

Transcript Prepared by Clerk of the Legislature Transcribers Office  
Appropriations Committee February 3, 2022

**STINNER:** [RECORDER MALFUNCTION] Appropriations Committee hearing. My name is John Stinner. I'm from Gering and I represent the 48th Legislative District. I serve as Chair of this committee and I'd like to start off by having members do self-introductions, starting with Senator Erdman.

**ERDMAN:** Steve Erdman, I represent District 47, which is nine counties in the Panhandle.

**STINNER:** John Stinner, District 48: all of Scotts Bluff, Banner, and Kimball Counties.

**KOLTERMAN:** Mark Kolterman, District 24, which is Seward, York, Polk, and a little bit of Butler County.

**DORN:** Senator Myron Dorn, District 30, which is Gage County and part of Lancaster.

**STINNER:** Assisting the committee today is Tamara Hunt, and to my left is Liz Hruska. Our page today is Jason Wendling. On the cabinet to your right, you will find green testifier sheets. If you're planning to testify today, please fill out the sign-in sheets and hand it to the page when you come up to testify. If you will not be testifying at the microphone, but will want to go on record as having positions on the bill being heard today, there are white sign-in sheets on the cabinet, where you may leave your name and other pertinent information. These sign-in sheets will become exhibits in the permanent record at the end of today's hearings. To better facilitate today's proceedings, I ask that you abide by the following procedures. Please silence or turn off cell phone-- your cell phones. Order of testimony will be introducer, proponents, opponents, neutral, and closing. When we hear testimony regarding agencies, we will first hear from the representative of the agency. We will then hear testimony for anyone who wishes to speak on the agency's budget request. When you come up to testify, we ask that you spell your first and last name for the record before you testify. We ask that you be concise. It is my request that you limit your testimony to five minutes. Written materials must be distributed to committee members as exhibits only while testimony is being offered. Hand them to the page for distribution to the committee and staff when you come up to testify. We need 12 copies. If you have written testimony but don't have 12 copies, please raise your hand now so the page can make copies for you. With that, we will begin today's hearing with Agency 5, Supreme Court.

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[AGENCY HEARINGS]

**WISHART:** And we will now open the hearing for LB1049.

**KOLTERMAN:** That's me.

**WISHART:** Yes, that's you.

**KOLTERMAN:** Cool.

**WISHART:** Good afternoon, Senator.

**KOLTERMAN:** It is a good afternoon, it's Friday.

**HILKEMANN:** And Thursday's coming.

**DORN:** For us, it's Friday.

**KOLTERMAN:** That's right. Good afternoon, Vice Chair Wishart and committee. For the record, my name is Mark Kolterman, M-a-r-k, K-o-l-t-e-r-m-a-n, and I represent District 24 in the Nebraska Legislature. I'm here today to introduce LB1049 on behalf of the Nebraska Hospital Association. LB1049 appropriates \$500,000 in each of the next two years to the Office of Public Guardian for the office to hire additional staff to care for the needs of individuals in the need across our state. The office-- the Office of Public Guardian has two main missions, with the first being that it serves as court-appointed guardians and/or conservators of last resort. According to the 2021 Office of Public Guardian annual report, the OPG began accepting nominations in December of 2015. Through October of 2021, the OPG has nominated 813 times for guardianship/conservatorship within hospitals' nominations occurring 311 times in that period. Hospital nominations were 311 times in that period. In the past 12 years-- or in past year, out of the 112 new nominations, 47 of those were in from our local hospitals. Additionally, 15 of the 21 new cases accepted by the OPG in 2021 were from hospitals. So, according to the OPG report, despite a 71 percent hospital nomination acceptance rate, 68 percent potentially incapacitated patients nominated by hospitals were unable to be accepted due to the OPG's lack of capacity for new cases. During Chief Heavican's State of the Judiciary address last month, he noted that the Office of Public Guardian has a waiting list for vulnerable adults in need of its services. However, due to budget constraints for the third year in a row, was able to accept fewer than 25 new appointments out of the hundreds of incapacitated individuals in the need of guardian/conservatorship services. When one of the hospital nominations-- when one of the hospital nominations is rejected, where

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do the patients end up? The vast majority of these patients needlessly stay in the hospital bed. I would like to share-- share just one example from one hospital in the state and note that this issue impacts many hospitals across the state. They shared, our hospital has patients that no longer need one-on-one care for many days past their intended stay because we have difficulty transferring them to the appropriate level of care. Last week we had 25 of these patients, and 5 of those are because of guardianship issues. The length of stay for patients waiting for guardianship ranged from 33 to 170 days-plus. In all 25 cases, our hospital is no longer receiving payment from any source. The patients are just unnecessarily taking up an acute bed and costing us staff and money. Imagine, you don't need to be in the hospital, but you have been stuck in one for five and a half months, how would you like that as individuals? Honestly, the Office of Public Guardian probably could use an additional six to seven million dollars to really help them relieve the backlog of guardian/conservatorship cases in the state. LB49 is just-- or LB1049 is just a fraction of the need, but it's a very important step in the right direction to help our state take care of its most vulnerable citizens. I will say this. I know very well that the Office of Public Guardian is doing what they can do. They're a tremendous asset to this state and we funded them-- I thought we were funding them in an adequate way but obviously, when the Hospital Association came to me with this request, I learned differently. They didn't ask for this. This is something that was brought to us by the Hospital Association. I think it's needed; \$500,000 for the next two years isn't going to break us. But I think critical-access hospitals and the rest of the hospitals that were suffering now with lack of beds, we need to do what we can to help them out. So with that, I know that there's some people behind me that are going to support this. I'd appreciate if you listened to them and I-- I'll probably just waive my closing right now. Thank you.

**WISHART:** Thanks, Senator. Any proponents? Good afternoon.

**LAURA BETZOLD:** Good afternoon, Senators. My name is Laura Betzold, L-a-u-r-a B-e-t-z-o-l-d. I'm deputy general counsel and director of legal services testifying in support of LB1049 on behalf of Nebraska Medicine. Nebraska Medicine, that is a large organization and Senator Kolterman kind of covered this, so I'll go ahead anyway. Annually, Nebraska Medicine reports approximately 14,000 avoidable days, costing our system over \$18 million a year. Avoidable days are those where a patient remains in our hospital after they're ready to be discharged to a more appropriate level of care. Timely discharge is not only important to the effectiveness and efficiency of our health system, but it's critical to the patient's health and well-being. Prolonged

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hospital stays can delay a patient's recovery after illness or surgery. It can increase their risk for hospital-acquired infections, and it has the potential to cause prolonged disruption in sleep patterns and our social isolation that can result in mental health and behavioral issues. One of the most time-consuming challenges Nebraska Medicine faces is in discharging a patient is when a patient has a preexisting capacity issue or their medical condition results in a prolonged or permanent change in their capacity. These patients require a guardian because they cannot make decisions. They can't sign documents regarding their healthcare. They can't complete paperwork for insurance, and they can't approve the type or location of their care after their hospitalization. We support LB1049 in an effort to address the bottleneck that OPG's limited capacity creates for hospital systems. In 2021, Nebraska Medicine had a total of 1,038 avoidable days specifically attributed to patients who were ready for discharge, but they were waiting for a public guardian through the Office of Public Guardian. The average number of days each patient waited for a guardian through OPG, after they were ready to be discharged, was a little over four months. The financial cost to our health system of those avoidable days waiting for a public guardian was approximately \$1.3 million just last year. When a guardian is needed and family and friends are unavailable or unable to assume the role, we turn to the court system to appoint a guardian through the Office of Public Guardian. Once the court system determines the patient needs the public guardian, the patient is placed on a waiting list because OPG is operating at their maximum ward staff capacity. The time a Nebraska Medicine patient waits for a guardian is anywhere from three to eight months on average. That means the patient is remaining hospitalized with us that entire time. During that time, neither the patient nor the hospital has any clear understanding of the timeline for receiving a guardian, and therefore when the patient may be able to move to their more appropriate level of care. Just an example of a patient in this situation who needs a public guardian, it might be a 75-year-old or so, brought to our hospital after having been found wandering, they're brought in for dehydration and infection. We treat the acute care needs for dehydration and the associated conditions. Once stabilized, the patient is ready to be transitioned to a more appropriate level of care. The patient has no friends or family willing to act as guardian and is unable to be sent home due to their progression of their dementia. The patient has limited ability to pay the cost for long-term care in a memory support facility. In this situation, the patient would be-- would wait in our hospital until the public guardian is available to help figure out their financial situation, maybe to help them apply for Medicaid, to

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enroll them in a facility, those kinds of functions. The patient's dem-- dementia will almost certainly worsen, spending months in a strictly clinical environment, unable right now to leave the room due to COVID protocols and with no or limited access to recreational activities. Our setting is not the best appropriate setting for them. The rest of this tou-- testimony, a little bit, sort of, Senator Kolterman covered, right? It talks about our challenges. And then it also cites the same statistics from the OPG report. And so we very much appreciate the crucial work of the Office of Public Guardian, and we think that LB1049 addresses the clear need for increased capacity of the Office of Public Guardian. I thank you for your consideration and I'm happy to answer any questions.

**WISHART:** Any questions? Senator Dorn.

**DORN:** Thank you, Chair Wishart. Thanks for being here. I guess maybe I missed it. I don't know, maybe it-- while that person is in there for those extra days, who pays for that?

**LAURA BETZOLD:** There is no pay for that. For most conditions, we receive a lump sum payment based on the diagnosis code for the patient. And so--

**DORN:** After that then the--

**LAURA BETZOLD:** After that, it's--

**DORN:** --care is basically absorbed.

**LAURA BETZOLD:** Yeah, we're absorbing the cost and also we're not being paid for someone else who might be in that bed with a condition that they need.

**DORN:** Thank you.

**LAURA BETZOLD:** And that's the other thing, right?

**DORN:** So the court system isn't picking that up?

**LAURA BETZOLD:** No, nobody's picking that up.

**DORN:** Thank you.

**WISHART:** Senator Clements.

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**CLEMENTS:** Thank you. Thank you for being here. On your testimony, you talk about 14,000 avoidable days and then 1,000 avoidable days. What's the difference?

**LAURA BETZOLD:** And so the 14,000 are avoidable days for a variety of reasons. And so those might be, for example, someone who is in the hospital and they're not waiting for a guardian, but they might, for example, have a behavioral health issue, and we can't find an appropriate inpatient psychiatric bed for them or an available bed for whatever their condition is. So they no longer need acute hospital care, but they need some kind of another level of care and there is no place open to place them. And so they're waiting. And so 1,038, I think, is the number, but a thousand of those stays are ones where we could specifically go back and attribute to the patient was waiting just for a public guardian. The rest of those days, they-- they may also have something to do with the public guardian, but many of them are other situations where we can't find a place then.

**CLEMENTS:** In this bill, you're not asking us to solve the 14,000 problem, just the [INAUDIBLE]

**LAURA BETZOLD:** Yeah, it solves some of the problem. This is-- this is one area of our problems.

**CLEMENTS:** I was confused why you started out with that.

**LAURA BETZOLD:** Sorry.

**CLEMENTS:** Medicare pays a lump sum for a Medicare patient in the hospital?

**LAURA BETZOLD:** Medicare and Medicaid pay based on the diagnosis code, the DRG code. So it may be-- it's a lump sum for whatever their condition--

**CLEMENTS:** So they know how many days the code is going to take in the hospital.

**LAURA BETZOLD:** Right. And so some are shorter, you know, might take a shorter than average time. Some might take a longer time. There can be some increases slightly based on the complication, the complicating nature of-- of what they're being treated for. But basically, yes, it's a lump sum and I'm not a billing and coding expert, but that's the gist of it. So it doesn't matter they can stay there three months, eight months. We've had some patients stay over a year and we don't collect any additional.

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**CLEMENTS:** OK. That's surprising me. I'm on Medicare. I thought it was so-much a day copayment for me, but makes it appear that there is a per-day payment, but that's news to me. Thank you.

**LAURA BETZOLD:** There may be some conditions where there are per-day recovery, but most of these patients, the 14,000 avoidable days and specifically about the 1,038 where the patient's waiting for a public guardian are-- are all paid at a lump sum.

**CLEMENTS:** OK.

**WISHART:** Senator Hilkemann, do you have a question?

**HILKEMANN:** I do. What is the qualification to be a public guardian?

**LAURA BETZOLD:** I am not sure I can completely answer that, but there is a training requirement and-- and that-- that is through the Office of Public Guardian. They might be better off-- better able to answer that than I am.

**HILKEMANN:** OK, and so what this is doing is to help them to-- what we have here is we have a shortage of public guardians. Is that the bottom line here?

**LAURA BETZOLD:** Right. There's a maximum number of wards that a public guardian can handle at any given time. I think it's around the neighborhood of 20-ish, but don't quote me on that. And so they have X number of the funds to pay X number of public guardians, and there are enough wards that there are more needs than there are public guardians. And my understanding is that the Office of Public Guardian estimated that this would allow them to hire potentially four-- in the neighborhood of four additional public guardians which-- who each could handle 20-- 20-ish additional wards.

**HILKEMANN:** Do they hire because it's not necessarily training for public guardians?

**LAURA BETZOLD:** I assume that that means that they would be hired and trained, and I don't know what the hiring qualifications are.

**HILKEMANN:** That's a question I'll try and get the answer at a hearing.

**WISHART:** Any additional questions? Seeing none, thank you.

**LAURA BETZOLD:** Thank you.

**WISHART:** Additional proponents?

**JEREMY NORDQUIST:** Good afternoon, Madam Vice Chair and members of the highly esteemed Appropriations Committee. I am Jeremy Nordquist, J-e-r-e-m-y N-o-r-d-q-u-i-s-t, president of the Nebraska Hospital Association, and appear here today on behalf of our 94 hospital members across the state of Nebraska. And if you talk to our hospital members right now, I would say priority number one is crisis with COVID, hospitals bursting at the seam. Number two on their mind is workforce. And where are we going to be with our workforce coming out of COVID in the years ahead and the wages associated with that, as I was here last week talking about provider rates. And number three is post-acute placement challenges. And that's why when I was at Nebraska Medicine, the Hospital Association and Nebraska Medicine worked with Chairman Stinner, and he introduced an interim study for us last year, LR163, that was heard before the Health and Human Services Committee last fall where we went into detail about all of the post-acute barriers to placement and guardianship was one of three big ones identified. The others were behavioral health capacity, not having the acute care beds that we need and Chairman Stinner happened to be very much leading on that. And I think there's going to be an opportunity with ARPA funds to work on that. And then the other one is skilled nursing capacity in the state, both lack of capacity, some issues with managed care not contracting for enough capacity. So those-- those were the three areas that are holding up people getting out of our hospitals and when they're ready to be. And we want to get people to the level of care that's appropriate for them and not in a hospital when they don't need to be there. It's not good, obviously, for our bottom line, but there's a human cost to that as well, and we really care about getting people to where they need to be. And this issue, the guardianship issue, very much can be summed up in the Office of Public Guardian report that just came out. It says, "Throughout 2021, the OPG was at maximum ward-to-staff capacity in most OPG service areas. Hospitals and other facilities with incapacitated residents in need of guardians faced the greatest difficulties due to delayed patient discharges, exacerbating the hospital bed shortage from COVID-19." This was a problem-- big problem before COVID. It's really at the crisis point right now because those are beds that we could be caring for Nebraskans in. But it will remain a problem post-COVID, and we've got to start taking steps; really concerning when you think about the demographic trend in our state, an aging population that's happening nationally, obviously. And that's why now we have to start taking these steps to get the Office of Public Guardian to an appropriate staff level to handle the cases that they have right now.



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But also, we're going to have as we have an aging population and more people potentially in need of guardians in our state. So we appreciate Senator Kolterman's leadership on this. We appreciate the Office of Public Guardian, Michelle and Corey Steele for engaging with us in conversations over the last year or so on this, and we hope to continue to work on these areas. Because when we talk about the cost of healthcare, this is a big driver. You know, you heard the numbers from Nebraska Medicine, \$18 million for their system alone for all of the post-acute challenges. That number, you know, would be replicated at CHI, Methodist, Bryan, the bigger systems and to a lesser extent, other systems. So we're talking well north of \$100 million of total wasted healthcare dollars right now for care that's being provided, that should be provided in a different-- a different setting, in a more appropriate setting. So the number, you know, I've heard multiple health systems now say they've had individuals over 400 days, so that-- that isn't a unique situation. It's happened. And right now, you know, they're-- every one of them probably has an individual right-- the bigger systems right now that are north of 100 days. So these-- we ask you for help on this and we're going to continue this conversation because it's not going to be solved with-- with one bill, but multiple-- multiple bills, multiple investments over a long period of time. Happy to take any questions.

**WISHART:** Any questions? Seeing none, thank you.

**JEREMY NORDQUIST:** Thank you.

**WISHART:** Any additional proponents?

**MICHELLE CHAFFEE:** It's almost good evening, huh? I'm Michelle Chaffee, M-i-c-h-e-l-l-e, Chaffee, C-h-a-f-f-e-e. I am the director of the Office of Public Guardian and I'm here to testify in support of LB1049. I want to thank Senator Kolterman for introducing the bill to provide \$500,000 for additional Office of Public Guardian staff. As you're aware, the Office of Public Guardian was created in 2014 and began taking appointments in 2015. The OPG provided guardian and conservative care to vulnerable adults who are determined by a court to be incapacitated and have no other individual who is available or willing to serve. The OPG has had a waitlist for its services since 2018. LB1049 would provide funds for staff to increase capacity and additional guardian and conservators for vulnerable adult-- needy adults in Nebraska. The funds would help to alleviate the current challenges faced by the most needy and crisis level, such as adult protective services, hospice care and hospitals, and for the opportunity for other individuals currently on our waitlist. While the

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funds will not solve all the future needs for the OPG's capacity, it will go a very long way in assisting the current situation. Each year, the OPG provides an annual report to the Legislature and the Chief Justice regarding our capacity and services, and I've provided a copy to each of you to reference today should you have any questions about the OPG nominations, their capacity, our case disposition, and our waitlist. So with that, if you have any questions, I'd be glad to provide information. Senator Hilke, you asked about, you know, public guardians. The off-- the Public Guardianship Act, it monitors and oversees the public guardian and we are tasked with hiring associate public guardians to serve for this group of individuals. And so right now, we have 17 across the state of Nebraska, the entire state. They are hired on a variety of different backgrounds: social work, DD, that type of thing. And then they each have-- can have a maximum of 20 individuals to serve. And the statistics will show that the Office of Public Guardian, the-- the average hours of service for each ward that we have is at right at four hours per week per eight ward. And so you can see that of that 63 percent of that staff time is done by this-- by the public guardian, the associate public guardians. The other percent is done by our multidisciplinary team: those who do finances, those who do all the court fees, those who provide services that would be needed for the wards. So just so you know that it's not just the associate public guardians that are staff that are hired to serve the wards' needs. And so that's basically how this is set up because as we-- as I said, if you have 20 wards, they spend about-- the associate public guardian spend about two and a half hours of that four hours. So they put about 50 hours a week in. And then the rest of the time, the 1.5 hours for service to the staff, to the ward is done by the rest of the staff.

**WISHART:** Senator Dorn.

**DORN:** Thank you. Thank you for being here. You said that, I call it, I don't know if it's by court decision. So how does somebody, if they go into the hospital and they don't have any guardian, how or-- how long is that time before a court decide or what?

**MICHELLE CHAFFEE:** Right. In Nebraska, the way that it's handled is that there's a petition filed and there needs to be that done for all guardianships. It's a-- it's a-- it actually takes all-- most of all the civil rights away from an individual. So while medical decisions are a part of the civil rights, the other things that are taken-- are taken or can be where they live, you know, in medical care. All of their finances. We handle all of the finances for the individuals. The-- the annual report shows that I think that we looked at having

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\$4.1 million come in and out of our financial system to pay for the needs of our wards. And that's their money, it's their benefits that we oversee.

**DORN:** How does somebody end up being put under that court-- court order? I mean, is it--

**MICHELLE CHAFFEE:** It--

**DORN:** --something had to be triggered somewhere?

**MICHELLE CHAFFEE:** Right. So for the most part, as in part of what our study shows, is that we have individuals who have developmental disabilities. So those would be individuals who were taken care of maybe by their parents and guardians, by their parents, and then their parents got elderly and no longer could take care of them. And there was no one there in the family. And so they need a guardian. We have a situation where we take care of both the mother who, who had the-- who had the son, the middle-aged son, because she has Alzheimer's and the son who is 40 years old, he has DD. So that being one example. We have many, many examples of individuals who are at the hospitals as our disposition shows. Probably the easiest way would be just to take a look at our case distribution-- disposition. You can see that on page 9, that's all where people are, the referral services, so the hospitals and physicians. Also, it might be a situation-- so the hospital has them. They have incapacities, maybe a brain-- a traumatic brain injury, Alzheimer's, mental, severe mental health issues that they can no longer make decisions. And so they need them for the medical decisions. But those are the types of situations that we do have individuals. And one of the things that would help, too, perhaps is, if you look on page 15, we had of the 333 people that we served last year, and those are the types of conditions they have. So we had 223 that had medicals-- of those 333-- 223 had medical conditions, 244 had cognitive impairments, 277 had mental health diagnosis, 98 were disability. And so you can see that we have 1,085 complex issues for 330 people. These are individuals who are-- are very much in need of care and oversight and-- and are difficult in finding placement and services for.

**DORN:** Thank you.

**WISHART:** Any additional questions? Senator Clements.

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**CLEMENTS:** Thank you, Vice Chair Wishart. Thank you, Ms. Chafee. The question I had was, are there other people who are guardians outside of your office?

**MICHELLE CHAFFEE:** Yes, guardians. So if you have like, for example, when an individual has a mother or father who suddenly have Alzheimer's, can no longer take care of themselves, then they would file a petition and become a guardian for their parents. And so that's done as well. And we provide the education for private and family guardians so that they know the process in how to oversee their care. That's required of anyone who has a new appointment as a guardian in the state. Last year, we educated 1,200 different individuals who were guardians or conservators for another-- either a family-- a family member or a friend or that type of thing.

**CLEMENTS:** Well, I asked that because I know someone who already is a guardian for her brother. And she has noticed a huge increase in the trouble with paperwork that she has to go through to report to you. They have to all report to you, don't they?

**MICHELLE CHAFFEE:** No, they report actually to the court.

**CLEMENTS:** They report to the court.

**MICHELLE CHAFFEE:** Yeah, we educate them on how to do that complicated paperwork.

**CLEMENTS:** [INAUDIBLE]

**MICHELLE CHAFFEE:** That happened because in Nebraska, there were two big issues in cases where family members and actually a guardian stole a tremendous amount of money from their wards. And so now the state has put into effect an oversight that's pretty strict, but it's because they have the oversight of all the person's funds and money. And so they report to the court annually exactly everything that was spent. So we provide penny-to-penny amounts for every cent we have spent on our wards, every penny that's come in, every penny that's gone out, so.

**CLEMENTS:** And I'm aware of that. It's been an extra real burden for an honest person--

**MICHELLE CHAFFEE:** Yes.

**CLEMENTS:** --to have to deal with when they weren't doing anything wrong and suddenly they have a real excess burden on themselves--

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**MICHELLE CHAFFEE:** Isn't that--

**CLEMENTS:** --caring for a family member that they're never going to steal from, but--

**MICHELLE CHAFFEE:** Yeah, yeah. And isn't that the-- the-- the way it is for almost all of us when we-- we have the burden of so much because--

**CLEMENTS:** Do you think that's increasing your demand in your office?

**MICHELLE CHAFFEE:** Yeah, I--

**CLEMENTS:** Public citizens not able to really handle the--

**MICHELLE CHAFFEE:** Not so much the finances--

**CLEMENTS:** --complexity.

**MICHELLE CHAFFEE:** --because we really go out of our way and tell her, anytime she wants to call, we actually have a lot of people who call and ask for help, and we support and try and show them how things are done and provide them with different places where they can actually go to get software and applications that can help them.

**CLEMENTS:** OK.

**MICHELLE CHAFFEE:** But I think the most important thing that has to do with why there's a challenge for us, for people who are family members taking care of their wards is the lack of mental health services. The challenges of taking care of a family member who has schizophrenia or in severe mental health with a lack of services that the state has, is the biggest challenge that we have in regards to people who want to no longer be the guardian. They just want to be the mother or the brother, or they want someone else to deal with the mental illness and the medical and the-- and all the things that happen.

**CLEMENTS:** All right. Thank you.

**WISHART:** Any additional questions? Seeing none, thank you.

**MICHELLE CHAFFEE:** OK. Thank you.

**WISHART:** Additional proponents? Any opponents? Anyone here in the neutral? Seeing none, Senator Kolterman, would like to close?

**KOLTERMAN:** Yeah, I wasn't going to say much, but a couple of things came to mind. Number one, you need to understand this was not brought

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to me by the courts. This was brought to me by the Hospital Association because they're seeing-- as you can see, there's a huge need in their arena. So we need to advocate for them as well as the hospitals. When we talk about-- there was a question. I think, Senator Clements, you asked a question about, you know, who pays the bill for that? Where does that money come from? You know, it's-- it's kind of ironic that the PBM bill that we had last week on the floor of the Legislature, there's a section in that bill that deals with what's called 340B. That-- that money that is provided, some of that money that's provided from the federal government has to be used to help indigent people pay their bills, people who don't have the money. If-- if we allow that to just continue to be used, it takes away from the hospital's ability to do other things that can help people as well. So I mean, it's kind of a duel. As I thought about this, it's kind of an interesting situation that that bill would come up about the same time as this. But in all those cases, we're all trying to solve a problem, how do we pay for those people that can't pay for themselves? And there are indigent people that even, they can't qualify for Medicaid and they don't have insurance. This is-- this is a way we can help the hospitals get them out of beds that aren't-- they're really not needed. They don't need to be in a bed. There's cheaper ways of doing it. So with that, I'd appreciate a green light on this. Let's-- let's get this done and advance it out of committee and go from there. Thank you.

**WISHART:** Any additional questions? Seeing none, we do have one letter of support for LB1049, none for opposition or neutral. That closes our hearing for LB1049 and we will open our hearing for LB1111. Welcome, Senator.

**McKINNEY:** Welcome. It's my first time in Appropriations for a bill so it's a little different.

**DORN:** You got to visit us all day long.

**McKINNEY:** I know.

**KOLTERMAN:** We'll go easy on you, Terrell.

**McKINNEY:** Well, thank you. Today, we're-- I'm here to discuss LB1111. This bill acknowledges that prison overcrowding is a great concern for the state of Nebraska and attention needs to be given to solutions that address this issue. Overcrowding in prisons affect the ability for states to provide necessary medical care and other essential services. Additionally, it can result in degrading practices like

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requiring individuals inside to sleep on floors. In many-- in many prisons and jails, those incarcerated have been exposed to dangerous environmental conditions like extreme heat or cold, contaminated food, and a lack of basic sanitation. One way to address this issue is to allocate resources that allow incarcerated individuals who are eligible to be placed in community facilities like transitional housing facilities, but also allocate resources to-- to decrease the amount of recidivism that we have in our state and also to prevent them from going inside in the first place. Under this bill, \$13 million will be appropriated from the Prison Overcrowding Contingency Fund to the Supreme Court. The Supreme Court shall use these funds for reentry and restorative justice programming for adult and juvenile offenders who are committed to a facility or for those released to commitment. In addition, funds can be allocated to reentry centers, transitional community and halfway housing, support of permanent housing and wraparound services, facility-based programming, including unit-based programming, community corrections, front and middle and back end services, interventions and family support. These type of services are needed to reduce recidivism rates and also alleviate the need to have another prison built where the goal will be to fill up another prison in order to make the multi-million dollar investment justified. Providing more resources to these doing-- to those doing the work will go a long way. For all of the reentry programs that I met with, the biggest consensus among them is that if they have more money, they could reach more people. For example, the reentry program at Metro Community College has a comprehensive program with impressive success rate that meets all the needs of individuals released from incarceration and put under their supervision. This-- this toiletry, transportation, and things like that, and they also hire staff that have been inside as well. And you also have other organizations like Black Men United, who has a restorative justice program; RISE who does work inside and out of the prisons; Compassionate Action; and many others. There are numerous programs like this across the state, but we need to devote the resources to them. I thought it was a great idea to sit aside-- to set aside this money last year, but now I think we need to take the next step and appropriate these resources to these types of services in the community so individuals will be prevented from going in, hopefully, and won't be returning. In the CJI report, option 9 identified a need to improve reentry practices for those being released from prison. This provision states that when individuals are released from prison and return to communities after a period of incarceration, they typically-- they typically face barriers that makes this transition back to society a difficult process. The working group recognized the need to reduce the barriers to facilitate more

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successful reentry to communities from incarceration. While I agree with this notion, recognize the problem, recognizing the problem and acknowledging the need is only the first step. We must work to alleviate these concerns for the betterment of our state as access to these resources should be available to those who need them. To reiterate, the need isn't just for adults. We must also provide resources to assist with our juvenile populations to prevent them from being incarcerated in an adult facility in the future. Under these facts, there is the notion that needs need to be given to youth to make less punitive things and in just making more rehabilitative. In all, I am a staunch proponent of being more proactive than reactive. I feel like I'm probably a repeating recording even when I talk to anybody about prisons, I always say that I'm strongly against ever building a prison. And ever, and the reason for that is because our state hasn't allocated or devoted the resources needed to prevent a prison ever being built. We haven't devoted the resources to communities where these individuals come from. If we put more money into these communities, that's where we will see the results. We were talking-- there was talks about the prison earlier and everything shows that even if we were to build another prison, we would have to build another prison, which could be close to a billion dollars. Why can't we put a billion dollars in communities like north and south Omaha? If you put that amount of much money into north and south Omaha, I won't say I guarantee, but I will be close to it to say you wouldn't need two more prisons in the state of Nebraska. And with that, I'll take any more questions.

**WISHART:** Thank you. Before we go to questions, Senator, did you spell your name?

**McKINNEY:** Oh, I didn't. T-e-r-r-e-l-l M-c-K-i-n-n-e-y.

**WISHART:** Great. Do we have any questions?

**DORN:** Yeah, I mean, go ahead.

**WISHART:** Yes. Senator Clements.

**CLEMENTS:** Thank you, Vice Chair, and thank you, Senator McKinney. Looking at the fiscal note, it said this would require the Supreme Court to create new programs. Have you discussed with the Supreme Court organization if they're willing to cooperate with this?



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**McKINNEY:** Not directly yet, but there is a program-- Program 403 which is-- which deals with community corrections, which is why I appropriated it to the Supreme Court.

**CLEMENTS:** All right. I'm just not sure who-- who would be handling these funds.

**McKINNEY:** Supreme Court. We could work out the particulars about applications, reporting, those things as well.

**CLEMENTS:** All right. Well, I think I'll-- you probably have some other people testifying--

**McKINNEY:** Yes.

**CLEMENTS:** --who-- who have the programming of these sorts. All right, I'll wait to hear that. Thank you.

**McKINNEY:** No problem.

**WISHART:** Senator Hilkemann and then Senator Dorn.

**HILKEMANN:** Terrell, I'm very familiar with the RISE program and support it and been one of their counselors. You're not-- you're-- you're not advocating that some of this money would be used for RISE, are you?

**McKINNEY:** I'm advocating for some of this money to be used for anybody that's doing that type of work in our state.

**HILKEMANN:** All right.

**WISHART:** Senator Dorn.

**DORN:** Thank you. Thank you, Chairman Wishart, and thank you for being here, Senator McKinney. I believe this-- this Prison Overcrowding Contingency Fund, that was part of our discussion when we had on the floor last year. I think Senator Wayne helped bring this about that we--

**McKINNEY:** Yes.

**DORN:** --put this-- basically set it aside. But if I-- if I remember correct, there last year there wasn't any, I call it any guidelines to how it was going to be used or any of that. And that's what you're bringing today here, basically--

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**McKINNEY:** Yes.

**DORN:** --is a-- the start of a plan so that you can-- we can use those funds for that.

**McKINNEY:** Yes.

**DORN:** But this-- this right now, I guess I really haven't looked at it that much, but it's a one-time funding. It doesn't discuss anything or we-- we haven't as a body put more than that \$15 million in there. So there's not ongoing--

**McKINNEY:** No.

**DORN:** -- so those projects would have to be--

**McKINNEY:** Right, and--

**DORN:** --that type of--

**McKINNEY:** I'm-- I'm also open to, if the committee thinks it is fair or needed, we could allocate these resources over more spread out period of time if-- if that is what's needed. So instead of just fleshing it out, maybe doing it over a period of time, I'm open to that as well.

**DORN:** But what you're really coming today is we have that money there.

**McKINNEY:** Yes.

**DORN:** That money hasn't been--

**McKINNEY:** Allocated.

**DORN:** --allocated and you're starting, I call it, the process of getting this to where we can use this out in, I call it, state of Nebraska.

**McKINNEY:** Yes.

**DORN:** OK.

**WISHART:** Great. Any additional questions? I have one, Senator, thanks for being here. When you're talking about restorative justice, and I think I see Jim back there. You know, there's been conversations on the floor of the Legislature about making sure that victims are not left behind in the conversations around public safety and criminal

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justice reform. And a lot of the restorative justice work gives a person who has committed a crime the opportunity to pay restitution to a victim. Can you just talk a little to that and I know that there will be somebody following you who can talk to that as well.

**McKINNEY:** So there-- even in the CJI report, there was one of the options was to prioritize making sure that victims were compensated when things would happen-- would happen. And I know other organizations across the state work not just only with those who end up in our prisons, but also with the victims and families to sometimes create some type of mediation process so both sides could heal and go forward.

**WISHART:** Yeah. So I-- you know, when I think about these funds in restorative justice, I think about the investment that this would make in victims as well.

**McKINNEY:** Yes.

**WISHART:** OK.

**McKINNEY:** No problem.

**WISHART:** Any additional questions? Will you be here to close, Senator?

**McKINNEY:** Yes.

**WISHART:** OK, great. We will open the hearing up to proponents of LB1111. Good evening. Welcome.

**WILLIE HAMILTON:** Welcome. Good afternoon, I'm a little sleepy. My name is Willie Hamilton. That's W-i-l-l-i-e H-a-m-i-l-t-o-n. I'm writing in today in support of LB1111. My name is, again, Willie Hamilton. I'm the founder and executive director of Black Men United in Omaha. To ensure the existence to success of future generations, we must place special emphasis on juvenile offenders. Since the rate of African-American youth are incarcerated growing as rapidly as that of adult offenders, it is crucial that policymakers establish grants to improve workplace, community transitional training for incarcerated youth. These juveniles need skills that would give them the tool to survive and thrive in society and be able to contribute to it. Education, vocational training, emotional counseling and drug treatment are among the services our state must provide. All young people deserve to live a quality adult life, including those who have been incarcerated and those who have never been caught up in the juvenile justice system. It is equally important to the government to

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fund projects that reach out to the youth that provide juveniles in inner cities with esteem building skills, alternatives to criminal activities including after-school programs with mentoring organizations. Reentry and restorative justice programs that help returning adult men and women navigate through the maze of returning to society to their families, while at the same time building a new and successful life. Just to name-- just to name a few staggering statistics. One in three black males can expect to go to prison in his lifetime. Black women born today are five times more likely to go to prison in their lifetime than a black woman born in 1974. On any given day, every-- every 14 black children have 1 parent in prison. Black males make up 43.9 percent of the state and federal prison population, but only make up 12.3 percent of the population. Years of research have revealed the many key barriers that inhibit someone's ability to be successful upon reentry and that the process of reentry should begin at the day of incarceration. While an individual is incarcerated, Corrections staff and similar programs should strive to help the individual acquire a pro social world view and positive community relationships and overcome any existing substance abuse or mental health concerns. It is of ultimate importance to equip those returning from prison, whether they be juveniles or adults, with the skill, the character, the practical knowledge necessary to be successful upon reintegration into the community. I'll leave you with this. Often the voice of conscience whispers, often we silence it, always we have to pay. Anonymous. Thank you. If you have any questions, I'd be glad to answer them.

**WISHART:** Thank you, Willie. Any questions? Seeing none, thank you for being here and for your patience. Next proponent.

**JAMES JONES:** Good afternoon or evening. James Jones, J-a-m-e-s J-o-n-e-s. I'm the executive director of the Community Justice Center, which is a nonprofit, restorative justice agency. So with that, I'll just go ahead and start my statement. I founded the Community Justice Center over 20 years ago. The Community Justice Center is a restorative justice agency that strives to repair harm and rebuild broken relationships in the community, working towards healing in the aftermath of crime or, in our words, harm. That's how we phrase it. When you commit a crime, you're actually committing a harm. We have to call it what it is, it's to the point. When I started this agency, I didn't know what I was doing. I founded a peer-ran agency because back then we didn't use the word peer support and programming. But we-- when I started this agency in the last six years-- I'm sorry, in the last six years, we've served over 6,000 justice-involved individuals in our communities and Correction institutions and-- and in

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communities under community supervision, all facilitated by just formally justice-involved individuals. In the past 20 years, ladies and gentlemen, we have served over 12,000 justice-involved individuals without restorative justice intervention. Our restorative justice intervention is a nonclinical program that's provided all 12 probation districts across the state and all correctional institutions and in Douglas County Jail. Restorative Justice asks a simple two-part question. What harm was done, and what needs to be done to correct that harm? And when you ask that simple question, ladies and gentlemen, you elevate victims to their proper place in the justice system. Victims in our current criminal justice system are a secondary thought. How? The plea deals, etcetera, etcetera, etcetera. So when you ask what harm was done, victims are elevated to their proper role within the justice system. Restorative Justice and the Community Justice Center moves harm to healing to hope. And that's what we've been doing for the last 20 years. Our program serves all stakeholders, victims, justice-involved individuals in the community. Restorative Justice states that crime damages relationships and we must take responsibility and be accountable to the-- for those individuals and to the communities for that harm, by-- for our-- by our choices. Restorative Justice program is a valuable tool in our justice education, as well as habilitating individuals, not rehabilitating, habilitating. We got it wrong, and that's why we have poor results that we have now. For example, more than 81 percent of our participants have not recidivated over a 20-year period. That's our average recidivism rate, 19 percent for more than 12,000 participants. This was based on published and soon to be published evaluations by the International Journal on Criminal-- Comparison Criminology and as analyzed by the University of Nebraska, ladies and gentlemen. We know that more than 95 percent of all currently incarcerated people will return to our communities at some point. We have a choice. Do we want to return individuals as bad neighbors or good ones? Assessing an effective programming and reentry support services is essential to success for individuals returning to our communities. If we do not invest in these success-- we must invest in success. Community Justice Center supports LB1111 because we believe in evidence-based results and our program of restorative justice, as well as the need for solid reentry support services. Ladies and gentlemen, behind me are fairly new agencies over the years. We have the resources. We need to fund them and we can make a huge difference in recidivism, lowering-- safe for communities and not, frankly, wasting money on new prisons. There's a better way. It's proven. Ladies and gentlemen, I provided additional information in that packet, as well as our research paper

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that was published in 2018. Thank you, and I hope to answer any questions if you have any. Thank you.

**WISHART:** Any questions? James, I do have a question for you.

**JAMES JONES:** Yes.

**WISHART:** I've-- I've known about your program for a while. I think it's exactly the type of investments that the state should be making in because of what you said that it's truly restorative. If the Legislature were to invest in programs like what we're hearing about today, but allow for the expansion of providing supports for young people who are creating harm on others, but at a place where they're not yet in the juvenile justice system, the truly, truly preventative when you're seeing it in the middle school level, for example. Something happens, harm is created, and you know that that can build on itself. Would your organization and others that you know of have the capacity to-- to direct some of your supports in a real preventative effort before it gets to a point where somebody enters that system?

**JAMES JONES:** Yes, ma'am. They-- there are so many programs, U-Turn, Black Men United, everybody who's trained in restorative justice principles and values and facilitation in schools, middle schools, having those resources there. It's-- it's-- it's-- it's-- it's an explosion all across the country that that's happening, but it's not happening here. I don't know why. It needs to be-- it needs to be more. And I know it's slow because anything new is kind of slow, but I just don't understand it. I just don't understand it. For the last 20 years, we've seen the results. But Restorative Justice is known. People consider it. And this is a miss-- this is wrong. Restorative Justice is not soft on crime. We hold offenders more accountable than our current system because when you elevate the voice of restitution of victims, we do it through our resources that we allow victims to go to our website and anonymously share how they was impacted. Those voices reach thousands of justice-involved individuals, thousands, on probation and prisons all across the state. And when you get that understanding, oh, this is the harm that I caused, guess what-- guess what you change. That behavior. And I respon-- I'm responsible for this type of damage because when I went to court, what law you broke and excuse my language, how we're going to punish your ass. And you go to prison. Victim goes their way, the offender goes their way, and the two sides should never meet and the harm is continued and it repeats. It's not-- it's not difficult and it's cost-effective. It really is cost-effective. You're-- what you spend on restorative justice and

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other services that are behind me, \$1 you spent, you'll save \$7 on the backend. Omaha, the incarceration rate from north Omaha, if you would have spent those billions of dollars to incarcerate those people, the billions, and if you spent that money up front, we wouldn't be in this situation through more restorative justice programs. So I'm sorry about-- sorry about that.

**WISHART:** Senator Dorn has a question.

**DORN:** Thank you, Senator Wishart. Thanks for being here. I guess, and don't-- I don't know if I'm asking this right. How do people-- or how do you get in contact with people or how do people--

**JAMES JONES:** How victims?

**DORN:** --become part of this program?

**JAMES JONES:** How victims or the justice-involved individuals?

**DORN:** Either one, how--

**JAMES JONES:** Well--

**DORN:** I mean, you said 12,000--

**JAMES JONES:** Yes.

**DORN:** --participants. How--

**JAMES JONES:** 2001, at-- at the time, Harold Clarke, the old director of Corrections years ago, he allowed me to do this experiment and allowed me to come in prisons, and it just took off like wildflower-- power-- wildfire. And then probation in 2006, yes, 2006, said, Jim, we've been hearing about this program you do in prisons. We're starting these alternatives to incarceration programs, day reporting centers, drug, you know, and can you do it for us? And that paper, the research paper that's in your packet, again, peer-reviewed, international experts ran through our numbers. We cut the numbers of people on probation in half over a six-year period. Go to page 9 of that international journal, page 9, you'll see a graph what they did from year one to year six. And you will see a comparison that will-- excuse my-- it'll blow your mind. And now we started in Lincoln, like I said in 2006, then Omaha, then District 9, District 6, District 7. The program you doing? Don't cheat us. We want that same effective program for us. So that's how that happened. It's kind of-- and in victims. Let me-- let me get back to the victims. We-- every resource

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in the state of Nebraska, every resource nationally can be tapped in from our website. And then when victims see our website, there's a confidential box. If you want to share how you was harmed, how you was damaged, please share your voice. We edit it to make sure confidentiality is upheld. Their safety is number one. And then every single class we teach, we teach four classes on Saturdays in Nebraska. We teach twice in prison during the week, and it's very difficult to keep the doors open. I'm sorry. It's just asinine. I don't understand it. We can make our community safer, stronger and better.

**WISHART:** Thank you, James. Any additional questions? Senator Hilkemann.

**HILKEMANN:** So your program, you're with-- with the people who've been incarcerated, is that or--

**JAMES JONES:** And on probation, both.

**HILKEMANN:** Is your program such that it could be from the very get-go, the alternative to incarceration?

**JAMES JONES:** At the initial point of arrest?

**HILKEMANN:** Well, you know, in the whole-- in the whole punishment process.

**JAMES JONES:** Um-hum. Well, like in Lincoln, the Mediation Center has done a program. I met with them 15 years ago when they-- they did victim offender dialogue. That's the number one format restorative justice comes in this country. Victim offender dialogue where the victim agrees to sit down with the offender, and they talk about the harm and restitution, etcetera. But they get 26 cases a year at that point of harm, because victims withdraw. Victims, they-- 52 percent of all violent crimes in the U.S. do not report the crime because they feel like when they get into the system, the judicial system, they're going to be punished by the system as well. You see what I mean? So we provide them that avenue, a safe voice to share and not only touch the person maybe you have-- that offended you, but your voice carries. You touch thousands and thousands of justice-involved individuals that will understand what you've gone through as a human being. It's broken relationships and damaged relationship that we address. We just provide them the avenue and a voice that they a lot of times don't have.

**WISHART:** Thank you, James. Thanks for being here.



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**JAMES JONES:** Thanks for the questions.

**WISHART:** Thank you for being here.

**JAMES JONES:** We can do a better job. Thank you.

**WISHART:** Additional proponents?

**DIANE GOOD-COLLINS:** Good afternoon. My name--

**WISHART:** Good afternoon.

**DIANE GOOD-COLLINS:** --is Diane Good-Collins, D-i-a-n-e G-o-o-d-C-o-l-l-i-n-s. I am the director of the 180 Re-entry Assistance Program at Metropolitan Community College, and I'm here to testify on behalf of MCC's general support of LB1111. Since February 2015, MCC has provided education and reentry assistance to over 7,000-- or 7,200 people through 180 RAP, a multifaceted program that provides service and support to the incarcerated and reentry populations. MCC's goal is to ensure the justice-involved community has enhanced access to training and workforce development to achieve their education and employment goals so they do not recidivate. In addition to providing services inside Nebraska correctional facilities, MCC created the largest on-campus reentry center nationwide. We are considered national experts and receive best practice requests regularly from other higher ed institutions seeking to duplicate our services across the U.S. MCC's Re-entry Center, which houses a job center, computer center, a education center and pantry, is dedicated to providing transition support to the reentry population in Nebraska. In 2021, MCC's Job Center served over 1,600 people with an 85 percent employment rate. These impressive outcomes are largely due to the fact that MCC has built strong support among over 200 employers who understand the value of this hidden workforce. The Re-entry Pantry served 4,710 visitors last year. With limited access to food, hygiene, and clothing, the reentry population faces additional barriers to a successful transition to the community. MCC helps the incarcerated and reentry populations identify and anticipate potential barriers and develop plans to overcome them. However, with current restricted funding, MCC and other Nebraska community resources and agencies are not being optimized to support our correctional and reentry efforts statewide. With additional funding MCC could-- with additional funding, MCC could readily expand training activities to prepare greater numbers for release from the Nebraska prisons and their transition to the workforce, increase technology access inside Nebraska prisons, expand coaching and peer support to serve increased

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numbers and address short- and long-term needs, expand the Reentry Job Center to meet growing need, and provide technical assistance to other community colleges in Nebraska so that they could start their own Re-entry Job Center to address workforce needs statewide. MCC looks forward to continuing to provide reentry services and support to the incarcerated and reentry populations in Nebraska and stands prepared to expand reentry services if requested. On behalf of Metropolitan Community College, thank you for your opportunity to testify in support of LB1111.

**HILKEMANN:** OK, any other-- are there questions? Senator Dorn.

**DORN:** Thank you, Senator Hilkemann. Thank you for being here. But you had down there increase technology access inside of the Nebraska prison. Earlier, we heard from somebody that testified that we're really not having that.

**DIANE GOOD-COLLINS:** I heard that.

**DORN:** Yeah. I mean, is this something that it's because of lack of funding or it's because of staffing issues right now? Or, I mean, I don't know why. I'm just curious.

**DIANE GOOD-COLLINS:** Sure. There's two reasons. There is-- OK, so lack of funding is one of the reasons that we have limited access to technology training inside the prisons. We recently received a Google Impact Nebraska grant, and we have a pilot program going on inside of the Omaha Correctional Center, and we are offering an I.T. tech academy not using the Internet, but on a standalone server to 10 individuals at that facility. Right now, we're pursuing other funding to be able to expand that capacity at another correctional facility. I just had a conversation today with Cornhusker State Industries within Corrections to be able to partner with them at one of the other facilities to hopefully expand that. But as far as the Internet, the Internet is not allowed inside the prisons, as you know. However, there are workarounds. But what limits us from being able to expand our service and support is funding.

**DORN:** OK, thank you.

**HILKEMANN:** Additional questions? Thank you very much for coming.

**JASMINE HARRIS:** Good evening. Senator Hilkemann, are you chairing today?

**HILKEMANN:** I'm-- I--

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**JASMINE HARRIS:** Good evening, Senator--

**HILKEMANN:** --got me at this point.

**JASMINE HARRIS:** --Hilkemann and members of the Appropriations Committee. My name is Jasmine Harris, J-a-s-m-i-n-e- H-a-r-r-i-s. I am the director of public policy and advocacy with RISE. I am here today on our behalf to show support for LB1111. I want to preface. We have collaborated with these organizations who have presented before me and we know the importance of the work that they do and we are here to tout our horns as well. RISE is the largest nonprofit organization in Nebraska, focused solely on rehabilitative programming in prisons and reentry support. At RISE, transformation starts prerelease and continues postrelease. Our inside-out model bridges incarceration to the community and considers all the critical steps in that journey. We prepare and train people for each phase through intensive character development, employment readiness, job creation through entrepreneurship, family programming, and case management. We transform people in the community by building awareness and empathy that leads to support and opportunity. These connections heal families, create employment pathways, and lower recidivism. The mission of RISE is to break generational cycles of incarceration. With the continuation of overcrowding in state correctional facilities and higher rates of reincarceration, funding for effective, evidence-based reentry programming must be appropriated. It is time for the state to adopt empirically sound, evidence-based practices that truly prepare Nebraskans for reentry from incarceration. Over the past five years, RISE has provided such reentry services to hundreds of returning Nebraskans through a comprehensive inside-out reentry model and stands as a program in the state offering a continuum of care. RISE provides six months of intensive in-prison programming based on evidence-based practices that result in significant growth in the areas of character development, such as positive behavior, hope, empowerment, coping, decision making and even employment readiness. Upon completion of this program, participants begin a yearlong process of reentry planning and preparation. Reentry planning and preparation is challenging and complex and requires dedicated staffing, time and trust between the incarcerated individuals and reentry specialists. Most importantly, RISE understands that reentry does not stop at the door. It does not stop once a person leaves prison. Reentry requires someone to walk with an individual returning home and providing support, hope and encouragement, not just a punishment when a mistake is made. Because RISE begins providing reentry services prior to release, relationships are built and trust is formed and participants experience a continuum of reentry care that is unrivaled. Our reentry services are provided

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in a way that matches the risks, needs and responsivity of each participant, and this is truly individualized case management. RISE ensures that every participant has safe housing upon release, basic needs and support in the form of around-the-clock case management, crisis intervention and RISE wants to see participants succeed and keep communities safe. This model of operations that we have adopted has yielded much success. However, reentry remains a crisis in the state, and it must be treated as such. Without providing adequate reentry services, the revolving door of our criminal justice system will never stop spinning. As of today, RISE provides an evidence-based, inside-out reentry programming and services returning to Nebraskans, and we've included more programming. We were highlighted last night on KETV with our Business Academy that has started. We've also started a family programming and reunification, and we're positioned to do more. RISE has the infrastructure, experience, data, and knowledge to support existing reentry programming and services along with future needs of the population. With additional funding and support from senators in the state, we're ready to lead in the state's reentry efforts, reduce recidivism, and keep Nebraska communities safe. For these reasons, this is why we support LB1111 and we hope that you will advance this out into the budget and really capitalize on the opportunity that is presented now. There were-- there was multiple, multiple people in here testifying before this bill came up. In my background in public health, we have to take that prevention and proactive approach; otherwise, we will continue to be in the position that we're in. And with that, I'll take any questions.

**WISHART:** Any questions? Senator Pahls. Excuse me, Senator Hilkemann.

**HILKEMANN:** Thank you for being here. As you well know, I love the RISE program and I-- I've been one of your participants. My wife came down, brought some friends to be-- help out with that RISE program. But I-- can you take state money?

**JASMINE HARRIS:** Yes. Right now we are a nonprofit. We have a majority of our funding coming from philanthropic dollars.

**HILKEMANN:** Right.

**JASMINE HARRIS:** We are a recent recipient of the VOS grant from the Department of Corrections, so we need that sustainable funding.

**HILKEMANN:** I didn't--

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**JASMINE HARRIS:** And the state needs to put skin in the game, as we say to our people. If you're really wanting to be successful, you've got to put skin in the game. And I think for the state to have an impact on everything that is happening in our systems, they have to put skin in the game.

**HILKEMANN:** So when-- I-- I remember when this-- I first was exposed to your program clear down and when it was in Texas, the PEP program. And-- and so when did you start being able to take state funding?

**JASMINE HARRIS:** We've always been able to.

**HILKEMANN:** Oh.

**JASMINE HARRIS:** We've always been a 501(c)(3). We still-- you're talking about the Texas program, prison reentry program.

**HILKEMANN:** PEP.

**JASMINE HARRIS:** Um-hum. And we started off as a branch off from that with the defined national program.

**HILKEMANN:** Right.

**JASMINE HARRIS:** We broke away from them in-- at the end of 2018 and became our own or nonprofit here in the state of Nebraska in 2019. So we've always, as a nonprofit, been able to take state funding. It just, is the state ready to do that? We are subgrantees on a couple of other initiatives that are going through the state, so there's a fatherhood initiative through the Department of Health and Human Services. We're a subgrantee with Lutheran Family Services. So we are primed and ready to be able to receive dollars and do the work that we do.

**HILKEMANN:** But I know when the RISE came here with the Stinsons were the number one underwriters for it at that time.

**JASMINE HARRIS:** Ken Stinson is still our Board Chair.

**HILKEMANN:** OK.

**JASMINE HARRIS:** So he's still supportive and I'm also included in the handouts, I know from our CEO, Jeremy Bouman, who wasn't able to make it today, which talks about the work that we do, programming that we have and how we're standing ready and able to continue that work and

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grow that work through supportive housing, through in-unit programming and such matters.

**HILKEMANN:** I'll be glad to get rid of it with this COVID so we can go back to (INAUDIBLE) programs live.

**JASMINE HARRIS:** We have digital opportunities for volunteers, if that's something that you would like to participate in.

**WISHART:** Any additional questions? Senator Clements.

**CLEMENTS:** Thank you, Ms. Harris. I have not-- I've heard of RISE, but not real familiar-- do some of your efforts help people complete their programming so they're eligible to, for release earlier than they would be if they just sat without your services?

**JASMINE HARRIS:** We are not a mandated program, so people have to opt in to take it. We do go to parole hearings in support of our participants and hopefully that weighs in a positive way when it's coming up to their decision to be able to get parole. But we don't-- we're not as a program where people can get time taken off for taking our program.

**CLEMENTS:** This is not an official program that counts toward credits or earlier release.

**JASMINE HARRIS:** No.

**CLEMENTS:** And so you try to support people and especially on the reentry and try to keep them from going back in, is that one of your big focuses?

**JASMINE HARRIS:** Yes. And what we say, we're a high-touch program, so we have really intense case management for individuals. We're picking people up if they need a ride from that parole hearing. They're getting welcome-home bags. We are literally walking beside them as they are reentering. As some of the other organizations said, we hire peers who have actually gone through our program, who are people who were previously incarcerated because there's just something different about someone who's actually been impacted and being able to provide someone else coming out with that same kind of support to be able to connect with them on a different level.

**CLEMENTS:** You work with those on probation--

**JASMINE HARRIS:** We have not extended into the probation realm.

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**CLEMENTS:** On the inside?

**JASMINE HARRIS:** It's normally inside--

**CLEMENTS:** Inside.

**JASMINE HARRIS:** --and what we will also be starting is a pretrial kind of program where we're looking at people who are coming in and out of the jails as well.

**CLEMENTS:** Thank you.

**JASMINE HARRIS:** You're welcome.

**WISHART:** Any additional questions? Seeing none, thank you.

**JASMINE HARRIS:** Thank you.

**WISHART:** Any additional proponents?

**COREY FOSTER:** Hello, my name is Corey Foster, local entrepreneur, and--

**WISHART:** Corey, will you spell your name?

**DORN:** Spell your name.

**COREY FOSTER:** Corey, C-o-r-e-y, Foster, F-o-s-t-e-r.

**WISHART:** Thank you.

**COREY FOSTER:** I'm a proponent for LB1111. I just feel like the bill is needed for funds for prison reform programs as more funds allocated for, you know, reentry and preventative, you know, programs like RISE and Black Men United, U-Turn and others. Also believe that there should be funds allocated for not only educational programs for adults, but also for the youth. And I plan on proposing some things under the umbrella of maybe Black Men United for youth, for vocational training and things like that. Also, I believe employer incentives for hiring ex-felons and prisoners would make a lot of sense. And, you know, and I know they're already out there, but, you know, maybe put some smaller companies, entrepreneurs and stuff like that, instead of being a big corporation, maybe make it easier for a smaller company like mine where I'm a contractor, I can have a program where, you know, I can get an incentive for reentry for some ex-felons and prisoners, drug rehab facilities funded by the state. And I think, I don't think there's any, you know, so that would be definitely

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crucial. And just like I said, reentry home facilities, contractor vocational programs-- already covered that. And then more programs for youth and young adults with vocational skills. And that would, you know, like training people with more hands-on skills. I see those statistics-- statistics all over that say, you know, more hands-on skills are being taken out of, you know, regular education and schools. And I think, you know, a lot of these young adults and, and kids in general want to be more hands on and get a direct, you know, reciprocal of their education as opposed to going into the job market. You know, whether-- there is nothing wrong with a psychology degree, but you know, you can't necessarily be a psychology major and then go get a high-paying job right out-- right out of prison or anything like that. And that's not a knock on it. It's just kind of the facts. It would lead to, you know, more vocational skills will lead to higher hiring rates, higher wages which therefore would lead to less poverty in a lot of these areas and less prison population and reentry, so. And then, you know, just to make note, Omaha has the-- or has had in the last few years number one poverty rate for children under 13. I think that's-- that's a big, you know, big part of that is, is no two-parent households, you know, so. Also number three for blacks, you know, quote unquote, so that's the same, you know, kind of results that you get with high prison population and poverty. Also number three, murder rate for black men. We all know, you know, poverty equals-- you know, low job, low skills equals poverty, you know, less opportunities. And you know, with poverty becomes more just violent crimes, period. And we're also Omaha's number in the top 10 for graduation disparities between, you know, blacks and whites, not to put blacks and whites against each other but that's just how it is in Omaha. But we have some of the highest graduation rates for nonblack students in the country. So those are facts. And you know, and all this just kind of feeds the prison to-- I mean, the preschool to prison pipeline. And those are all statistics that support that, especially for Omaha. We being so small as far as our numbers and population, but our graduation rates are very small. Our crime rates are very high for minorities, so. And that's basically why I think we need LB1111. It will prevent-- and like several people have said, the more you put into the kids and the young adults and reentry because, you know, you don't want to throw somebody in the trash for making a mistake or going to prison. I think it'll prevent more-- more-- more prison populations later. So that's pretty much it, so.

**WISHART:** Thank you.

**HILKEMANN:** Thanks.



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**COREY FOSTER:** Yeah.

**WISHART:** Thanks for being here--

**COREY FOSTER:** Yeah.

**WISHART:** --and for your patience. It's been a long day.

**COREY FOSTER:** It's been long, yeah, yeah, yeah.

**WISHART:** Sticking with that.

**COREY FOSTER:** It's all right, all right.

**WISHART:** Any questions from the committee? Seeing none, thank you.

**COREY FOSTER:** Yeah, thank you.

**WISHART:** Additional proponents? Welcome.

**COLLEEN CANNON:** Hello. OK. Well, good evening. My name is Colleen Cannon, that is spelled C-o-l-l-e-e-n C-a-n-n-o-n. As a result of being in an abusive relationship for 17 years, on-- on April 6 of 2004, I woke up in a cell at Douglas County, facing life in prison. On November 4, 2015, I was sent to NCCW being convicted in-- sorry, involuntary manslaughter and use of a deadly weapon. I was given 7 to 10 years for the manslaughter charge and a year for the use of a deadly weapon. Prior to this life-changing event, I lived most of my life in north Omaha. I graduated from Central High School. I had a great job that I worked for at a bank-- First National Bank for 14 years. Also, during the holiday seasons, I worked at the Salvation Army for 11 years. I have seven wonderful kids along with grandchildren. I was not only a role model with my family, but within my community as well. So I never foreseen a day that I would be standing here in front of the Nebraska legislators, state senators talking about something that I'm passionate about. This bill hits home for me in so many different levels. One of those levels was watching my children having to do the time with me. My three younger children ended up in foster care and my oldest daughter had to step up playing mother to her other siblings. I was blessed to have a great support system that made sure that my children came to visit me, but not everyone has that support. So to me, reentry starts the minute when you walk through the gate. I was told by a case manager that once-- once released, preparation begins on the first day of incarceration. But is it really? Once you're-- once you are incarcerated, you must take an assessment with your assigned case manager. The case manager

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then comes up with the reentry plan-- plan based on your risk and your needs. You update that plan yearly or depending on your release date. In my situation, I always scored at a low risk to reoffend, so nothing ever really got updated. My background showed that I had a strong work background and a strong support system. So to-- I'm sorry, so to the upper-- upper officials, they show that the case manager was really doing their job. During incarceration, you should be provided with services such as mental health, substance use, education, employment, life skills and other programs that should be increased-- increase the likely of the success of one's person-- of one's release. In my case, I needed the mental health portion more than anything. I thought that it would be a must because of the nature of my crime, but after writing numerous-- numerous-- I'm sorry, inmate request forms to mental health for over two years, finally, I was able to see a psychiatrist and they decided by handling-- I'm sorry, they handle me by putting me on medication that would only help me sleep at night. But what is that really helping? So that brings me here today. Reentry is defined as a transition of one individual from a corrective setting background into the community. However, a recent individual often returns to un-- underserved communities and face a whole range of barriers that make a successful reentry difficult. Many experience the difficulties meeting as such-- meeting needs, such as employment, behavior, mental health, housing, transportation and other effective, ineffective reentry programs. I returned home and it was-- when I returned home, it was hard for me to find a job. Yes, I had it-- yes, I had a great work ethic, background and the experience to back up my resume. But again, the nature of my crime changed everything for me. While I was incarcerated, I did progress-- did all the programs. I went through RISE. I also participated through Metro when I got to work release. I also participated in Mr. Jim Jones's class as well. And so today I find myself working for Black Men United. So I just feel like I support this bill, LB1111, because the funding needs to be there, and I'm an example, one, if the funding is there, you can get out and be successful.

**WISHART:** Thank you for being here tonight. Any questions from the committee? Seeing none, thank you.

**COLLEEN CANNON:** OK, thank you.

**WISHART:** Additional proponents? Good evening.

**TONY REYNOLDS:** Good evening. Long day. Tony Reynolds, T-o-n-y R-e-y-n-o-l-d-s, and I'm in support of the bill, LB1111. I want to begin by saying I'm in support of this bill and it's for numerous--

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numerous reasons. Today, there will be people who will come before you agreeing or disagreeing with this bill and all that is OK, but be fair and open to other viewpoints which are different from yours. Having appropriate resources for people coming back into society is a vital component in their transition. There are three major obstacles that will always be present. These obstacles when inmates-- ex-offenders come back into society are employment, housing and education. We all know that securing employment can be very important for ex-offenders and can significantly reduce the chance of re-offending. But what if the offender never had a job or even a work history, what steps are being taken to prepare them all for this? Employment readiness encompasses several areas, including soft skills, cogni-- cognitive skills and industry recognized training and certification that employers expect from applicants. Employment readiness, employability pertains to both the offender's ability to obtain and retain a job. Reentry programs should focus on both. The ability to gain employment and the ability to attain employment are two also very different skill sets the offender must acquire to be successful in the work-- in the workforce. The next obstacle is houses and the restrictions that are set-- set in place against them. Ex-offenders with drug convictions are banned for life from public housing. Then private housing, they use criminal background checks to restrict former offenders from even getting housing. Housing is one of the most important factor in a for-- in a former offender's life immediately after release. One of the barriers is the lack of employment and therefore income. Not having housing also becomes a barrier to employment. It is extremely difficult for former offenders to obtain one without the other since most of them starts out with neither. Lastly, is education. It's the link that ties all three together. I was taught to chase the education and the money will follow, whether it's going back to school or learn a trade to better your life and feel good while doing it. Apprenticeships are an excellent way to learn a set of skills that are high in demand among employers. However, it tends to be ex-offender friendly, offering a second chance to employment. And if you're not, and you're seriously determined to find a job, in an apprenticeship may be the way to go for you. I felt a need to speak on this issue for myself doing ten years in federal prison and knowing the struggle that comes with it when it's time to reenter society. I never had a problem working and always loved learning, so I had a plan for what I needed to do once I left prison. Yes, I knew it was going to be a process, but it didn't-- but I didn't let that bother me or discourage me. I didn't care if it took me five years or ten years to get there, I knew that I didn't want to waste time achieving that. Once released, I joined the Carpenters Union, at the same time I started my associate

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degree at ITT for electrical engineering. I was working at a full-time job and taking classes at night. Learned as much as I could as fast as I could. I knew that I was playing catch up. Will also allow others to see what was possible from getting released from prison. After graduation, numerous opportunities began to open up for me. A person with several options can begin to shape his future. Well, I decided to go back to school at Baylor University for bachelor in project management. Graduating magna cum laude as a PMP professional, becoming a licensed journeyman in both carpentry and electrical, while becoming the fifth black Class A contractor in Nebraska, to owning my own construction company while setting up my own nonprofit 501(c)(3) called Promise Land Development, which is helping with people, transitional housing for people getting out of prison. There are lots of people who want to succeed and become a productive member of society, but don't have the resources to enable them to do so. This bill is a major issue to help others obtain their goals because skills outweigh criminal records. And that's pretty much everything.

**KOLTERMAN:** I have a question.

**WISHART:** Senator Kolterman.

**KOLTERMAN:** First of all, thanks for being here.

**TONY REYNOLDS:** Not a problem.

**KOLTERMAN:** Appreciate your hard work and dedication to turn your life around.

**TONY REYNOLDS:** Thank you.

**KOLTERMAN:** You talk about the labor unions, the Carpenters Union, Electrical Union, both of those. Do they have any-- they don't have anything again-- do they help rehabilitate people that are coming out of prisons?

**TONY REYNOLDS:** Actually--

**KOLTERMAN:** Are they open to that more?

**TONY REYNOLDS:** That's just the way I went. Actually, I already got approved by the city of Nebraska to become a teacher to-- to be able to teach the trades to people coming home. So I can also-- I can teach electrical, carpentry. I have a master plumber, master H-VAC technician to help me with people coming out so they can have that to fall back on. I used my-- my company to hire felons so they can

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actually have employment. Also-- I work for the nonprofit. I'm working, got my 501(c)(3) which working on the housing for transitional. So we know that's a big-- a big aspect into coming out because they don't have a place to go. I know people get back into other bad situations that they don't want to and stuff comes from that. So with the transitional housing part, they have a place to go, stay [INAUDIBLE] decide what they want to do with no pressure. I have a-- we had talks with the Department of Corrections, so before they come out, we can scan and see what was a good fit. But right now I'm going to do my part, which is, I want to help people coming out. Once they get out here with nothing in place is kind of a setback, so I'm offering and to teach the trades to people because the good-- it's a good trade to know. Everything is really going back to that. And so that's my part in trying to give back to the people who's coming out of the system.

**KOLTERMAN:** Again, thanks for being here.

**TONY REYNOLDS:** You're welcome.

**WISHART:** Any additional questions? Senator Dorn.

**DORN:** I guess a question with a comment. We thank you for-- many of the people do thank you for giving back to the community. I mean, it's a-- that's an important part of this step, too, giving back. But I guess talk a little bit about, I know part of your work force comes with the program you have here. But--

**TONY REYNOLDS:** Yes.

**DORN:** --what's the workforce like for you today? What's--

**TONY REYNOLDS:** I get a lot of projects. I've been on my own three years, started my own company three years, but since getting out, I did all the Google, ran jobs, TD Ameritrade, the ballpark, just filled my own. I just finished the old Toys-R-Us building, Army Corps of Engineers, actually doing a sheriff's office remodel for the forensics center right now. So it's been opportunities after opportunities after opportunities. Yes, you'd have a little setbacks, but the benefit is there for you if you-- if-- we can't, we know that in reality we can't save everybody. But for the ones that wants to and wants to do better and get that, here is the place that you can go to achieve that.

**WISHART:** Thank you. Any other questions? I just wanted to echo my colleagues in thanking you for being here. Your story is incredibly

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impressive, and I'm sure you're a very busy person starting a business.

**TONY REYNOLDS:** Yeah.

**WISHART:** But you are truly an example that I think Nebraskans should live by of taking the time to stop and helping those who are following on a similar path, making sure that they are successful as well. So thank you for doing that.

**TONY REYNOLDS:** I appreciate it. Thank you.

**WISHART:** Any additional questions? Thank you for being here.

**TONY REYNOLDS:** Thank you.

**WISHART:** Any additional proponents? Seeing none, any opponents? Seeing none, anyone in the neutral? Seeing none, Senator McKinney, you're welcome to close.

**McKINNEY:** First, I would like to thank those that came to testify today for waiting so long to speak. And I really think it shows their commitment to our-- our communities and reentry and restorative justice. I think LB1111 is a very important-- very important piece of legislation for this year, especially with the conversations around criminal justice in the prisons. We can't leave this part of the conversation out. I think as a state, we have to make a commitment to restorative justice and reentry program and to decrease the amount of people that ever go into the criminal justice system and keep those that do get involved with it, just keep them out. It's very important for me because when I moved back home in 2015, I had a college degree, but I really couldn't get a job anywhere because I had something on my record. And if it wasn't for a organization like Black Men United, I don't think I would be in the state Legislature as a senator because they provided me an opportunity. And that's what these services provide. They provide individuals that may not have those opportunities an opportunity to see a better pathway and provide some hope so-- so those individuals don't end up back in the streets and back inside of our county jails and prisons. This is why this is important. I'm willing to work with the committee to make sure whatever we do put into the budget is workable. And if we have to extend the time in which this money is expense, I'm open to that as well. But I do really think this is something that should go across the table once we end this session because it's that important and we can help many people across the state. And it's not just in Omaha or

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Lincoln, it's across the state. We-- we need reentry across the state. And I think provide more resources and opportunities allow for that to happen to decrease our prison rates and decrease our population and overcrowding. Thank you.

**WISHART:** Thank you. Any additional questions? Thank you. We do have five letters of support sent into the record, zero in opposition and zero in neutral. That closes the hearing for LB1111, and it closes our hearings today. Thank you.