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February 1, 2017

To: Members of the Health and Human Services Committee

From: Julia Tse, Policy Associate

RE: Support for LB 225 – Reauthorize the Alternative Response pilot project

Children are our state's greatest resource and we all share responsibility for protecting them and ensuring that they have the opportunity to become healthy and successful adults. Voices for Children in Nebraska supports LB 225 because it allows our child welfare system to continue using a more family-focused response to cases of child maltreatment when there is no immediate safety risk identified.

Most parents want to do what is best for their children, but circumstances sometimes prevent them from doing so. Physical or mental health issues, financial hardships, or lack of social support can overload a parent's capacity to care for their children. In Nebraska, **physical neglect accounts for nearly 84% of substantiated child maltreatment.¹ Families come to the attention of child protective services for a variety of reasons, but our system has long had only one response to an allegation accepted at the hotline: an investigation.** The purpose of this investigation is to gather evidence towards substantiating the allegation, which includes interviewing the child without a parent's permission, and interviewing collateral contacts. Underlying the investigation is the risk of children being removed from their homes, which creates a sense of coercion and antagonism for parents.²

The Alternative Response (AR) approach offers a second pathway for agencies to strengthen families if no serious abuse or neglect or immediate risk has been identified. Tested in other states since 1993, **the approach allows caseworkers to work collaboratively with families to address underlying issues towards long-term stability.** Voices for Children in Nebraska has worked closely with stakeholders through the implementation and rollout of the pilot, including serving on the Director's Steering Committee and Citizen Review Panel, and supports its reauthorization for the term of the state's Title IV-E waiver.

Change takes time, and we believe that the pilot has dutifully followed the Legislative intent with which AR was originally authorized in 2014. The AR pilot came on the heels of privatization in our state, and the guiding principle of the pilot was to prioritize child safety above all. This manifested in a number of oversight provisions, a lengthy deliberation over eligibility criteria, and careful rollout over the last 2 years. The measured pace at which the pilot has progressed is appropriately matched with the magnitude of change in agency culture and philosophy that AR has introduced.

¹ Voices for Children in Nebraska, *Kids Count in Nebraska 2016 Report*, 62. Available online at: www.kidscountnebraska.com. Physical neglect, as defined in 390 NAC 4-004.01, is a failure to provide for a child's basic needs, where no immediate risk of harm presently exists.

² Quality Improvement Center on Differential Response in Child Protective Services, "Differential Response in Child Protective Services: A Legal Analysis," September 2009.

The reauthorization of this pilot guarantees that our state will be able to utilize the results of the randomized control trial accompanying the project. Key research questions about the effectiveness of our approach will be answered by independent evaluators from the University of Nebraska at Lincoln upon completion of the waiver, and will offer important insights about how the “front door” of our child welfare system is best structured. The intermediate findings published by the evaluators last November are promising and suggest that AR is resulting in improved outcomes for children and families when compared to the traditional response.³ Highlights from the report include: **more timely receipt of services, better match between services and needs, higher buy-in and engagement, lower mistrust, lower hyperactivity for children, fewer peer relationship problems for children prosocial behavior for children in AR families than for traditional response families.**

We believe that policies should be informed by evidence and research. LB 225 allows for more time for evaluation and understanding of how the pilot has affected outcomes for children in our state, and creates a final public briefing before the approach becomes a permanent fixture of our system.

We thank Senator Crawford for her commitment to children and this committee for its time and consideration. We respectfully urge you to advance LB 225.

³ Department of Health and Human Services Division of Children and Family Services, “Legislative Report: Alternative Response Implementation,” November 15, 2016, http://nebraskalegislature.gov/FloorDocs/104/PDF/Agencies/Health_and_Human_Services_Department_of/548_20161114-143259.pdf.