

**DHHS – Parent and Caregiver Citizen Review Panel  
Annual Report: October 1, 2020 – September 30, 2021  
Submitted: October 28, 2021**

This report addresses the actions taken to satisfy the scope of services for facilitation of the Parent and Caregiver Response Citizen Review Panel (CRP) as outlined in the agreement between the Nebraska Department of Health and Human Services (DHHS) and Nebraska Children and Families Foundation (NCFE). This report fulfills the annual reporting requirement of the 2020-2021 contract cycle, and includes activities undertaken to facilitate and maintain the Parent and Caregiver CRP recommendations from 2020 and implemented from Oct 1, 2020, to September 30, 2021.

**Scope of Work: Provide administrative support to the Nebraska Child Abuse Prevention Treatment Act (CAPTA) Citizen Review Panel for Parent and Caregivers.**

Nebraska Children provides staff support to facilitate meetings of the Parent and Caregiver CRP. This support includes arranging meeting locations, dates, times, agendas, minutes, copying and arranging for child care when necessary. This support also involves recruitment and support of family and caregiver participants.

**Scope of Work: Assure that the Panel is composed of volunteer members who are broadly representative of the diversity in the state and includes members how have expertise in the prevention and treatment of child abuse and neglect and may include adult former victims of child abuse and neglect.**

Nebraska Children and Families Foundation continues to be grateful for the opportunity to administer the Caregiver Citizen Review Panel (CRP) and provide recommendations to the Nebraska Department of Health and Human Services (DHHS). This year we administered one community-based CRP groups, a model that comprised of four total meetings in a community. This was our third year of administering a community-based group after working in Norfolk in 2019 and Schuyler in 2020.

The benefit of the local, community-owned format is the ability to have a comprehensive, cross-cutting team of the variety of sectors serving the local area. There is also an opportunity for the direct recruitment of community caregivers who can speak to their experiences in the area. There is also the opportunity for local DHHS offices across all divisions to have the opportunity to hear from their specific regional community voices on how to connect and serve these areas.

This year, we continued to learn from this community-based work, and it helped to work with the same community collaborative, the Community and Family Partnership in Colfax and Platte counties, for the second straight year. This familiarity with the process helped recruit community members and increase the number of members with experience in working with DHHS.

From a community perspective, the feedback has been very positive about this process. There is an opportunity within the local collaborative partnerships to provide resources and assistance for the work that starts as a Caregiver CRP to grow into a local caregiver advisory group to the community collaborative and have a greater impact on local initiatives and priorities. Also, the collaborative work done by the group will build connections and help communities reach more people who need supports.

While the recommendations in this report are specific to the Columbus's area, many of these takeaways could be generalized for other parts of the state. We also propose partnering with each DHHS service area to identify communities within which to hold a Caregiver CRP and gather specific, relevant feedback and recommendations.

**Scope of Work: Provide Support for meetings that occur at least once every three months.**

During the spring and summer of 2021, residents of Columbus met to discuss issues facing the community with the goal to provide recommendations to the Department of Health and Human Services. The group includes representatives from the education, human services, health department, community organization and residents with lived experience.

The group met four times starting in March and wrapping up in July and administered a community assessment survey in April.

The minutes for these meetings can be found in Appendix A

**Scope of Work: Assure that the CRP examines the policies and procedures and practices of the State and local agencies and where appropriate, specific cases, evaluate the extent to which the State and local child protection system agencies are effectively discharging their child protection responsibilities in accordance with state plan, the child protection standards and any other criteria that the panel considers important to ensure the protection of children, including a review of the extent to which the State and local child protective services system is coordinated with the foster care and adoption programs.**

Based on the results of the community survey conducted in April 2021 and the discussions of the group, the group has the following recommendations: working with state entities to provide more affordable housing, establishing standards for which programs Nebraskans are eligible, setting clear standards for mandatory reporting, incorporate more lived experience.

**1. Lack of affordable housing**

A lot of the discussion of the group focused on the lack of affordable housing in Columbus and other similar-sized communities. The group understands that this issue does not fall under the jurisdiction of DHHS, but it impacts many of the programs they offer. When a person or family must live in a more expensive house, they have less funds to spend on other life necessities such as food, clothing, utilities, educational supplies. With the higher monthly costs of housing, it creates a larger dependency on the Supplemental Nutrition Assistance Program, Medicaid and other DHHS administered programs. This

trickles down to the way other programs are run. For example, income qualifications for SNAP only consider gross income instead of net income. As a result, the high level of housing costs decreases the amount of money available for food.

While we do not expect DHHS to exert its programmatic force behind this initiative, but the members of the group thought it would be beneficial if DHHS takes a more holistic approach to its programming realizing that the lack of affordable housing impacts the services it does provide. This can be done through working with local governmental entities to put forward more housing-friendly policy and standards.

On the local level, Community Response spent more than \$88,000 to help cover rental costs including stays at hotels and motels plus rental assistance for 142 families. Because so much funding went to housing costs, their resources could not be spent on other supportive programs. To have DHHS involved in the solution would give greater weight to the conversation and help make progress on this issue.

## **2. Clarification on eligibility for programs for immigrants**

Columbus has a large Hispanic population, including some undocumented immigrants. Many of these residents or their relatives are eligible for state welfare programs but are unaware of their eligibility or fear that their participation in such programs might endanger their immigration status. For example, the children could be eligible to receive SNAP benefits or qualify for Aid to Dependent Children. Many of these instances happen when the parents are undocumented, but their children are citizens and are eligible for assistance programs. Another issue created is the confusion of income qualifications.

If the department would create more information about eligibility for various programs, in multiple languages, would help these programs reach more people in the state. This in turn would benefit them and raise their standards of living for both the children and their parents. Even if this education does not come directly from DHHS, the department would benefit from partnering with private organizations to help spread information about eligibility of programs.

This education can extend beyond DHHS programs as well. For example, most residents do not understand the differences between Alternative Response and Child Protective Services. This confusion also stems from different words/language used by the two programs. By unifying the message, this will help promote a better understanding among community members.

## **3. Clarification on Mandatory Reporting process**

The CRP also recommends making updates to the mandatory reporting process. Several professionals in the group expressed a desire to better understand the baseline for action when calls are made as well as more accountability from Child Protective Services or whichever agency is involved because of the call. Often inconsistency caused by staff turnover creates inconsistency caused by burnout.

One tool that would help with a wider understanding what threat level assessment CPS undertakes following a report to the hotline. This would help community-based professionals understand the level

of severity necessary for removals and other actions that could happen because of their report. Especially in rural areas, where staffing is often short, there is a need for help, clarity and for details provided. With more information, service providers can help with follow-through and understanding of CPS actions and enforcement.

One other way to help the reporting cycle is to close the loop after the end. If an agency professional reports an incident and does not do so anonymously, DHHS should follow up with them in a confidential manner to update them on the status of the case. Confidentiality should be maintained, but it would be beneficial to receive updates directly from DHHS about actions taken (or not) to help their work on the community level. This step would also help with CPS employee accountability if local professionals can better track the people in their community that they work with and be aware of future obstacles they might encounter in their work.

**Scope of Work: Inform the members and staff of the CRP that they shall not disclose to any person or government official any identifying information about any specific child protection case with respect to which the Task Force is provided information and shall not make public other information unless authorized by State statute. This assurance shall be documented by the completion of a confidentiality statement.**

The CRP does not review individual child protection cases as part of their work. However, they do gather the feedback of their peers and utilize their own stories of system involvement. Confidentiality of the stories shared by CRP members and their peers or families during meetings is captured within the group's values of confidentiality and safe space. No personal stories are captured in meeting minutes or documents without the direct permission of the owner of that story.

**Scope off Work: Assure that the CRP provides for public outreach and comment in order to assess the impact of current procedures and practices upon children and families in the community and in order to meet its obligations.**

The Columbus Community CRP were both open to the public and welcomed new members during the process. Nebraska Children worked with the Family and Community Partnership to recruit community members as well as people with lived experience.

## Appendix A: Meeting Minutes from Caregivers CRP

### Columbus Parents and Caregiver Citizen Review Panel

March 31, 2021

- Lincoln welcomed the group and provided an overview of what a Citizen Review Panel

Introductions/Attendance: Lincoln Arneal, NCFE; Sarah Papa, CFP; Bellyni Maldonado, CNCAP; Jennifer Snyder, EDN; John Weeder, CASA Volunteer; Kelli Parsons, MBH; Lucy, Simon House; Susan Uhl, Nebraska Extension; Reghan Holmberg, Community Response; Tami Clay, ESU 7; Tiffany Rogers, community member

Looking forward for today: Have great conversations; Hear thoughts on outsider and professionals; Impressed with DHHS, what we can do to improve DHHS? Learn what else is out there and listen;

- Reviewed recommendations form Schuyler
- Issues and Topics
  - o Mental health
    - Knowledge of what to do with you
    - Finding the right fit with specialties
      - Develop a resource list
      - Disability resources
      - Do DHHS workers have access to these community resources?
        - o Create database for the community? (United Way)
      - Seeking help shouldn't count against you in a custody battle
  - o Hear from DHHS, staffing retention and improve retention
    - Caseworkers turnover quickly
    - Such high crisis that can lead to burnout
    - Caseloads are too high
    - Doesn't lead to consistency for removing children and not investigating
  - o Service provider understanding their eligibility criteria
    - Barrier we can't cross to get
    - Different languages spoken between service providers and DHHS
    - AR vs CPS
  - o State of Nebraska won't help single parents, only judge them on income level. Don't look at bills and other expenses
- Positive programs
  - o Community Response is a big help
    - CN have developed more of friendship
    - People are more than willing to help
  - o Impressed by number of professionals drawn into cases
    - On the other side,
  - o Have access to resources – access to services and supports

- Finding those entities
  - Communication with services providers has improved, but can go further
  - Mental health outreach services
    - Service for therapy sessions regardless of insurance
  - Weekend backpack food program/mobile food pantries
    - Try to host 3-4 mobile a year
    - 300 families (1000 individuals) came through last pantry
  
- How to collect data and community information
  - Talked about doing a survey; Lincoln will email out the previous question. **Respond by April 7 with any feedback and suggestions**
  - Distribution methods
    - Home visits & case management
    - churches
    - Reach people who have experience with services
    - Lynette at Columbus Family Practice; Columbus emergency relief
    - CR families
  
- Next meeting
  - If there are any voice that are missing from the conversation, please let Sarah know
  - We will send out another Doodle poll to determine our next meeting. We will aim for the last week in April but might push back based on how quickly we can get the survey pushed out.

## Columbus CRP Meeting – May 20, 2021

Attendance: Tami Clay, ESU7; Susan Uhl, Boys Town, Reghan Holmberg, CFP, Alyson Goedken, NCFE; John Weeder, CASA; Belyni Maldonado, CFP; Sarah Papa, CFP; Tiffany Rogers, community rep

Went over results of community survey:

- 55 people responded via English and Spanish survey
  - o Distributed at mobile food pantry and through social media and networks

Discussion to open question:

- DHHS for Medicaid and food stamps: Income of the qualifications are too high; don't factor in net, just look at gross.
- Resources for single parents
- Unemployment is a struggle and often people choose not to
- What is considered affordable housing in Columbus?
  - o \$700-1000 for 2 bedrooms
  - o Is housing just regional? Are they competing against in Lincoln and Omaha? Local
  - o Reviewed Telegram article from March:  
[https://columbustelegram.com/news/local/affordable-housing-major-focus-in-columbus/article\\_6b761954-393f-581b-8c8e-ab67b4ca910a.html](https://columbustelegram.com/news/local/affordable-housing-major-focus-in-columbus/article_6b761954-393f-581b-8c8e-ab67b4ca910a.html)
  - o John shared cost from Cherry Creek apartments
  - o Credit score or background checks might limit the options as well
  - o Also, a challenge for undocumented residents
- Education and getting information out there
  - o Families we are working with must be in driver's seat.
  - o How do we codesign to involve families more
  - o Ties in with Thriving Families

Like to know more about Thriving Families

- Will be talking about this program at Collaborative Meeting on June 9 meeting
- Talked about Sarah transitioning to new role at Columbus Public Schools
  - o Shouldn't affect work of group, she will be in her position until mid-July and we have two meetings left
  - o She will send out Doodle poll to set the times for the next meetings

## June 2021 Meeting

Attendance: Sarah Papa, Reghan Holmberg, Bellyni Maldonado, Tiffany Rogers

Talked about the changes for income requirement for Medicaid and SNAP that changed recently; hopefully should start to see some impact

### Factor

- Equitable for DHHS programs for one- vs two-parent households
  - o Works against both parties
  
- Availability and affordability are more of an issue in Columbus vs homelessness
  - o Community Response provides vouchers for up to a month
  - o Since Oct 2020, CR, Simon House and CNCAP spent over \$127,000 for utilities, housing and sheltering assistance on 142 families
    - Hotel/Motel \$8,223
    - Rental assistance \$80,000
  
- Because of systemic issue housing affordability, it causes a larger dependency on other resources, i.e., SNAP, Medicaid, etc.
  
- Enhanced benefits,
  
- State benefits: they would rather not work rather work because of the level of unemployment benefits
  
- Federal programming is tricky because of immigration status for parents
  - o Because parents do not have documentation, the children might still be eligible because they might have documentation.
  - o Education of families is necessary to teach them more about who is eligible
    - Can get snap for the children or ADC
  
- As mandatory reporter, adjustments need to be made
  - o Information shared are concerns, but nothing is done.
    - i.e., family is living in apartment, they got evicted – no electricity, running water, generator
  - o What criteria/requirements is necessary for removal or wellness check? Need clearer standards and expectations from CPS.
  - o Need a baseline for action about when a call is made. As well as accountability
  - o More clarity on assessment for threat assessment when calls are made
  - o Especially in rural areas, when staffing is short, there is a need for help, clarity and for details provided. Service providers can help with follow-through and understanding

- If you are not an anonymous reporter, DHHS follows up to update status.
- Engagement and leadership with families
  - At state level, incorporate more lived experience into work and working groups
  - Locally, they are working on building social connection to adults to build supports and become a person they can go to.
  - What does self-care mean for people with lived experience?
- Invite DHHS employee/representative to the next meeting
  - Sarah will invite local/area DHHS reps and Lincoln will invite state-level employees.

Next meeting is Tuesday, July 6 at 9 a.m.

## July Caregiver CRP – Columbus

July 6

Attendance: Sarah Papa, Reghan Holmberg, Bellyni Maldonado, Tiffany Rogers, Lincoln Arneal

Housing – is outside scope of HHS, sat at table with conversations

Discussions about red tape

Columbus with Health department, affordable but also quality housing; apartments/rentals in poor condition, high priced

Health Dept working with city council.

HHS works with guardian ad litem.

Can get special status for children

Refer to Justice for Our Neighbors.

- Does public education, department does not,
- Based out of Omaha, Immigrant Legal Center

Talked with Homeland Security, for court hearings, complicated to call in; complex at best, contact with management; who may qualify and who may not.

Mandatory reporting

- Clearer standards set

DHHS

- Currently does Regular trainings in region; hotline will talk about
- DHHS has screening tool, goes with evidence-based tool
- Somebody calls in, hotline does collateral contacts,
  - o i.e., bruising, police check will do wellness check
- Priority timelines are being changed to tighten timeline; 10 days seems too long
- Look at Safety and imminent danger
- Call local HHS officers and I have some concerns
- Service providers outside vs inside have different perceptions

- CAC still does 101 overview on Zoom; Working with schools to get a training up and going with service providers
- At what point does CPS hold employees accountable?