR GLOOR: Okay. Thank you. Senator Krist. [LB961]

SENATOR HOWARD: My... [LB961]

SENATOR KRIST: Seconds. [LB961]

SENATOR GLOOR: Senator Krist. [LB961]

SENATOR KRIST: Is it not true though that by federal law, because there's federal funds involved, you have to give your employees 60 days' notice... [LB961]

SANDRA GASCA-GONZALEZ: Yes. [LB961]

SENATOR KRIST: ...for termination? [LB961]

SANDRA GASCA-GONZALEZ: Yes. [LB961]

SENATOR KRIST: Okay. Well, it needs to be... [LB961]

SANDRA GASCA-GONZALEZ: That's the WARN Act. [LB961]

SENATOR KRIST: Okay. Well, that needs to be added into the equation. Because if you draw the line in the sand, you have to give your employees 60 days, and it's going to be very tough to start everything back up again. So it's 60 on a federal because there's federal money involved. It's 90 with the state contract. Which again, poor contracting technique, but we'll leave that at that. [LB961]

SENATOR GLOOR: Other questions? Thank you, Sandra. [LB961]

SANDRA GASCA-GONZALEZ: Thank you. [LB961]

SENATOR GLOOR: Could I see a show of hands of how many people remaining would like to speak in opposition? Okay. Next. I count roughly a dozen of people wanting to...and so you understand the importance of trying to stick to the five minute criteria, we may have to consider changing that. [LB961]

DAVID NEWELL: (Exhibits 23 and 24) Thank you, Senator Gloor, Chairwoman Campbell, and the committee. My name is David Newell, D-a-v-i-d N-e-w-e-I-I. I am the executive director of Nebraska Families Collaborative. Once again, I would like to thank all of you on the committee for the important work that you have done through the LR37 process. No matter what your opinion of this bill or any other being considered this legislative session, the LR37 process clearly communicated the one thing that all stakeholders can agree on is that Nebraska's system of care is not good enough for our children and families, and that we must build on child, family, and community strengths so that every child is safe, healthy, and in a forever family. Despite this common ground, however, Nebraska Families Collaborative is strongly opposed to LB961. On June 23, 2011, this committee heard testimony by Jack Tweedie of the National Council of State Legislatures in which Mr. Tweedie made three points: privatization of child welfare holds promise for accomplishing significant change and improvement; designing and implementing privatization involves substantial challenges; and successful implementation of privatization requires collaboration from a variety of stakeholders over a long period of monitoring and adaptation. As someone who has been engaged in these efforts for the past 17 months, I can wholeheartedly say that these points are as true today as they were last June, and that in collaboration with all our stakeholders we can build on the foundation that has been established that will meet the needs of our children and families. Partner agencies, along with other not-for-profit agencies, are

Health and Human Services Committee January 26, 2012

committed to their mission, vision, and values, and to working with children and families in Nebraska. On January 1, 2011, the two remaining lead agencies agreed to undertake case management responsibilities. This transfer was done for many reasons, but the most important was that families, service providers, and judicial parties reported the challenges in working with multiple people--and so we made this change. What we're hearing from our stakeholders today is several things: Things are getting better; youth and families we serve do not want to see case management transferred to another entity; they do not want our contract to be terminated; and families are reporting that they are more involved and their values and cultures are respected. LB961 raises a number of issues that I would like to take a minute to address. LB961 correctly notes that the state has the legal responsibility for the children served by the child welfare system and their families. However, it would be unfortunate if the Legislature concluded that this meant that case management could not or should not be delegated to private, community-based agencies. The last national study of the scope of child welfare privatization conducted under the auspices of the federally funded Quality Improvement Center on the Privatization of Child Welfare found that over half of the states in fact have contracts with private agencies that included case management responsibility. LB961 also correctly notes that training and turnover of case managers negatively impacts child welfare outcomes. However, it goes on to assert that privatization makes both worse, and that statement is simply not supported by research. In fact, LB961 fails to recognize positive impacts that contract reforms have had over time on the work force in other jurisdictions, and it does not acknowledge the significant steps that we are taking in partnership with the department to address these critical issues. LB961 asserts that privatization negatively impacts child safety, permanency, and well-being outcomes for children and families. While it is true that overall results have been mixed in many of the states that launch performance or risk-based contract reforms over the past decade, LB961 research fails to note that some of these public-private efforts have achieved dramatic improvements over time. There is ample evidence that lead agency contracting models are similar to Nebraska have contributed to improved results for children and families in a number of states. Specifically, LB961 will once again disrupt case management support and services for children and families in the Eastern Service Area and Southeast Service Area, approximately 70 percent of Nebraska's child welfare and juvenile justice populations; prematurely terminating lead contracts with no possibility of renewal on July 1, 2014, in spite of clear signs that progress is being made--I'm sorry, 2013 on that; it will undermine quality by eliminating the lead agencies that currently meet national accreditation standards; it will give up on reform and revert to a system that was seriously flawed prior to privatization; and it will take away the significant financial resources that both private lead agencies have invested into their systems of care. Despite the challenges that we've experienced over the past year, I believe that we are at a tipping point in a positive direction. I am very excited by the staff that we have at Nebraska Families Collaborative. They are smart, they are dedicated, and they are learning their job every single day. I am excited about the network of Nebraska providers that we have and I'm excited by the possibility of finding

technological solutions that will meet the needs of our stakeholders. But most importantly, I'm excited by the possibilities of working with children and families in new ways so that we can safely keep children together with their families. For all of the above reasons, Nebraska Families Collaborative strongly opposes LB961. [LB961]

SENATOR GLOOR: Thank you, Mr. Newell. [LB961]

DAVID NEWELL: Thanks. [LB961]

SENATOR GLOOR: Five minutes comes quickly when you have a lot to say, doesn't it? [LB961]

DAVID NEWELL: Yeah, it does. Sorry. [LB961]

SENATOR GLOOR: It's okay. Questions? Seeing none, thank you for the packet... [LB961]

DAVID NEWELL: Okay. [LB961]

SENATOR GLOOR: ...and there is much in here for us to take a look at. [LB961]

DAVID NEWELL: Okay. Thank you, Senator Gloor. In addition, I have a handout of support letters that are from families served by NFC that I will give to the committee as well. Thank you for your time. [LB961]

SENATOR GLOOR: Thank you very much. Other opponents? Good evening. [LB961]

PATRICIA BLAKELY: Good evening. My name is Patricia Blakely, spelled P-a-t-r-i-c-i-a B-I-a-k-e-I-y. I go by Trish. I am, first and foremost, a parent who had a daughter involved in the system a number of years ago, and I got involved working within the system because of what happened with my daughter. So I have personal experience; not in child welfare, but in the mental health system. I've been involved in the system now for 13 years. I've been working within the system. Within the system, where I currently have been involved is working in child welfare now for eight years. I run a program called Healthy Families Project, which is a mentoring program that helps families complete the activities related to their programs, and we've contracted with child welfare in a number of different places over the past eight years. I didn't initially come here to speak tonight. I was just going to sit and listen. But after hearing everything that's been going on, I just felt the need to come up here and talk about experiences that as a parent...our program is a parent-to-parent support group, so we use parents who have had experiences to help other families be successful. And like I said, we've contracted within child welfare for eight years to do that. I've experienced working...or our program has worked specifically with child welfare before privatization.

Health and Human Services Committee January 26, 2012

We worked within the ICCU for a number of years before the ICCU was cancelled, and now we work with a privatization company. It has been a nightmare. When I heard...and this is just my perspective, but when I heard that there was going to be yet another change that would have the kind of impact on families that the other change had, I just about came unglued. And the reason is this. While there are many problems yet to be solved in the system, I feel like the partnerships are beginning to jell. The activities are happening that are allowing people to work together. I think, from a perspective of where I come from and having worked from, families have seen so much. The trauma they have experienced within the systems related to the changes that the system itself has made are sometimes far worse than what got them into the system to begin with. And I hope in what your choices are that you'll open your mind to the fact that, if we yet again make another decision to make yet another change, what the families go through. And I've heard a number of people talking here tonight, but I'm talking about the 4,000 families right now in the system. And I know what just the change from the ICCU, which was a small program within child welfare, what that change initially did to those families that we worked with, because we had a contract to stay with those families during that transition period. And that was horrible for the families. So I'm here to speak on behalf of the families, and I would hope that you will look at trying to see what's wrong, also seeing what's right, because some of those things have been addressed. We are seeing much different...we're seeing very positive changes being made just within our program and the partnership that we're working with, which is here with KVC, that occurred just over the last few months. But it would be my hope that you will look at the potential of harm that you have to cause to the families if you decide to make yet another change and how that would disrupt 4,000 families. It would be my hope that you would look at what needs to be done to make it better; because it truly is my opinion as well that it is the system that needs to be changed, not the providers. [LB961]

SENATOR GLOOR: Okay. [LB961]

PATRICIA BLAKELY: And I think that by what I mean in the system, is the partnerships need to be better, all the way to the top, clear down to the bottom--the partnerships with all the providers, with the state, with the Legislature--so that everybody is working on the same page at the same time. And... [LB961]

SENATOR GLOOR: Ms. Blakely, you need to wrap up if you would, please. [LB961]

PATRICIA BLAKELY: I'm out of time. I'm sorry. I didn't realize it. [LB961]

SENATOR GLOOR: If Senator Cook had been able to stay, she would have said her favorite book is <u>The Tipping Point</u>. So is your testimony basically that you think we're close to a tipping point where things will start falling into place? [LB961]

PATRICIA BLAKELY: I do. I do. I think things are starting to, you know, they're

beginning to move in the right direction, yeah. [LB961]

SENATOR GLOOR: Okay. Thank you. [LB961]

PATRICIA BLAKELY: Thank you. [LB961]

SENATOR GLOOR: Any other questions? Thank you. Other opponents? Good evening. [LB961]

RICHARD MAZIKANI: How you doing? I'm Richard Mazikani. M-a-z-i-k-a-n-i. And pretty much I'm 18, I just graduated high school and I'm attending college now. And a lot of that is due to the current family that I live with now and my independent living specialist who's helped me out with grants and stuff like that. Because last year I was living in a separate house and things weren't going so well. So I got moved out, and I lived with a friend of mine and his family; and that's how we started working with KVC, and, you know, all of that. And like the whole time, they've been very helpful. Every time, you know, I call, if they don't, you know, pick up, they get back to me within, you know, one or two days. You know, there's never any problems between, you know, me and KVC, and from every, you know, person I've had work with me from, you know, Jamice (phonetic) to Nicole (phonetic). And they've also helped with a lot of like my financial aid, former ward money and grants and a lot of that, so that way I don't have to take out student loans for school, because, you know, I didn't, you know, have that much money, you know, to pay for my school. So now I, you know, can pay for it, you know, through grants and all that. And, you know, in addition to that, I'm also getting former ward money, you know; so really everything, you know, in my eyes, has been helpful. I haven't seen KVC really work in any negative ways. I was pretty surprised when I heard all of the stories, because, you know, working with them, everything has been 100 percent. There hasn't been any letdowns or anything. It's always been positive and moving and progressing and everything like that. So that's all I had to say. [LB961]

SENATOR GLOOR: Any questions? Thank you. Do you have homework? [LB961]

RICHARD MAZIKANI: Oh, yes, I do. (Laughter) [LB961]

SENATOR GLOOR: We better let you get out of here. [LB961]

RICHARD MAZIKANI: Yep. Thank you for your time. [LB961]

SENATOR GLOOR: Thank you. [LB961]

SENATOR LAMBERT: Thank you. [LB961]

SENATOR GLOOR: Please, have a seat. [LB961]

Health and Human Services Committee January 26, 2012

CARMEN THEULEN: Thank you. I'm Carmen Theulen, T-h-e-u-l-e-n, and I've worked with KVC for about three years and it's all been good. They've helped me with everything. They placed me with my grandparents. And we always have...we always had meetings, because I aged out because I'm 19 now, and they helped me with college. And we had meetings every month and I had counseling every week and I always saw them. There wasn't one that I haven't seen that was my caseworker. And now I also get grants from the state, and I don't have to take out loans, which is nice, because my parents can't help me, and everything has been positive. I don't know what else to say. [LB961]

SENATOR GLOOR: Okay. Any questions? You know what my question is going to be: Do you have homework? We better get you out of here too. [LB961]

CARMEN THEULEN: Yes. (Laughter) [LB961]

SENATOR GLOOR: We better get you out of here too. [LB961]

CARMEN THEULEN: I have a test tomorrow. [LB961]

SENATOR GLOOR: Good. Good luck with your test. [LB961]

CARMEN THEULEN: Thank you. [LB961]

SENATOR GLOOR: Thank you for taking the time to come here. [LB961]

SENATOR LAMBERT: Thank you. [LB961]

SENATOR CAMPBELL: Thank you. [LB961]

PEG HARRIOTT: (Exhibit 25) Hi. I'm Peg Harriott. I'm the CEO and president of Child Saving Institute in Omaha. I advanced my testimony early because I was afraid I wasn't going to get here in time. Boy, the joke is on me. (Laughter) That wasn't a problem. [LB961]

SENATOR GLOOR: No, the joke is on us. [LB961]

SENATOR CAMPBELL: Yeah, the joke is on us. [LB961]

PEG HARRIOTT: Yeah, there you go. There you go. I will be brief. I will talk in bullet points because much of what I have to say has been said, but I do need to state that Child Saving Institute provides a number of child welfare services. We are a subcontractor of both KVC and Nebraska Families Collaborative in the Omaha area.

Health and Human Services Committee January 26, 2012

CSI is one of the founding members of NFC. And the other piece that I want to add is that CSI was a lead agency for the safety and in-home services contract. That was a contract where we did service coordination only, without case management, and so I speak a little bit from that point of view as well. When you're considering LB961 and making decisions about that, I want you to remember that DHHS currently has decision-making power over the case plan. They can change that at any time. That's still there. Returning to a system that did not produce the needed outcome for kids will not result in better outcomes. Legislative action has not historically reduced DHH caseloads. There's been many, many attempts to try to decrease the caseloads. We all agree that that's critical here. I'd suggest that the quickest way to have an impact on caseload size is to have DHHS hold KVC and NFC accountable. My experience is, in the Omaha area, that KVC and NFC are meeting those caseload requirements at a much lower level than our DHHS was able to do. Real change for kids and families, and to get to the outcomes we need, happens in the case management area, not in the service coordination area. CSI, when we were the service coordination piece, that was a great service to state workers, but there really was no good outcome focus and work. Change was really not happening there. It was just the same. It was just a little bit easier on the caseworkers that somebody else would find the services for them. I feel, as many have, it's too early to give up. The systems are just starting to get secured, produce better outcomes. And on an anecdotal note, which we've talked about, CSI is experiencing...I've sat back and thought about what is it that we really are seeing different. When I watch our shelter, family team meetings are happening much more regularly than they ever did under the old system; and when we ask to have them happen on a weekly basis, if it needs to, it happens from both partners. We are starting to see, through the triage center work we do and with the in-home services we do, more kinship care, kids going to families that they know, not stranger care. That's excellent for kids. And there's some fun, exciting programming that's starting to be talked about that is not in your separate kind of service categories that DHHS always ran by. It's now starting to be creative. And actually in Omaha, KVC, NFC, and the providers are all at the table talking about great, wonderful, new things, one of them being kinship care support, same level of support going to foster families going to kinship care. [LB961]

SENATOR GLOOR: Senator Howard. [LB961]

SENATOR HOWARD: Thank you, Senator Gloor. It's good to see you, Peg. [LB961]

PEG HARRIOTT: Good to see you. [LB961]

SENATOR HOWARD: Thanks for coming down here and spending most of your day with us. [LB961]

PEG HARRIOTT: Right. [LB961]

SENATOR HOWARD: I just have a quick question for you. I have heard over and over and over and over again that foster children, and we both know that many times they come in with the clothes on their back,... [LB961]

PEG HARRIOTT: Uh-huh. [LB961]

SENATOR HOWARD: ...when they're with CSI, placed in the shelter or placed in a program, foster home, are not getting clothing orders. Now I'm not talking just the sheet authorizing you go and purchase this, because we know that was the state system for doing that. What are you doing in terms of the basic clothing need for foster families? [LB961]

PEG HARRIOTT: We take that on as our responsibility. We make sure that that happens. If we can't get anything from KVC or NFC, but that's really not been a big issue, then we figure out how to provide it ourselves. We have a great many donors that help with gift cards, in-kind donations. [LB961]

SENATOR HOWARD: Well, I would really appreciate it if maybe there could be more focus on that, that's what I'm going to say, because I've heard many, many times that children need a pair of shoes and they're going without them for months. And you and I know that's not what we want to have happen for children. [LB961]

PEG HARRIOTT: Uh-huh. Uh-huh. [LB961]

SENATOR HOWARD: We're concerned about their welfare and that includes having the basics. [LB961]

PEG HARRIOTT: Absolutely. [LB961]

SENATOR HOWARD: So if you could make that a consideration, I certainly would appreciate it. [LB961]

PEG HARRIOTT: Okay. [LB961]

SENATOR HOWARD: Thank you. [LB961]

PEG HARRIOTT: Uh-huh. [LB961]

SENATOR GLOOR: Any other questions? Thank you, Ms. Harriott. [LB961]

PEG HARRIOTT: Great. [LB961]

SENATOR GLOOR: We're going to have one more testifier and then we'll take a short

break; if you want to judge yourself--a short break. [LB961]

JAMES MAJOREK: My name is James Majorek, J-a-m-e-s M-a-i-o-r-e-k, and I thank you for giving me the opportunity to speak. I became ... or my wife and I became foster parents about four years ago, when we were trained through Lutheran Family Services; and for about the first 18 months we never got a call. We got to start feeling, maybe, all right, there's something about us, we just aren't meant to be foster parents, even when we made repeat calls saying, okay, do you have a placement for us? We called both Lutheran Family Services, where we trained, as well as a couple state contacts they gave us. Nothing every happened, so we thought, okay; we just about gave up. Well, then the time for our agency came on and we joined KVC, and probably within that first week we had ten calls. So they were pretty aggressive to this. In their defense, I have to say that we've always had team meetings, we've always had contact with caseworkers for the children, with our service coordinator. The visits have been regular. And the training assistance they've provided that works around our schedules, not just within daytime schedules, has been phenomenal. I know that's different than a lot of stories. We've had 17 kids...and we deal with teens, which explains my extra gray hair. Got three teen girls right now, 13, 14, and 15, that are all talking dating--and we know those struggles. But that being said, trying to arrange therapy sessions, because they're all under therapy, we have a therapist for two of them coming to our house. That wouldn't have happened without KVC stepping in. One we take down to Bellevue. It's out of our love for kids that we take time out of our lives, our work schedules, to try to see a system grow and build. And I just fear that we're going to return back to where nobody calls me. And that's all I really have to say. [LB961]

SENATOR GLOOR: Thank you. Questions? Seeing none, thank you. And hang in there with those girls. Someday they'll become your best friends, if you're lucky. We will break until 6:30. [LB961]

BREAK

SENATOR GLOOR: (Recorder malfunction)...LB957 and LB874. We are going to go to a three-minute light system; and so if you have comments, this gives you a little time to winnow those down a bit, if necessary, so that you can fit into three minutes rather than the five minutes that we would normally do. We have to do that to keep things moving and because energy levels do drop. And in lieu of energy levels, we've decided to keep meeting rather than take a dinner break, which is what we sometimes do; so we apologize for eating in front of you. But this is dinner for us tonight, and Senator Howard has some extra ones that I'm sure she'd be willing to sell to you if the price is right. (Laughter) [LB961]

SENATOR HOWARD: I serve. Yes, yes. (Laughter) Loaves and fishes, right? [LB961]

SENATOR CAMPBELL: Only 9 million, really. [LB961]

SENATOR GLOOR: We'll continue. We'll continue with those in opposition to LB961. [LB961]

ANGI HELLER: (Exhibit 26) Hi. Good evening. Thank you for your time tonight. I'd like to start off by saying a lot of my experiences that I'm going to talk about... [LB961]

SENATOR GLOOR: Can I ask you to start off... [LB961]

ANGI HELLER: Oh gosh, yes, you can. My name is Angi Heller, A-n-g-i H-e-I-I-e-r, and I'm currently the training supervisor for Nebraska Families Collaborative and have been for the last two and a half years. Prior to that, I was a supervisor for the integrated care coordination unit, the ICCU, which basically offered privatized case management as well. I have a lot of observations and experiences. And what I'd like to say first is that I have the utmost respect for the foster parents, DHHS, and others. I do believe that this is a systems issue, not an individual worker issue. Some things regarding the bill that were important to me was regarding the training and the experience. I agree 100 percent that training and experience are necessary for good case management. What I can tell you is that with our contract, our case managers receive the exact same training as the DHHS case managers. We abide by the same learning plan, the learning objectives. The additional piece to that though is that we provide additional training within our own agencies. On average, our staff at NFC receive about 50 hours of ongoing...of preservice training prior to case management along with our DHHS training. We are required to have 24 hours of ongoing training every year. Every year it's been well above that. For 2011, our ongoing case managers, the average number of hours was 64.3 hours. For our supervisors it was over 96 hours. So we are continuing to educate our staff. I am very fortunate because in my role I have the opportunity to meet with directors within our agency on a consistent basis, meet with DHHS and CCFL regarding training. I'm able to identify, through everyone's feedback, of what implementation issues there are, different things that might need to be done as far as training, and we take a hold of it and we run with it. So it's nice that we can actually find an issue and go, wow, let's address this today. I have a lot of interactions with the supervisors as well, and that's very nice; but at least once a week I'm having some type of a training or implementation work with them. As far as for experience, the director of operations from NFC was employed by DHHS in Children and Family Services for 13 years prior to coming to NFC. She has her master's. She was an administrator when she left DHHS. Our assistant director of operations also was an employee of DHHS as a supervisor and also has her master's. Over half of our supervisors were employed either through DHHS or the ICCU prior to the reform and have several years' experience. Over 80 percent of our supervisors have their master's or are in the process of achieving their master's. Regarding oversight, in the bill on page 3, lines 20 through 25, and page 4, lines 1 and 2, there is concern about how difficult it is to have contract

Health and Human Services Committee January 26, 2012

oversight. I would contest that it's easier to have oversight of two lead agencies as opposed to the hundreds of contracts that there were before. When I was a supervisor, I would come across violations with contracts all the time, and contact resource development with HHS, and say, this is not good for kids, this is a violation. And each time I was told, well, you can let them know it's a violation of the contract, but everybody is violating it so we're not doing...we can't really do anything about it. At our agency, I have also had the opportunity to see when there's violations. I'm able to follow through, and I know that they've contacted that agency or that foster parent and immediately addressed it. I'm able to go back and find out what happened, which I think is important for training, that I know some of those things that are going on. And then regarding caseload size: To me or some of the others, I am concerned that there is a plan to allow caseload size to not be within the child welfare standards immediately, if this bill were to pass. NFC has been able to maintain a 1:14 case ratio since November 2, 2009. The only variance with that is starting of October 2011 when we assumed an additional one-third of families from HHS. As we started to get all of the new families in, that did change. We are down to 1:16 right now, and I believe very guickly we'll get back to that 1:14, if not lower. So that is concerning for me. [LB961]

SENATOR GLOOR: And I need you to wrap up really quickly. [LB961]

ANGI HELLER: Yeah. I think the one other thing I would like you to consider is hiring practices. If this did go back to the department, the current hiring practices doesn't allow necessarily for those outsiders who might have the expertise and experiences to even receive an interview. [LB961]

SENATOR GLOOR: Okay. Thank you. [LB961]

ANGI HELLER: Thank you. [LB961]

SENATOR GLOOR: Questions? [LB961]

ANGI HELLER: Thank you so much. [LB961]

SENATOR GLOOR: Thank you very much. Next opponent. [LB961]

MARK BARTELS: Hi. I am Mark Bartels, B-a-r-t-e-I-s. We are longtime residents of Senator Campbell's district, and my wife and I are in our sixth year of foster care. We just do teenage girls and we generally have four to six in our home. Prior to the reform we were a traditional foster home. We were not affiliated with any agency so...and since reform we've worked with KVC, so we have a bird's-eye perspective of both sides of this topic. Case management is an integral factor in the success of a foster home. It is vitally important that a case manager be able to respond to their foster parents, and that they be able to do that and be motivated to do quality work. Prior to the reform, case

Health and Human Services Committee January 26, 2012

managers in general were overworked and tired, often had a not-my-iob attitude, and were difficult or impossible to contact. There were a few who stood out, and I can remember to this day who were outstanding; but they were exceptions to the norm. Since KVC has had case management, the case managers in general are available and prompt to reply. They smile. We've had multiple...when we have multiple time commitments, it's not uncommon for one to take a kid to a therapy appointment. That never happened prior to reform. And with KVC there are also a few exceptions to the norm but for different reasons. I believe that this is a function of the workplace environment. It's the difference between the government and free enterprise. A government entity has immortality. A private entity has to produce a guality widget at a reasonable value or it will perish. So there is that incentive in the private workplace that you take your seat and you grab an oar and you row to succeed. Government is good at governing, and that's what I would say. I would contend that our core...that your core business is to govern, not to provide childcare services. As a taxpayer, I fully support the state's oversight of these services; but pulling case management away from the agencies would be detrimental to the work flow and the business continuity of foster care. And I conclude. [LB961]

SENATOR GLOOR: Thank you. Questions? Thank you. And thank you for being a foster parent. Next opponent. Good evening. [LB961]

MAGGIE BALLARD: Good evening. My name is Maggie Ballard. My last name is B-a-I-I-a-r-d. I work for Nebraska Families Collaborative. I just started there back in May of 2011, and I actually didn't intend to come here today. I spent a few minutes just watching what was on TV about the people speaking in support of LB961, and I felt compelled to come here and share my experience. I'm extremely nervous. I've been hearing lots of things, and I have so many responses to them; but I think the most important thing I want to get across that I think other people have also said is that you can change the ... you can change the people, you can change the professionals; but if you don't change the process, improvements are not going to be made. And I feel that some of the biggest obstacles that I have been facing just over the past, you know, four months of having case management, has been kind of the backlash against NFC for not being HHS. And I just ask that you all keep in mind the fact that it really seems like the families and the children are having to pay for that. You know, I work as hard as I can. Fortunately, I'm single; I don't have a family. But that allows me to work between 65 and 75 hours a week. And I have a lot of expectations, including, you know, things that service coordinators, case managers, foster care specialists, visitation workers, you know, all those things I'm kind of expected to do. And I think that if the state were to, you know, if they do end up putting the case management back to state workers or back to the state, to just keep in mind that NFC has been held to such a higher standard and things, you know, still aren't getting done 100 percent, despite all of the hard work. And I think that, you know, the more training that we have, the more that we're held to that standard that NFC has, the better things are going. From what I've seen, a lot of the

Health and Human Services Committee January 26, 2012

barriers have taken place in the courtrooms. I've just seen a lot of people talk about the progress of the cases be talked about as rewards. If there's no safety concerns for a parent to have unsupervised visitation with their kids or to have the kids reunified, well, that parent might not get to have that unsupervised visitation. They might not get to have the kids reunified because the judges are upset or the attorneys are upset that one out of ten things wasn't done. I have seen a lot of things happen where they turn to the NFC or the KVC worker and say, this should have been done and it wasn't. It's not just punishing the parent. It's not just punishing NFC. It really takes it out on the kiddos, and that's where we're so concerned for. That's why I signed up for this job. That's why I work as hard as I do, is because...sorry. I'm so nervous and so passionate about this issue. But I just ask that you keep in mind what's really best for all the kids. I see 34 of them, and I try and do everything that I can for each of them. And I, unfortunately, am that worker sometimes that people call day after day and can't get a hold of me because there's so many demands. And so I just ask you to keep in mind that with all of the things that NFC has been asking their workers to do, you know, when it was done with the state it wasn't anything better. I mean I've had families that I got transferred from the state and they said, what's a family team meeting? And I've met with them, and I was finally able to get this 15-year-old girl to spend time with her parents she hadn't seen in three or four months because I finally stepped in the picture and said, we all need to be on the same page, what's going on here. Well, the worker before that had 30 to 40 cases so that wasn't getting done. I guess I'll just answer any guestions you might have. [LB961]

SENATOR GLOOR: Are there any questions? I want to make sure I understand, you were watching this on TV and then decided to come in and provide testimony? Is that what I heard you say? [LB961]

MAGGIE BALLARD: Yeah, it was on just as we were, you know, doing all the office stuff, kind of wanting to pay attention, obviously, to what was going on outside of the office. [LB961]

SENATOR GLOOR: You did very nicely extemporaneously, so thank you for coming in. [LB961]

SENATOR LAMBERT: Very good. [LB961]

SENATOR GLOOR: Next opponent. Good evening. [LB961]

MELISSA PINKMAN: Good evening. My name is Melissa Pinkman, M-e-I-i-s-s-a P-i-n-k-m-a-n. I'm from Greenwood, Nebraska. I'm a foster parent. I also work full-time in Lincoln. And the reason that I oppose LB961, I am a KVC foster parent. Prior to that, I have been with CEDARS and I have been with the state. I started as a foster parent three years ago. My very first case, let me just say, was not...it was a five-day case, but

Health and Human Services Committee January 26, 2012

I could not get a hold of a caseworker. The kids came with the clothes on their back. and I went out and spent a whole lot of money over a weekend to make sure that they were taken care of with proper food and whatever; and then five days into it. got the phone call from the caseworker, after she had gone to court, and they were going to live with their dad, because they couldn't find Dad. And in my opinion, Dad should have been the first person they found, not a foster placement. That being said, we had two more cases with the state, but then those moved into privatization because of the time frame. My first case that moved into privatization started out with the state. She became a high-profile case. The Governor and everybody in higher up DHHS knows who she is, know who I am, knows who my husband is; and, I mean, I can say the name now two and a half years later and they still know exactly who she is. Dealing with DHHS workers, there were lies going on, and I have not ever dealt with that with KVC. Working with KVC now, I am on a foster parent advisory board, which is something that nobody else has. I think it's a very wonderful thing to have, because the staff at KVC get to hear the concerns from the foster parents, and they address them. No, their system is not perfect, but they are working on a daily basis to improve it. I have always had team meetings. I always have contact with my FPSs and my FCS. They are in my home monthly if not more, if need be. Like tonight my FPS for one of my cases is there for a second time due to concerns with my 16-year-old foster daughter. I don't have any issues or concerns at this time, and I have two cases in my home that are teenagers, and before that we were doing brand new babies--so totally stepped into a new arena. I think that's everything. [LB961]

SENATOR GLOOR: Thank you. [LB961]

MELISSA PINKMAN: You're welcome. [LB961]

SENATOR GLOOR: Questions? And thank you for the little extra things that you did for our kids. Thank you. [LB961]

MELISSA PINKMAN: You're welcome. Oh, I did have one other thing I wanted to say concerning vouchers and clothing. In Lincoln there is something called the Foster Care Closet. KVC supports that. Our kids get 14 outfits and 2 shoes a year, so we are getting clothing for our children. They are not going without. And they are trying to move that into Omaha also. So our kids are getting what they need. [LB961]

SENATOR GLOOR: Thank you. [LB961]

MELISSA PINKMAN: You're welcome. [LB961]

SENATOR LAMBERT: Thank you. [LB961]

SENATOR GLOOR: Other opponents. [LB961]

Health and Human Services Committee January 26, 2012

JASON DANNER: Good evening, Senators. I'm Jason Danner, J-a-s-o-n D-a-n-n-e-r. I'm a citizen of Lincoln, lifelong Nebraskan, and I do work for KVC right now. We're a nonprofit agency, as you know. Ninety-nine point nine percent of us that work at KVC Nebraska are from Nebraska. Most of us are lifelong Nebraskans. We've got areas to work on, we acknowledge that. There's no doubt about it. I previously worked for HHS from 2001 until 2008. Many of these same issues and problems were prevalent at that time. It was like somebody hit the rewind button. The worker hasn't called me back. That has happened. Senator Howard said it earlier today, this afternoon, the system has been underfunded for decades. It's true. HHS collaborated with our agency and with NFC and other lead agencies to try to make things better, and we are making things better. We've got a ways to go. We're working hard. We're dedicated. I've got a couple families to check on tonight on the way home. I respect the work that you as legislators do. You've got tough schedules and tough jobs, and it's not easy being a lawmaker. Certainly you don't get compensated, but that's another topic. You don't get adequately compensated. We all know that. [LB961]

SENATOR GLOOR: Wrong committee. [LB961]

SENATOR CAMPBELL: Yeah. [LB961]

JASON DANNER: But it's not easy being...it's not easy working in this line of work, and you guys know that. Senator Howard certainly knows that with her history of HHS. In recent weeks, I got chased by a parent for advocating and insisting that the family get milk in the home. I did a random drop-in and the man wasn't too happy with me. The kids were still in the home. We were working diligently to help the kids stay in the home; and we were monitoring them, and we are monitoring them very closely, this family. Well, the dad decided to chase me down the street and try to beat the you know what out of me, and cuss me up and down a flagpole, and tell me that he was going to tell, you know, anybody that would listen how terrible I was-and I was advocating for two little girls to get some milk in their home. Another time I helped a guy who was having regular visits with his daughter who was placed out of Lincoln, and I helped him clean his bathroom so that apartment would be clean while his visits took place. And he gave me 100,000 excuses and told me I was the biggest idiot in the world and cussed at me and told me this is stupid. And I said this is what we need to do, this is what we need to do, this is what we're going to do; we got to have these visits; your daughter is counting on these visits. That's what we did, we cleaned the bathroom. And I've never seen a toilet that bad in my life, but I proudly represented my agency and cleaned the doggone toilet along with this gentleman because I cared about the families. And that's why those of us that work at KVC are in this field. We don't go in this field to become millionaires. We go in it because we want to help families. We're not perfect. We can do better. We are doing better. We will do better. And we're thankful that the Governor and HHS administration in the last few years thought highly of KVC and our footprint in other

Health and Human Services Committee January 26, 2012

states and the success rate, and it's been talked about. There has been areas of significant improvement in the key outcome areas. Those have been talked about today. Four...at least four out of the six areas have shown significant improvement since we got involved. And I'm a former state employee, and I know that many of us that work at KVC are; Ms. Murphy had testified earlier. We have some other folks coming up that are going to testify. It was never perfect at the state, but we are trying to do our best. And I'd love you to come see what we do. Come with me on a random drop-in. Come with me on a supervised visit. I've gotten the great privilege to see the lawmakers in action today, and I will leave tonight with a newfound respect. I mean, you guys can't be in two places at once. Sometimes you have to go and address another hearing. Sometimes you have to catch five minutes in your office on the inner television. Sometimes you got other calls and texts coming in. You know, it's not easy being a lawmaker last time I checked. There's a lot on your plate. Look at all the paper and testimony, all the stuff that's been handed in to you. You got to read all kinds of stuff. You guys work very hard on this committee, and we respect the work you've done. I hope that you understand how hard we're working at KVC. And I thank you for your time. [LB961]

SENATOR GLOOR: Thank you. And thank you for your commitment to your clients. [LB961]

JASON DANNER: Thank you, Senator. [LB961]

SENATOR GLOOR: Questions? Thank you, Mr. Danner. [LB961]

JASON DANNER: Thank you, Senator Gloor. Thank you, everyone. [LB961]

SENATOR LAMBERT: Thank you. [LB961]

SENATOR GLOOR: Next opponent. [LB961]

TREVOR BAER: Hello. [LB961]

SENATOR GLOOR: Hello. [LB961]

TREVOR BAER: (Exhibit 27) Thank you, Chairwoman Campbell and members of the committee. My name is Trevor Baer, T-r-e-v-o-r B-a-e-r, and I'm here to testify in opposition to LB961. The previous 12 years of my work experience have been in various levels of agencies revolving around working with children in need. I began working as a protection and safety worker with the Department of Health and Human Services. I started off working in initial assessment, investigating allegations of maltreatment. Did that for a year before I transitioned to working with juvenile offenders, juvenile delinquents, and status offenders. I feel that I have a unique perspective on this reform, being from both the Department of Health and Human Services and now at

Health and Human Services Committee January 26, 2012

KVC. I was with the state, as I stated, prior to the transition to service coordination from the lead agencies, and have witnessed all the changes that have been happening over the past two and a half years in Lincoln and surrounding communities. In my time at KVC, I can assure this committee that KVC, specifically the agency that I'm currently employed with, is absolutely committed to these children and families that we work with. Besides...oh, excuse me. When I was working at the Department of Health and Human Services as a case manager, I had an extraordinarily high caseload and lacked assessment tools that I needed to do my job effectively, I felt. When KVC came into the picture, I examined all the lead agencies to possibly transition to. After doing that, I felt KVC was the only one that met the requirements that I would have for my employer. I was introduced to multiple evidence-based models that we use on a daily and consistent basis to assess the needs of these children and families that we work with. These evidence-based models are crucial for meeting the goals of not only this committee and the goals of KVC Behavioral HealthCare but also for the families that we work with to be self-sufficient and safe. These positive changes and new assessment tools and evidence-based practices were brought here by KVC. This is the reason that I transferred to KVC from a stable position at the state of Nebraska. If I wanted to make large-scale changes that I felt truly made long-term and consistent changes for these families, I felt I needed to make a change. KVC is a private entity and simply has the flexibility that the Department of Health and Human Services does not. Nebraska's goal was to increase the number of children being served in the home, and KVC has done this. It's only going to get better as we further establish ourselves as a powerful and effective force in the lives of children and families. I'm now going to break briefly from my written testimony to address some of the things that I've been hearing today, because I do have a unique perspective. I supervise seven permanency specialists for KVC, and I'm just going to read through some of this on my list here. The case plan: every single child on my team has a case plan. It is the driving force of the case. It is a requirement. Every single child and family knows what the case plan is. It's submitted on every single court report that we provide, and it's crucial to the case progressing, moving forward. All of my staff return phone calls within 24 hours. It is my expectation that that takes place. Discharge planning was something else that I've heard about. My staff start discharge planning from day one when a child is placed in an out-of-home placement, and that is expected. Family team meetings I've also heard discussed in here this afternoon. My staff invite all parties to the table, including attorneys. Frequently, attorneys don't come; but therapists and every single other person involved in this case or has a stake in that case or that child is present. Lastly the last thing I'm going to say is about caseload size. My staff have less...16 or less cases, all seven of them; and I can say that for a fact. I'll now open up to questions if there are any. [LB961]

SENATOR GLOOR: Are there any questions? Seeing none, thank you, Mr. Baer. [LB961]

TREVOR BAER: Thank you. [LB961]

SENATOR GLOOR: Good evening. [LB961]

LINDA GAMBLE: Good evening. My name is Linda Gamble, L-i-n-d-a G-a-m-b-l-e. Listened to a lot today. I'm not real sure what everything is that I want to cover, but I do want to say a few things, just to give you a little bit of history about myself. I was a single parent, raised two daughters, became a state worker with the Department of Health and Human Services in 1997. Worked with the department until 2009, where then I went to KVC. During my time with the department, I did case management. I also spent a year doing initial assessment. I spent five years with ICCU. I'm going to, first of all, start out by talking about the department from a personal perspective. While I was a caseworker at the state, my daughter, then 17 years old, became a ward of the state of Nebraska. So as a parent, I was able to begin to start experiencing some of the things that the parents that I worked with oftentimes would experience as well. As a worker, I knew that our caseloads were high. She was actually managed out of Lancaster County; and the caseworker that I worked with there, she was good but she also had a very high caseload. There were often times she would ask me to provide services for my daughter, transportation, those kind of things, which I was more than willing to do because that was my responsibility as a parent; but I also understood why she was asking that. She did not necessarily have the means or the ability at that point to be able to provide some of those things to my daughter. My daughter was placed at Boys Town and graduated there and was very successful. So I appreciate that fact of it. One of the things that I wanted to also speak about is that as a case manager with the department, when I left there I had 38 cases. I'm not real sure how many kids that was, but I had 38 cases as a caseload. Oftentimes I had anywhere between 25 and 35 cases. Here, with KVC, my highest caseload was, I believe, 19. I'm right at 18 right now. I am a permanency worker with the adoption unit, so our caseloads may be a little bit higher and...but we work towards...we don't have to necessarily work with the parents all the time because their rights have either been terminated or relinquished on, so we're working towards providing that permanency with the children. One of the things that I learned working with the department was that there was one thing that was consistent and that was change; that I consistently had to learn that things changed. And oftentimes the changes at first seemed to be okay, but then later on it seemed like we were back to the same place that we started. I feel that once I came to KVC, we do have changes that occur and I do see a difference working with KVC. I see it more...they're more personable. They're more intimate. We have a more intimate relationship with each other as workers. I am able, because of those things, to be a better worker. I am able to...I've been able to spend time with my kids, be able to take them out for pop. I've been able to do a variety of different things, whether it's taking them to the store or just taking some time away and speaking with them. I didn't have that opportunity as a worker with HHS. So to me, it seems like it is very much more working towards developing that working relationship, particularly with my cases, with the kids that are in that case. So I know we have a long ways to go. I also feel that

we've only just begun and that change does take time. When I was with the state, we were often told that this is going to take time, and I believe that's the same thing here. I've seen KVC do a lot of powerful things while I've been there, and I hope to see a lot more coming. Thank you. [LB961]

SENATOR GLOOR: Thank you. Are there any questions? Thank you again. [LB961]

LINDA GAMBLE: Thanks. [LB961]

SENATOR GLOOR: Next opponent. Hello. [LB961]

SARAH WITTMANN: (Exhibit 28) Good evening. Thank you so much for taking the time. This is my first committee hearing and, wow, there's been a lot said; and you have really taken the time to invest in looking at all of this. So my name is Sarah Wittmann, that's S-a-r-a-h W-i-t-t-m-a-n-n, and I live in Nebraska and am opposed to LB961. I'm concerned about case management returning to the state of Nebraska. I have chosen to take vacation to be here with all of you today. I have worked hard in child welfare services the majority of the last 12 years in Nebraska. I've seen the state of Nebraska struggle in meeting the federal government desired outcomes while serving children and families. In order to help the states achieve positive outcomes, the U.S. Department of Health and Human Services monitors state child welfare services through Child and Family Services Reviews. Nebraska only met two out of six CFSR outcomes in 2002 and only met one out of six outcomes in 2008, which led in part to the public-private partnership reform in 2009. The Department of Health and Human Services invited KVC Health Systems to come to Nebraska because they have been successful in other states' child welfare services. KVC Health Systems created KVC Behavioral HealthCare Nebraska, a separate 501(c)(3), to be a part of this reform. Just like CASA and the American Cancer Society are national organizations and in Nebraska, KVC Nebraska is primarily made up of Nebraska workers wanting to help Nebraska's children and families. I know the reform has had difficult moments. My professional life was impacted when Visinet Inc. went bankrupt. What a blessing it was that KVC Nebraska chose to hire many employees that had been serving foster and biological families at Visinet. In order to keep some consistency for Nebraska's families being served through child welfare services, KVC acted guickly and employed myself and others in less than two business days. A private agency has the flexibility to act quickly. I personally served the same foster families when I transitioned to KVC. I'm proud to work at KVC Nebraska because I have seen an agency that truly strives to help through the difficulties of the reform. When CEDARS and DHHS needed to let go of employees, KVC provided jobs for many of them and, when possible, had the employees continue to serve the families that they were servicing at their previous agencies. I know many employees at KVC that truly desire and want to enrich and enhance the lives of the children and families that we serve. In spite of the difficulties the state of Nebraska has gone through during this reform, KVC Nebraska has seen improvement in five out of six CFSR outcomes that the

Health and Human Services Committee January 26, 2012

federal government will be measuring when they review the state of Nebraska. I would like to see case management stay with the lead agencies so KVC Nebraska can continue to partner with DHHS in improving and working to meet all of the CFSR outcomes with the help of everyone, including you guys, in Nebraska coming together to support the public-private partnership. I believe by having case management responsibilities retained with lead agencies this will help streamline the process, improve communications, and reduce the number of different workers serving each family. Smaller caseloads will be valued as case managers will be empowered to expedite provision of services with less confusion. That is what I would like to see happen, and I really thank you for taking the time to listen to what I had to say today. [LB961]

SENATOR GLOOR: Thank you. [LB961]

SARAH WITTMANN: And I also just wanted to say really quick that all the different things that we heard, and I wish some of those people that...who were here before, just all the different things where they were not happy and that type of thing, I just want them to know that even though there may be some people that haven't been able to meet their needs and that type of thing, I really do believe there are a lot of us that really are in this to help children and families, you know. So anyway, we wouldn't want those things to happen, and I can speak for myself on that. So anyway, thank you. [LB961]

SENATOR GLOOR: Thank you. Senator Krist has a question. [LB961]

SENATOR KRIST: Thanks for the shot of adrenaline. (Laughter) [LB961]

SARAH WITTMANN: The shot of adrenaline? Okay. Well, you're welcome. Anyway, this is just who I am but... [LB961]

SENATOR CAMPBELL: That's terrific. [LB961]

SENATOR KRIST: Keep it up. [LB961]

SARAH WITTMANN: Well, thanks. I'm pretty passionate about it and I would love to work with anybody about any of these issues. So anyway... [LB961]

SENATOR LAMBERT: I was starting to get tired. I feel (inaudible). (Laughter) [LB961]

SARAH WITTMANN: You were getting tired? Well, let's work together. Yea. And help children and families. [LB961]

SENATOR CAMPBELL: We need Sarah every hour on the hour. [LB961]

SARAH WITTMANN: I will come. I will. [LB961]

SENATOR GLOOR: I think if you ever get tired of doing what you're doing, you can become a motivational speaker. Thank you very much. [LB961]

SARAH WITTMANN: Oh, well, thank you. Thank you very much. [LB961]

SENATOR LAMBERT: Thank you, Sarah. [LB961]

SARAH WITTMANN: Thanks. [LB961]

SENATOR GLOOR: Next speaker in opposition. Is there nobody? How many people are left to speak in opposition? Okay. [LB961]

ERIN WILCOX: Hello. I'm Erin, E-r-i-n W-i-I-c-o-x, Wilcox, and I actually came also not planning on speaking to you. I am new to KVC and also new to the child welfare system, actually with the longtime desire to be involved in it. Went to school for education, wanting to help the kids that I saw that lived a life like I did. Just a little background information on where I come from. My brothers and my sister were removed from my mother's home. I had the fortunate, I guess you would say, situation that I had a father who took me into his house. My brothers and my sister were not so fortunate and had to go through, and I've watched them go through their lives; and I've dealt with that situation myself personally. And it's not in Nebraska, it was in another state, so fortunately anything I say is not regarding here as far as that goes. But I will say it affected me. And I will say that watching them go through that process and watching the battles back and forth, the little things, the frustrations, definitely made me take a step back and look at what I can do with my life to help, and KVC has given me that opportunity. I am actually a foster parent recruiter. I recruit foster parents and I do outreach. That is my position. And I chose that position and I wanted that position because foster parents are the gold that keep this business running. They are the people who keep Nebraska and their children alive, and I am so passionate to be able to talk to everyone who calls me and says, I want to do this. And I will say the other way that I can help and the other opportunity that KVC has given me is I can create myself. And I am in collaboration currently coming up with strategies for education for foster parents, being able to create strategies that allow them to have support groups when they need, allow them to have points of contact that aren't necessarily a caseworker, but that are points of contact that they can have as a support group. And also some other things that we've been moving and currently working with actually the state, just spoke to him today, is we are currently working on a multicultural focus as well, which is something I don't think that has been brought up is the focus on how do we reach those people that we haven't been able to reach very successfully in Nebraska. Granted, it is a hard demographic to reach, but it is one that needs to be reached nonetheless and the effort should be tireless to reach them, and it is. As you move forward with this bill,

Health and Human Services Committee January 26, 2012

whether you pass it or not, whether it's in effect or not, take into consideration everything that needs to go into place to be successful for every single family that's in the system: multicultural, Spanish speaking, Chinese speaking. Those are the things that I think instead of saying one person should have it and one shouldn't, it's what should we do collaboratively to work together. And that's what I'm sitting down, actually on Tuesday, to talk about: what resources does the state have that we can utilize that can also help us in our efforts to meet our expectations that we have. And so to take that away from us would be causing a really significant loss to those people that we could potentially serve, and by just saying that there's only one way to do it is not the way to go. And so before you pass, I also want you to take into consideration the goal is to get a child back to being normal. A child placed in foster care and a child that goes through that will never be normal because there is no such thing as normal. And KVC also has a very unique program called aftercare that we've been able to establish that takes those children further than the process of the case being closed and the state saying good-bye. We actually follow up with them and allow them and give them opportunities to follow up and receive care, even after the state has said: We're done with you. And so I really urge you to take that into consideration as well, the unique things that we're able to do, that the state, at this time, is not. And so as you move forward, just consider: What do you have in place right now in this present moment...if this were to go through, what do you have in place to make this transition successful? And also, what can you do differently, what can the state do differently that hasn't been done already? [LB961]

SENATOR GLOOR: Thank you. [LB961]

ERIN WILCOX: Uh-huh. [LB961]

SENATOR GLOOR: Are there any questions? Thank you, Ms. Wilcox. Good evening, Senator Gay. [LB961]

TIM GAY: Good evening, Senator Gloor, members of the committee. I wasn't going to testify, but for the record my name is Tim Gay, G-a-y. I'm a registered lobbyist for Husch Blackwell and represent KVC. I didn't prepare any remarks and I wasn't going to speak, and then I heard today as we came here...and, first of all, I want to thank you all for giving the opposition as much time as you gave the proponents of this bill. Commendable that you're here tonight. I know those chairs are a little more comfortable than out there, but it's still a challenge. But thank you very much for doing that. I looked at the bill, and I wanted to talk about the bill a little bit. Before I do, though, when I was listening to the proponents and the opponents and everybody in this room, there's not one person in this room, or on your committee, for that matter, who doesn't want to do the right thing here and do what's right for the kids. We have different ideas maybe what that might be; we might get to a different point. I don't know what will end up with this. But as I saw everybody give their passionate speeches on both sides, and they're

Health and Human Services Committee January 26, 2012

worried what to tell you: you know, will this come out right: what should I say? It's very intimidating, they all did a good job. But I looked at the bill; and I have a unique perspective, obviously. It's a little awkward for me, I'll be real honest, to be here in front of you when I was on that side as well. And we made mistakes when I was there, and many of you who have watched this. Senator Howard has brought up concerns over the years and is to be commended. She was right in many ways. You try to do the best job you can, and sometimes those things don't always go perfect. The implementation of this has not been good, to say the least. I know a lot of this is focused on the implementation and, you know, Senator Cook is not here, but I truly do believe we're at a tipping point here of what you do. And like I say, it's a tough decision, I know. I looked at the bill and there's several things that when I look at it that I have concerns with. In the bill, Section 3 on case management, I do not believe that...no one is perfect, as Senator Lambert talked about. There is no perfect. It's a tough job. And some of the employees who told you that, and Senator Howard, you know that, it's a very tough job and no one can do it perfectly. And there are going to be cases where people are very disappointed. There's work to be done. That's probably the understatement of the day. But there's a lot of work to be done, and I think they're up to the challenge. I work very, very closely with NFC as well, even though I represent KVC, and the amount of effort that both agencies are putting into this is unbelievable. I mean for a whole year I've been watching and seeing what's happened and what could improve. I don't want to criticize the bill, but there are certain things in the bill that I kind of wonder about. In the bill you state, to get to a certain number of the Child Welfare League standards--they're already doing that. And to say...and then on the fiscal note it says \$20 million to achieve that. Well, you know what? On some of these funding issues over the year, and I know that the concerns of everyone, I've heard everyone talk about more funding, more funding; but I don't see any funding. So we all criticize that. But that's like asking to build the interstate from Omaha to Lincoln, and then say, oh, by the way, can you extend it to Grand Island--and we're going to give you the money from Omaha to Lincoln; and not only that, we may tell you which tools you can use and we might not let you do what you usually do when you build that road other places. The nail analogy was something that, you know, I understand what Deputy Attorney Henderson was saying on the nail, but to compare a nail to child welfare is like comparing a nail company to somebody making an iPhone. It's just so much more complex than putting a nail. I mean I was upset with that. But anyway, when I look at the bill, there's certain things. I talked about on the fiscal note, I think we're not comparing apples to apples here. I wrote about a four-page summary of many of this, and I won't go into the four pages; and again, I don't want to take up your time. But some of the things...accountability. I know you're all looking at accountability, and absolutely I hope you will look at accountability. And the agencies, I think they wouldn't mind that at all. They're fully accountable. What I would like to say, I know my time is running out, is I think from my perspective, again I think it's a unique perspective, there's been a complete lack of communication between executive, DHHS, the Legislature, whatever. I think you all want to get to the same conclusion and do what's right for kids; however, there seems to be this communication gap. And I know

where you're coming from on that, certainly. I was, like I said, that communication gap existed before, before some of you were even on the committee. It still exists, and somehow we all need to get together and work on that. Because if you don't get that solved, everyone else out...all these people out here are going to suffer because of that, because everyone wants to do the right thing. So my time is up. Thank you. [LB961]

SENATOR GLOOR: Are there questions? Seeing none, thank you for not putting me in a position to have to cut you off. (Laughter) And thank you for your service to this body and committee. [LB961]

SENATOR LAMBERT: Yes, thank you. [LB961]

SENATOR GLOOR: Thank you, Senator Gay. [LB961]

SENATOR CAMPBELL: Absolutely. [LB961]

SENATOR GLOOR: Please. [LB961]

KADY GRIFFITH: Hi, everyone. I was not planning on speaking but I wanted to mention something that I've been hearing all day. My name is Kady Griffith, G-r-i-f-f-i-t-h, and I just wanted to come up here and speak on behalf of the KVC staff that could not be here tonight because they're out with hundreds of Nebraska families. I oppose LB961 for many reasons, but just wanted to bring to your attention...I think everyone's goal here is permanency and stability for the families of Nebraska. And I'm having trouble understanding how uprooting the positive outcomes that we've seen with KVC, to again traumatize not only the families and the children that we work with, but also the staff that have gone through CEDARS, through Visinet, and then the state, and now to KVC. And they've moved again and again to fulfill their dream and mission of serving families of Nebraska. And we advocate for permanency, but we don't provide the means within our own organizations to allow that for our own staff. I know for a fact that KVC is passionate about Nebraska families, and I would strongly recommend a collaboration of efforts between all parties to better serve the children of Nebraska. [LB961]

SENATOR GLOOR: Nicely said. Thank you. Any questions? Thank you. [LB961]

SENATOR LAMBERT: Thank you. [LB961]

SENATOR GLOOR: Are there any more opponents of LB961? Anyone who would like to speak in a neutral capacity? How many people would like to speak in a neutral capacity? Okay, good. If you are in the back of the room, please move to the front of the room. It will save us some time. Good evening. [LB961]

GEORGIE SCURFIELD: (Exhibit 29) Good evening, senators. My name is Georgie

Health and Human Services Committee January 26, 2012

Scurfield. I'm a social worker with more than 30 years of experience working in child welfare. I'm the coordinator of the Sarpy County CASA Program. I currently work with 57 volunteers who are advocates for 73 children who are placed in the child welfare and juvenile justice systems under the jurisdiction of the Sarpy County Separate Juvenile Court. In my role as CASA director, I was appointed in 2006 to the state board of the Nebraska Foster Care Review Board, and currently serve as chair of the board; but as the board has not yet discussed this bill, I am here today speaking in a personal capacity and as the coordinator of the Sarpy County CASA Program. I know that you're running out of time and you've been listening for a long time, so I'm going to briefly summarize what I wanted to say today. I'm testifying neutrally today because, although there is much that I agree with in this bill, the damage that has been done by poorly planned and rapid change over the last two years has impacted everything the CASA volunteers that I work with do to advocate for children, increased the anxiety and frustration of the families, added confusion and complexity to an already complicated system, and has not consistently improved the safety or well-being of the children themselves. I say consistently, because there have been bright moments and successes, and we are grateful for those; but it is the speed and confusion of the changes that has caused the problems. A major task of CASA staff and volunteers is now to keep track of the people who are working with families and the services that are offered to the children. This has also been an issue for the review specialists at the Foster Care Review Board. So I think it's also an issue for the workers, and we've just heard, more eloquently than I, the workers who have had to change jobs, move on, work in different systems. They, too, have suffered from those changes. So I ask you to approach this next round of change with care and caution. If we can learn one thing from the reform experience about what didn't work, it would be about how to appropriately transition cases. Focus should be on training the workers, offering them support, keeping caseloads down to a manageable level, and developing the specialized skills needed to manage adoption, guardianships, and independent-living case plans. I understand that there is much that needs to still be done, and we've heard that all day; but I urge you to have a long-term plan in place before you set a date for the changes that have to happen. Plan before you change; don't change without a plan. Let the people who are on the front lines know that you and the state have a vision about where we're headed. Those of us who are on or close to the front lines, as you've heard from people today, are tired. The families are struggling and the long-term impact of the changes that we've been through on case progression is looming ahead of us and a looming concern. I'm really grateful for the hours that you've all put in, into your research on LR37. I know, and we all do, from sitting here today, how emotional it must have been for you to have been through your hearings across the state and the amount of time that you have dedicated to this. What we need now is a careful, planned, compassionate, collaborative plan for improvement that we can all commit to. So take time to have the vision to make that plan sustainable. If it takes a little longer than September, take longer than September. Take what you need. The children are watching and waiting, as all of us are, and some of them have no one but us to trust.

Today, in my own capacity, I'm testifying to you today; but the Foster Care Review Board has a meeting next week on February 3, where we'll be discussing the legislation, and we will try with whatever we can to get whatever data you need to you, if you still need more. We just believe that we need to take time to have a sustainable plan as we go forward. Thanks. [LB961]

SENATOR GLOOR: Thank you. Questions? Thank you for your commitment to advocacy... [LB961]

GEORGIE SCURFIELD: Thank you. [LB961]

SENATOR GLOOR: ...and to foster care. [LB961]

GEORGIE SCURFIELD: Thank you. [LB961]

SENATOR GLOOR: Good evening. [LB961]

CAROLYN ROOKER: (Exhibit 30) Good evening. Good evening, Senator Campbell and members of the Health and Human Services Committee. My name is Carolyn Rooker, that's...my bling pen just went across the table (laugh). My name is Carolyn Rooker, C-a-r-o-l-y-n, Rooker, R-o-o-k-e-r, executive director of Voices for Children in Nebraska. And I am going to shorten my testimony a little bit today and try to hit just a few of the highlighted areas. You guys have been listening for a very long time. But I do want to say, as I've said to a few of you that I've been able to speak with in your offices, that I really do appreciate the significant amount of time and energy and effort that you've gone through and what you've put into in researching what steps it might take to make the child welfare system better. As you know, Voices for Children was founded 25 years ago in large part due to the frustration and the failures of the child welfare system. This last year, in my first year as executive director of Voices for Children, we had the opportunity, through the LR37 process, to engage in some consultative services with Kathy Bigsby Moore, my predecessor and founding executive director. We were really looking at the historical perspective of child welfare, and how that was nationally and also in our state. And although I'm not new to the nonprofit arena at all, I've spent my last 20 years in the nonprofit arena, I'm trained as a social worker. In fact, my first social work job was at CEDARS Home for Children, and I have very fond memories of that organization and the work that I did there as a social worker fresh out of college. But what that opportunity allowed us as we were working on this child welfare system history was that, you know, we've seen the department restructured over four times; and, in addition, numerous commissions have been established to look at the issues in child welfare. So the opportunity of looking at that from kind of a zoomed-out perspective, it was very fascinating to me. So in crafting our position in LB961, in true fashion, we really looked and asked ourselves a series of questions about how any move or change would impact children and families. Voices for Children in Nebraska

Health and Human Services Committee January 26, 2012

has decided to testify neutrally today, because we believe at the end of the day it really absolutely does not matter who does the work. What we believe matters is that it's properly funded. We start looking at how and why we bring so many kids into out-of-home care, what we can do in a meaningful and thoughtful way to prevent kids from entering the system in the first place, and we believe that these are the hallmarks of true systems reform. You have my detailed written testimony in front of you, so I won't go through all of that; but I do want to just highlight three quick points that we would like to discuss or comment on today. 1) We are extremely supportive of the proposed changes to voluntary case plans. We know that it's a very good thing to serve more children and families without court involvement when possible, but we do need to have clear expectations and a clear plan to ensure they're getting the support that they need. We need to have plans for oversight, accountability, and make improvements in service delivery in voluntary cases, again, no matter who does the work. 2) We have serious concerns about the proposed case management transition because of the possible instability it would cause for kids in the system. Instability has been the hallmark of the child welfare system for years; and essentially, the last two years, it has been even more so, as transitions and things that have happened have happened without thoughtful planning. I mentioned earlier that I was a social worker, and I saw the stressful situations that kids went through on a day-to-day basis in crisis. And if there was one thing that those kids wanted more than anything in the world, it was just one thing that they could count on in their lives, one thing. And with all of this instability, it makes things worse. I have to keep going. I had several examples, but I'm going to keep, I'm almost...so again, at the end of the day, to the child it does not really matter who does the work. What matters to the child is the relationship they're able to make with their caseworker. Privatization was described both as the solution to our child welfare problems and also the problem itself. The truth is, from our perspective, it's neither. When we look at other states, there's been many states who have been able to privatize and have good outcomes; and in the testimony you'll see a brief grid that talks about that. We've seen some states that did not privatize case management and have good results with that too. So really, returning case management alone to the state is not likely to address or solve any of the longstanding issues that we've seen over the past decades with child welfare. And finally, we would like to end on a positive note that we are supportive of reducing caseloads for caseworkers. We believe that getting in line with the national CWLA standards are very, very important. When we were on our tour, we just happened to be on our western tour, and we got to go to so me of the... [LB961]

SENATOR GLOOR: I need to ask you to wrap up please, Carolyn. [LB961]

CAROLYN ROOKER: Yes. I will finish real quickly here. We heard in the western state that there were some caseworkers that had up to 30 caseloads, and we feel that it's very, very important to start looking at immediately investing in the caseworker size and caseload. We think that that would be very, very important, and... [LB961]

SENATOR GLOOR: Thank you, Carolyn. [LB961]

CAROLYN ROOKER: ...at the end of the day, we hope we can all come with an articulated plan for our kids. [LB961]

SENATOR GLOOR: Thank you. [LB961]

CAROLYN ROOKER: Thank you. [LB961]

SENATOR GLOOR: Thank you. Anyone else to provide testimony? Good evening. [LB961]

JUDY DOMINA: (Exhibit 31) Hello. I'm Judy Domina, J-u-d-y D-o-m-i-n-a, and I am testifying neutral for LB961, and I'm testifying as a parent; so I'm taking off my hat as executive director for Nebraska Family Support Network, and this testimony is as a parent. Ten days prior to his 13th birthday, four years and 127 days from his adoption, my son is a state ward for the third time in his short life. Is this due to privatization? No, it's due to the practice of failing to provide the level of treatment needed at the time it is needed. It's due to system failure. This failure did not start with the current welfare reform. My son was made a state ward at four months of age. He was placed in a relative placement, a placement that provided a loving, nurturing home. After 14 months, he was returned to his mother against the recommendations of his grandparents. This 18-month-old toddler left his secure home to live with his unemployed mother in a homeless shelter without transportation. My son came back into the system April 1, 2005, with his 3-year-old half brother, due to extreme physical and sexual abuse at the hands of their stepfather. They were placed in my home a relative placement; I am their grandmother. Requests for in-home services by me, their foster mother, were denied. Multiple caseworkers came and went. My son's younger brother was removed from our foster home in February 2007, starting a string of 21 placements. May 28, 2007, I adopted my son--I adopted my grandson. It's kind of crazy in our family because, you know, my youngest son, biological son, went from being an uncle to a brother, and I went from grandma to being a mom; and you know, it gets a little crazy sometimes. My son had a consistent forever home for five-and-a-half years. With puberty, developmental delays, and increased mental health issues, my son required more care than I could provide for him. Over the last two years, I've advocated for my son. It's been a constant struggle to get authorization for treatment that professionals treating him recommended. He was sent home in August 2011, with me receiving the threats, after calling DHHS, for help to either pick him up and bring him home, or face charges of abandonment. I was promised in-home services that would wrap our family and provide the services needed by the DHHS family permanency specialist. These services were not in place for the first week. At the end of the second week, my son needed to be transported to the hospital by police in hand cuffs from his therapist's office. September 1, 2011, he was admitted to Boys Town residential

Health and Human Services Committee January 26, 2012

treatment. From August 2011 till the time the case was transferred from DHHS case management to NFC, he had three DHHS family permanency specialists. Since the transfer to NFC, he has had the same family permanency specialist. And this worker has attended all treatment meetings, and was at my home in December working on a plan to put services in the home so he could transition home, and planning on him being home for the entire day, Christmas day. Three days prior to Christmas, my son became violent and assaulted a staff member at Boys Town. This violent behavior continued until it was necessary to hospitalize him again. I was advised to make him a state ward to ensure that he would continue to get treatment he needs, since he is not responding to treatment and would probably not get authorized treatment. This child that had a forever home is now another child in the system. He will always have a forever home in my heart, and I will not abandon him. I'll be there for his 13th birthday on Saturday, attend family therapy, call him every night to say good night, take pictures of his cat to him, and advocate for him. NFC is now faced with another state ward, not due to his mother abusing or neglecting him--a state ward that the judge has ordered remain in the hospital until residential treatment is found that will accept him. The additional cost to child welfare is not due to the lead agency. It is due to cost shifting. It is the result of system failure that started for this child when DHHS would not listen to his grandparents years ago, returning him to a mother that was not capable of caring and protecting him; who would not provide in-home services six years ago; a system that has drafted regulations that create barriers to treatment. When looking at privatization, these facts need to be considered. Lead agencies do not determine medical necessity; this is determined by Magellan. And lead agencies do not have authority to appeal Magellan's...Medicaid's decisions. As was the case before lead agencies, DHHS still makes all safety and placement decisions with the approval of the court. In other words, DHHS still decides which families come into the system, still approve all placement decisions, and with the approval of the court, all case closures. [LB961]

SENATOR GLOOR: Thank you. Are there any questions? Thank you for your testimony. [LB961]

C. JO PETERSEN: Good evening. [LB961]

SENATOR GLOOR: Good evening. [LB961]

C. JO PETERSEN: My name is Jo Petersen. I'm a deputy county attorney. I've been a prosecutor for 26 years, and I'm here on behalf of the Nebraska County Attorneys Association. We're here testifying...I'm here testifying neutral, but want to be clear that we support the process of making changes to the child welfare system. Your inclusion of county attorneys and the extensive work that you did to date has been appreciated and very helpful to us. It was also helpful that you recognized within that work that each county attorney has different and distinct challenges within the existing child welfare system. That's why we're coming in neutral, so that we can assure ourselves that we're

Health and Human Services Committee January 26, 2012

addressing the concerns of all of our membership. Now that you have the legislation in place, and because we strongly support what you're trying to do, we have formed a committee of experienced county attorneys in this area of practice to specifically look at each and every bill that you have that addresses this issue and provide what we hope can be useful feedback on those bills. In addition to that committee, Speaker Flood has personally asked the county attorneys to review the bills introduced by this committee; and based on our professional experience with the system, provide the committee and other senators with feedback regarding our individual challenges as well as what we think should be in place to successfully work with families in the system. He has also asked that we specifically go to each individual senator and provide them with information on how the system works. So again, we appreciate and support your work and that these bills will form a foundation for a new child welfare system. We've made a commitment to have this group of county attorneys from across the state be committed to these issues and help you, hopefully, as you move forward with these bills. So while we come here today neutral, it is in support of trying to fix what we believe is a system that needs work and that is broken. Thank you. [LB961]

SENATOR GLOOR: Thank you. Ms. Petersen, you clearly understand the legislative process and know that the clock is ticking. Are you going to be able to convene this group and be able to get feedback to us? [LB961]

C. JO PETERSEN: We actually have the group in place. We're hopeful to meet within the next few days... [LB961]

SENATOR GLOOR: Okay. [LB961]

C. JO PETERSEN: ...by phone if not in person. We've included the two large counties, Douglas and Lancaster, and then rural counties as well. [LB961]

SENATOR GLOOR: I think this will be very helpful, and we're very appreciative of your support that way. [LB961]

C. JO PETERSEN: Thank you. [LB961]

SENATOR GLOOR: Are there any other questions? [LB961]

SENATOR LAMBERT: Thank you. [LB961]

C. JO PETERSEN: Have a good night. [LB961]

SENATOR GLOOR: Anyone else to provide testimony in a neutral capacity? Senator Campbell. [LB961]

SENATOR CAMPBELL: Is this where I quickly jump up? (Laughter). [LB961]

SENATOR GLOOR: Yeah. (Laughter). [LB961]

SENATOR CAMPBELL: (Laughter). I need some of Sarah's enthusiasm, I think. (Laughter). Colleagues, I will not be long. I mean, obviously I could give a long dissertation in terms of what we've taken a look at, but just several comments that I want to make for the record. I want to thank all who testified. I mean, it's like the five public hearings. We're very grateful for every person who came forward, and a special thank-you to those who serve as foster parents. Without them and that network across the state, it would be very difficult for Nebraska's children. And I want to recognize, I'm sure on behalf of all of us, the staffs of agencies, both public and private, who each day care for children. No matter where they serve, it's an important occupation, and we appreciate it. I want to remind everyone that this bill, along with all of our other bills, are meant to be border-to-border, statewide. And so much of the testimony today has dealt with the eastern side of the state, and I want to remind everyone that we are very concerned about the other three service areas and the caseloads that they have there, and many of our recommendations also will apply to those service areas. So they always tend to get left out, and I'm very cognizant of the fact that we need to keep hammering that fact home. As many people talked about today, I hope that they will recognize that in another bill, we do have the Nebraska Children's Commission and a heavy emphasis on the strategic plan of a collaborative nature of bringing stakeholders to the table of all three branches of government and people from across the state. And lastly, I want to acknowledge that there is an error in the bill; and I think that Director Adams might be the first that had noted this, but the lead contract terminates in 2014, not 2013, as is printed in the bill. And we will ensure that that correction is made. And with that, Senator Gloor, I will complete my closing. [LB961]

SENATOR GLOOR: (See also Exhibits 32-37) Any questions? Thank you, and that concludes the hearing on LB961. We will now move on to LB957, and I believe Senator Campbell, you are introducing that bill also. You want to wait? We'll give it a second. Thank you all for your time and patience. I'd ask if you're not staying around, would you please move outside. [LB961]

SENATOR LAMBERT: Yeah. We've got more work to do here.

SENATOR GLOOR: Senator Campbell, please start.

SENATOR CAMPBELL: Thank you, Senator Gloor and colleagues. I am here to provide an opening for our committee's bill of LB957, and this bill creates the Inspector General for Nebraska Child Welfare Act. The bill would establish a full-time program of investigation and performance review to provide increased accountability and oversight of the Nebraska child welfare system; and it would assist in improving operations of the

Health and Human Services Committee January 26, 2012

department the Nebraska child welfare system; and deter and identify fraud, abuse, and illegal acts. A major function of the Inspector General for Nebraska Child Welfare Act would be to provide a permanent office to examine issues in Nebraska child welfare and assist with providing systems performance issues information to the Legislature. The Inspector General would be within the Public Counsel's Office--Ombudsman--which would appoint the Inspector General for Children's Services for a term of five years with approval of the Chair of the Executive Board and the Chair of the HHS Committee. The position would investigate: 1) allegations of misconduct, malfeasance, misfeasance, or violations of statutes or rules and regulations by an employee of the department, a private agency, a licensed childcare facility, a foster parent, or any other provider of child welfare services; 2) death or serious injury in foster homes, private agencies, childcare facilities and programs, and other programs and facilities licensed by DHHS, and any case in which services are provided by DHHS to a child or his or her parents; 3) any case open for one year or less involving an investigation under the Child Protection Act; 4) any investigation conducted by the Inspector General shall be independent of and separate from an investigation pursuant to the Child Protection Act; 5) all investigations conducted by the office shall be conducted in a manner designed to ensure the preservation of evidence for possible use in a criminal prosecution. The bill sets out how complaints may be made, provides for confidentiality of records, and requires reports to the Legislature and Governor. And, as we have discussed on a number of occasions, this idea certainly germinated from some of the research that we did on the state of Illinois. And with that, that concludes my opening. [LB957]

SENATOR GLOOR: Thank you, Senator Campbell. Any questions? Seeing none, we will now move to proponents of the bill. How many proponents are there? Thank you. [LB957]

MARSHALL LUX: (Exhibit 38) Good evening, Senators. My name is Marshall Lux, M-a-r-s-h-a-I-I L-u-x. I am the Ombudsman for the state of Nebraska, and I am here to testify in support of LB957. I want to make this as brief as possible, so I'm going to hit three points. 1) It's very key that LB957 puts the Inspector General position in the legislative branch of government. I think one of the key lessons of LR37 was that how important legislative oversight is; not only the legislative oversight that LR37 itself did, but the legislative oversight that was not done and you were not able to do before the Families Matter initiative really got underway. Legislative oversight is the key, I think, to a lot of what has gone on. The IG is therefore important, because that's what the IG is for. It's to help the Legislature understand and know what's going on in the system and bring information back to you so that you can make informed decisions. 2) The Ombudsman's Office is enthusiastic about the opportunity to be a part of this IG process. If the bill is passed in its current form, we will take this role seriously; and we will do everything that we can to make sure that it works. 3) I've passed out to you some suggested amendments to the bill. The suggestions are being offered as ways to strengthen the bill. The two most important ones are the one at the top of the first page

Health and Human Services Committee January 26, 2012

and the one at the bottom of the first page. The one at the top of the first page talks about the ability of the IG to share information with this committee and its members so that it's clear that there can be a free flow of information from the IG to this committee, which is kind of the whole point of the position. The other one that's at the bottom of the page has to do with making it clear that our office and the IG can have direct access to N-FOCUS, because that's a very important tool to be able to go into that; and we don't have that right now, so that is something that the IG certainly needs. That's really all that I have to say. Again, I think that this is a key provision, a very good idea, and it's important to keep in mind how important legislative oversight is of these systems, because as you have seen, if they're allowed to do what they want to do without your oversight and without you asking the important questions, things can go wrong. [LB957]

SENATOR GLOOR: Great suggestions, and very much appreciated. Are there questions? Senator Krist. [LB957]

SENATOR KRIST: Comment. I don't think there's anybody in this room that's ever been an Inspector General, except me, in a function in the United States military. I wholeheartedly agree with this concept. I understand that there are going to be issues in putting it in place, and I also respect that people have their opinion. Some of the letters that we've received, though, as I found out working in this body, have to do with disagreeing with any concept, you can always say it's unconstitutional. Do you in any way think that what we would be doing in legislative oversight and putting an extra set of eyes, so to speak, within your office has anything to do with the constitutional issue of oversight? [LB957]

MARSHALL LUX: No, I do not, and the key is this. The same question could be raised with regard to the Ombudsman's Office. But the difference is that an IG, as it is outlined in the bill, and an Ombudsman cannot compel the state agencies to take a substantive act. I can't tell an agency what it must do in an substantive issue. Neither can an IG. All they can do, all the Ombudsman can do, all the IG can do is ask questions and investigate. And that is what legislatures have always had the right to do: to ask questions and conduct legislative oversight. So I think it's clear that this is consistent with our principles of separation of powers, which is really what the issue is. [LB957]

SENATOR KRIST: Thank you very much. [LB957]

MARSHALL LUX: I don't think there's a problem, Senator. [LB957]

SENATOR GLOOR: Other questions? [LB957]

SENATOR CAMPBELL: I would just like to make a quick comment. We really do want to thank you for the assistance that you gave in the discussions prior to even formulating this bill, and the assimilation and history of how this position would fit in your

office. It was immeasurably helpful. Thank you. [LB957]

MARSHALL LUX: You're welcome, Senator. [LB957]

SENATOR GLOOR: Thank you, Marshall. [LB957]

MARSHALL LUX: Thank you. [LB957]

SENATOR GLOOR: More positive testimony? [LB957]

SARAH HELVEY: Good evening. [LB957]

SENATOR GLOOR: Good evening, Sarah. I think we saw you about six hours ago. [LB957]

SARAH HELVEY: (Exhibit 39) Yes, I think so too. And I, as others have before me, thank you for being here working so hard this late into the evening. I know from my coworkers at Appleseed that you were here well into the evening last night as well. So thank you for your hard work on these important issues. My name is Sarah Helvey, again S-a-r-a-h, last name H-e-l-v-e-y, and I'm a staff attorney and director of the Child Welfare Program at Nebraska Appleseed. We support LB957 because we believe ongoing oversight and assessment of the provision of child welfare services involving all three branches of government is imperative to establishing needed accountability in the system, and we support the idea of having a position such as this, a dedicated ombudsman who is able to investigate issues and make recommendations regarding systemic reform as well as case-specific issues, and recommendations are reported to the Legislature on an annual basis. We receive a significant volume of intakes from families who are affected by the system, and I think that they would benefit from this kind of a position. As currently written, there's a couple of pieces that we would urge the committee to look at carefully. First, it establishes somewhat broad authority for the position of Inspector General. And I think it would be important for the committee to carefully consider any potential consequences that this new process could have in any ongoing juvenile court cases as well as any separate legal claims that families may have. The separation of powers issue did cross my mind when I read it. I haven't fully analyzed that, but I would think that there are ways that, you know, if there needs to be tweaks, that that could be looked at as well; so I'm glad that that's on the radar screen, and I apologize that I haven't been able to fully dig into that issue. And then, second, the Inspector General's authority to investigate reports involving not only the department and providers, but also foster parents, seems to create the potential to overwhelm resources and prevent the office from researching some of the critical systems issues. So that's another issue that we would flag for the committee as you are moving forward with this process. But overall, we believe that the audits and reports provided through the LR37 process have been invaluable to identifying core issues and developing

proposals to address them, and we're strongly supportive of creating a mechanism to maintain that oversight and program review and establish much-needed transparency in the system. So thank you so much for all your hard work. I'm happy to answer any questions if you've still got them. [LB957]

SENATOR GLOOR: Any questions for Ms. Helvey? Thank you. More proponents, please step forward. Good evening. [LB957]

MELANIE WILLIAMS-SMOTHERMAN: (Exhibits 40 and 41) Good evening. My name is Melanie Williams-Smotherman, M-e-I-a-n-i-e, Williams-S-m-o-t-h-e-r-m-a-n, I've handed out my talk, which I was thrilled when I found out we had five minutes earlier; but I think that I probably can't get through it in three. I have one copy of this which I'm going to hand out or give to Diane after my testimony. I only have one copy, though, so. It's titled, "Why the typical child welfare ombudsman does so much harm." And the reason that this is important to this discussion is outlined in my talk. I'm executive director of the Family Advocacy Movement. Again, I would like to thank the Health and Human Services Committee for its willingness to listen, its interest in finding solutions, and its focus on critical areas of dysfunction and outright brokenness in the systems we currently have in place for the purpose of protecting children and supporting families in Nebraska. Unfortunately, in most of the cases we have reviewed over the past three years, neither children nor their families have been appropriately protected and supported. Even though birth families are the most important people in the lives and safety of children, they have been denied a voice and the right to the assumption of innocence. They have been denied competent and unbiased investigations, substantive due process in juvenile court, the right to competent representation by attorneys who aren't merely benefiting from their relationships or friendships with the prosecution and state workers. They have been denied the right to have their cases be free of inaccuracies and conflicts of interest and independently reviewed for state negligence and malicious abuse. Birth families have been the ones desperately calling out for better oversight of the system. Birth families, who routinely endure the assumption of guilt from the moment an allegation is made while system officials and foster parents and institutional spokespeople and every other bureaucrat unrelated to the child get to enjoy the assumption of acting in the best interest of children, are the ones calling for an end to the shrouding of truth by the tired excuse of protecting privacy and the convenience of the confidentiality defense, which I think we can all agree is guite overused by system officials who don't want their behaviors and improprieties to be scrutinized by the public. State Auditor Mike Foley performed a vital role in his financial audit of the state where he uncovered far more than purposeful obfuscation of fiscal realities. Now our state needs a competent and comprehensive review of policy and performance, a policy and performance audit with the full authority of reviewing, interviewing by subpoena, and following and researching actual cases moving through the system. This is why l've chosen to speak as a tentative proponent for LB957. It's time to shake things up and jolt our system into better practices. It has become obvious that the status quo and its

supporters within the Foster Care Review Board and other so-called oversight layers in our state have failed to move Nebraska out of the relative dark ages of poor practice and overzealous child removals. [LB957]

SENATOR GLOOR: Melanie, would you please try and summarize the remainder of this, please. [LB957]

MELANIE WILLIAMS-SMOTHERMAN: I will. What I'd like to do then is get immediately to my only concerns about the bill. The purpose of LB957 presumably is to add better accountability to the system, but there is an alarming lack of accountability detailed in this bill, unless I am misreading, and I would like to talk to maybe Senator Campbell, make an appointment. If we have read the bill correctly, only the IG's annual summary of reports and recommendations will be seen by the Legislature or the public. The individual reports would only be seen by the subjects of those reports, who can't share them except with the IG's permission. The reports appear to be specifically exempted from the Nebraska open records law. So forgive me if I appear distrusting or ungrateful, but with all that testifiers have reported over the years about the critical need for greater transparency, true independent oversight and real accountability for unjust harms, how will we know that the findings in the summary report are valid? [LB957]

SENATOR GLOOR: Thank you. [LB957]

MELANIE WILLIAMS-SMOTHERMAN: All right. I hope that you read the rest. [LB957]

SENATOR GLOOR: Appreciate it, and we will read the rest of this. [LB957]

MELANIE WILLIAMS-SMOTHERMAN: Thank you. [LB957]

SENATOR GLOOR: Are there other proponents who would like to speak? Anyone who would like to speak in opposition to this bill? Anyone in the neutral capacity? Senator Campbell, would you like to close? [LB957]

SENATOR CAMPBELL: I will waive closing. [LB957]

SENATOR GLOOR: (See also Exhibits 42-47) And that closes the hearing on LB957, and I will turn the gavel. Counting this morning when I was presiding officer, I've been here for about...I've been in the chair for about 11 hours. [LB957]

SENATOR CAMPBELL: Very good job. We will open the hearing and Senator Howard is already at the chair on LB874 to change foster care licensure provisions. Senator Howard. [LB874]

SENATOR HOWARD: (Exhibit 48) Thank you, Senator Campbell and members of the

Health and Human Services Committee January 26, 2012

committee. For the record, I am Senator Gwen Howard, H-o-w-a-r-d, and I represent District 9. And I have let my LA, out of pity for her life, (laugh) let her go home, so I'm just going to hand this out. Oh good, thank you. LB874 would require that a foster child cannot be placed in an unlicensed foster home unless the foster parent is a relative. I am introducing this bill because I believe that all foster children deserve to have the highest quality homes, and all foster parents deserve to have the opportunity to provide this. Current Nebraska law allows placement of a child within an unlicensed foster home as long as the children from only one family are placed in the home. Unlicensed foster homes, sometimes referred to as approved homes, child-specific placement, or kinship care, are not subject to the same environmental or training requirements as licensed foster homes. Much of this policy on both the state and the federal level was developed in growing recognition of the fact that removing children from their homes is much less traumatic if they can be placed with a relative. If proper supports are in place, kinship care can be a much better choice for a child than a traditional foster home. Across the nation, statutes and regulations were relaxed to allow this type of placement with fewer regulatory hurdles in acknowledgement of the fact that these individuals often make the decision to foster quickly and under highly emotional circumstances. Many kinship placements have difficulty meeting requirements that are regularly asked of licensed foster parents. Nebraska is not alone in creating both statutory and regulatory licensing exceptions for child-specific placement. Most states have some sort of licensing definition for placement with kin. However, states vary in how they define kin. If you look at the map that you just received, you'll see that 30 states use a broad definition of kin that includes relatives and others, and 18 states limit kinship placement to relatives only. What makes Nebraska different in this definition from most of the other states is that Nebraska has chosen to have a broad definition of kin, and this explains how far we are willing to extend that definition. Most states require a strong relationship using language like emotionally significant or longstanding or perceived as family. As I stated earlier, our statute provided little framework allowing unlicensed placement in any family as long as children are from one family only. Department regulation and policy require that placement be with someone known to the child before placement. This means, with a loose interpretation, that a child could be placed with the school janitor whose only relationship prior to placement was an exchange of hellos in the hallway. Nationally, most foster children are placed in traditional foster homes. However, according to the latest report of the Foster Care Review Board, the majority of Nebraska's foster children are placed in unlicensed homes. I want to be clear on what this means for foster children. Foster parents who are unlicensed are not required by statute or regulation to follow the same rules about the home environment as licensed foster parents. Spacing requirements are different: that refers to the amount of floor space in the bedroom, for one thing. Fire inspection rules are different. Most significantly, while licensed foster parents are required to have 21 initial hours of training and 11 hours of training per year, unlicensed foster parents are not required to receive any training at all. This leaves unlicensed foster parents without any training on how to manage the issues their foster child faces and with no information on how to navigate the system and with very few

Health and Human Services Committee January 26, 2012

supports. Although it is surprising that the majority of our foster parents do not have to be trained, this probably should not be the case. There are significant financial incentives for our lead agencies to place in an approved home rather than a licensed home. To give you an example, according to the numbers KVC provided to this committee for the LR37 report, a regular foster family who is unlicensed receives only half of what is received by a licensed foster family. That amounts to only \$10 a day. I want to repeat that to you. That amounts to only \$10 a day for a child. Licensing exceptions were created because we recognized that Grandma and Grandpa or Aunt or Uncle can provide a loving placement, but may not be able to provide 35 feet of bedroom space. They were not created so that we can find a cheaper, untrained foster parent who has minimal contact with a child prior to placement. We need to have a system that holds our foster placements to a high standard and gives them the educational and financial support that our foster parents require. LB874 will allow us to retain what is important about these kinds of exceptions and fix what's not working for children and foster parents. I thank you for your time and your attention to this important issue. But I want to add one other thing to this. I was working in health and human services as an adoption specialist when this bill was passed. And this was Jim Jensen's bill, and he and I have had conversations about this, when I was sworn in, my first year was 2005, and I came onto the Health Committee. He explained to me that he worked to pass this bill based on a case in his district, constituents, grandparents, that didn't want to go through the process of foster parent training because they were only interested in having their own child, their own grandchild, and it was very legitimate. I have no problem with grandparents not wanting to participate in training. Hopefully, they know their own grandchild. But I think this has been taken to the extreme for reasons that have nothing to do with the welfare of the child, and you can look on the map there and see what states are using the kinship care and the definitions that they have, and I will say to you that the definition that our state has chosen to use is the loosest of all the states. [LB874]

SENATOR CAMPBELL: Oh. I'm sorry. (Laughter). [LB874]

SENATOR HOWARD: (Laugh) Now it's your turn. [LB874]

SENATOR CAMPBELL: I've been so quiet all day. [LB874]

SENATOR GLOOR: I almost said something too. (Laugh). [LB874]

SENATOR CAMPBELL: Wake up. Wake up. Thank you, Senator. [LB874]

SENATOR HOWARD: You're welcome. [LB874]

SENATOR CAMPBELL: Are there any questions for the Senator? Seeing none. We will have our first testifier in favor of LB874. Any proponents? A proponent. Good evening.

[LB874]

LEIGH ESAU: Good evening. Do you want me to fill this out later? [LB874]

SENATOR CAMPBELL: Sure. [LB874]

LEIGH ESAU: Okay. My name is Leigh, it's L-e-i-g-h, Esau, E-s-a-u. I'm a current foster parent, and I think that this bill is critically important to continuing to make changes in the foster care system. I operate, I'm the executive director of the Foster Care Closet, and so we work with all kinds of families that come in to get clothing. And some of the very most stressed people we see are those relative placements, whether it be a grandparent, whether it be a distant relative, and it's because they are not trained. They have no idea how the foster care system operates, and so then when they need to advocate, they don't even know who they're supposed to be talking to. Just a real quick example. I had a family, a gal who came in, the child is 13. She hadn't seen the child since the child was about five. This child has suicidal tendencies. The placement was not told that this was the case. The child has tried to commit suicide twice before being put in the home and then tried committing suicide the week after being placed with this family. The reason they got this child...they are an unlicensed home. The reason they got this child is because they had that previous relationship when the kid was five years old. They hadn't seen her, didn't know anything about the extent of the emotional struggles that she was having. That's where the training and being mandated to go through, because part of the training is to understand how to deal with high needs kids. And so I would very much appreciate having...at least having them have the opportunity. One of the things that we do see, that I see coming through the door, is that a lot of our families are not even encouraged to become licensed. And again, I believe that boils down to that bottom dollar. It's cheaper to not have them licensed than it is to have them licensed, so. [LB874]

SENATOR CAMPBELL: Any questions for Ms. Esau? We are hoping to have a time in which we can offer a tour of the Foster Care Closet--but it's getting harder to do that, isn't it, Leigh? But we will try to do that so that you can see it. Thank you very much for your testimony. [LB874]

LEIGH ESAU: Thank you. [LB874]

SENATOR CAMPBELL: The next proponent for LB874? Seeing no one. Those who wish to testify in opposition to LB874? Oh. Director Adams, we have honed this down to three minutes. [LB874]

SCOT ADAMS: Thank you. [LB874]

SENATOR CAMPBELL: We'll give you a little leeway, but... [LB874]

SCOT ADAMS: I'll shoot to be within that. [LB874]

SENATOR CAMPBELL: ...if you had dinner, you don't get any leeway. (Laughter) [LB874]

SCOT ADAMS: (Exhibit 49) (Laugh). I did not have dinner, and...but I do have to go to Kearney yet tonight, and so I'll be looking for dinner on the way there. I have a meeting with my other job tomorrow morning. Hello. Scot Adams, S-c-o-t A-d-a-m-s, interim director for the Division of Children and Family Services for the Department of Health and Human Services. I want to simply touch on a couple things. We are here to testify in opposition to this bill for a couple of reasons. One, in the current situation, which we think is fine as is, it gives the department and the agencies flexibility to be able to place children in tight situations and in short notice. The child must have known the placement prior to the placement being made, and the approval of a particular place without license is to be made for a specific child or children, so it is very child specific and child centered. The key here, the key element is that it is a preexisting relationship with whom we want to place the child in a nonlicensed home. There are a particular set of requirements for that to happen, and those are listed in my testimony. I will not take time to go through that. You can read that. We are fearful that some of the impacts, if this bill were to be passed, are that some placements for children could be lost. At the end of December of 2011, there were 374 children in this kind of nonlicensed placement. The number does not translate into 374 homes, because there could be more than one child; but our estimate is around 300 homes could be at risk in that regard. Secondly, we think that this would increase the likelihood of placing children with strangers. Not a good thing. If we can place them with somebody where they know somebody, I think that that's a better option generally for children. Thirdly, we think that this would hurt us on our efforts to meet the CSFR measurements because of the stranger factor and because of, even if we wanted to go back to somebody they knew, then they would end up with probably a prior placement in a licensed home, then going to somebody they knew, and so you end up with bad numbers. So that's the short version of testimony. It is there for you to take a longer look. I'm happy to answer questions. Thank you. [LB874]

SENATOR CAMPBELL: Great job. Are there questions for the director? After we've had a chance to take a look at this, if we have questions, we'll get back to you. [LB874]

SCOT ADAMS: I'd be happy to talk with you. You bet, anytime. [LB874]

SENATOR CAMPBELL: I don't want to... I mean, drive safely. I know you're trying to get on the road. [LB874]

SCOT ADAMS: Thanks very much. Yeah, York is going to be dinner, so. [LB874]

SENATOR GLOOR: Get the mail out of my mailbox and put it on (inaudible). (Laughter). [LB874]

SCOT ADAMS: (Laugh). I'll bring it there to you. Okay. That it? [LB874]

SENATOR CAMPBELL: Thank you, Director Adams. [LB874]

SCOT ADAMS: Thank you very much. Appreciate your time and effort. Long day. Good work, though. [LB874]

SENATOR LAMBERT: Thank you. [LB874]

SENATOR CAMPBELL: Anyone else in the hearing room who is opposed to LB874? Taking neutral testimony. Good evening, good evening. [LB874]

SARAH FORREST: (Exhibit 50) Good evening, good evening. I didn't think I would ever have a chance to say that to the group of senators. My name is Sarah Forrest, S-a-r-a-h F-o-r-r-e-s-t, and I am a policy coordinator for child welfare and juvenile justice at Voices for Children in Nebraska. First, thank you very much to all of you for staying tonight and looking at these very important issues. I truly appreciate the dedication that you've all shown. And thank you, Senator Howard, for introducing this bill. I think Senator Howard addressed in the opening to this bill, you know, sort of the good and the bad of child-specific placements. What's good is there's less trauma for children. We want them to be in familiar environments when they're in out-of-home care. The bad is that in practice, it can be taken advantage of sometimes, and also the bad is that we know nationally and in Nebraska, we don't do a good job of supporting our child-specific placements. They are paid less. They don't have training requirements. And oftentimes, they have higher needs. Not only are you dealing with children, but you're dealing with your prior relationship with the family who has abused or neglected this child. They have specific needs and different needs than a traditional foster family. So it's clear that we need a solution so that kids have safe environments with quality supports while they're in out-of-home care, while still being able to live with folks who are known to them, as often as possible. LB874 presents a possible solution, but we have some concerns that it may restrict certain people who would be familiar to the child. That would be a good thing. For example, godparents, long-term family friends. None of those would fall into the definition as laid out in LB874; so we just ask that you do consider the problem that Senator Howard has so articulately laid out. It is crucial for our kids, but that we look at different solutions. Alternatives like incentives to licensure for kin families or child-specific licensing standards. So developing a different set of standards that would apply only for child-specific placements to provide them the kinds of supports they need while maybe not meaning that they have to take on additional foster children in the future; things that they'd be comfortable with. So thank you very much, Senator Howard,

for bringing this issue, and thank you all for staying so late. I really appreciate it. [LB874]

SENATOR CAMPBELL: Questions for Ms. Forrest? Thank you for staying late. It's you that stayed late. [LB874]

SARAH FORREST: Yes, your welcome. [LB874]

SENATOR CAMPBELL: Anyone else in the hearing room who wishes to testify in a neutral position? I'm not waiting long with that. (Laughter) Senator Howard, I assume you would like to close. [LB874]

SENATOR HOWARD: I would. Licensing of foster parents is essential to ensure that families have the training and the resources that they need to provide care for our most vulnerable children. Children in foster care confront a whole host of emotional, behavioral, mental health issues that untrained caregivers, and we just heard that, are simply not equipped to deal with. Foster parents confront each and every one of these issues with these children and have to navigate that complex bureaucracy that is the system. Exceptions from licensing were put into place by Senator Jensen to ease the burden for relatives who step up to the plate when a child is removed from the home. LB747 (sic--LB874) returns our policy to what it should be: a narrow exception that is in the best interest of children. And reading through this information provided by Scot Adams, Interim Director, I have to frankly say I have even more concerns than I had when I wanted to bring you this bill. There was no mention of a child being removed and being placed in a licensed emergency foster home, a licensed emergency facility, CSI comes to mind, which is a federal requirement for that child to be eligible for IV-E funds. Not placed in a licensed emergency facility right off the bat, they're not ever eligible for that, so it's always state funds. This may not seem important, but it sure is if a child moves across state lines. The second thing that I think we should all be concerned about is apparently, when a child is placed in an approved or not licensed home, there's no requirement for a fingerprint-based national criminal history check of the perspective foster parents and any other adults residing in the home. Now, my experience has always been the child was temporarily placed in a licensed emergency home while we at least did a central registry check and did a walk-through of that home--minimum requirements for the protection of that child. I don't think I'm exaggerating in telling you that there are grandparents who have been convicted on issues of child molestation, and that's not something you want to take lightly. So thank you, and let's work on this. [LB874]

SENATOR CAMPBELL: Any questions from the senators as we finish out the evening? Thank you, Senator Howard. [LB874]

SENATOR HOWARD: You're welcome. [LB874]

Health and Human Services Committee January 26, 2012

SENATOR CAMPBELL: And with that, we'll close the public hearing on LB874 and conclude the hearings, and we will not exec. [LB874]