



# June 2025 Quarterly Report

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**NEBRASKA**

**FOSTER CARE REVIEW OFFICE**

Good Life, Great Outcomes

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## EXECUTIVE SUMMARY

The Foster Care Review Office (FCRO) issues this Quarterly Report to inform the Nebraska Legislature, child welfare system partners, juvenile justice system partners, other policymakers, the press, and the public on identified conditions and outcomes for Nebraska's children in out-of-home care (foster care) as defined by statute, as well as to share recommendations for needed changes made per our mandate.<sup>1</sup>

This report begins with the most recent data available on conditions and outcomes for children in out-of-home care through the child welfare and juvenile justice systems. Some key findings for those children include:

- 4,142 Nebraska children were in out-of-home or trial home visit placements under DHHS/CFS, DHHS/OJS, and/or the Administrative Office of the Courts and Probation – Juvenile Services Division (hereafter referred to as Probation) on 3/31/25, representing a 0.9% increase from 3/31/24. (page 13)
- Of the 4,142 total children, 3,378 (81.6%) children were DHHS/CFS wards in out-of-home care or trial home visits with no simultaneous involvement with Probation, a 0.3% decrease compared to children on 3/31/24. (page 15)
- Most DHHS/CFS wards in out-of-home placements or trial home visits (97.3%) were placed in a family-like, least restrictive setting. (page 19)
- Over half of the children in a least-restrictive foster home, excluding those in trial home visits, were placed with relatives or kin (55.0%). (page 19)
- There was a 6.7% increase in the number of DHHS/CFS wards placed in congregate care facilities from the previous year to 3/31/25 (75 and 80, respectively). Of the 80 DHHS/CFS wards in congregate care, a majority were in Nebraska (82.5%); that is slightly less than the 84.0% in congregate care placed in Nebraska on 3/31/24. (page 21)
- Depending on the geographic area, between 9.1% and 31.9% of the children have had five or more CFS caseworkers since most recently entering the child welfare system. Furthermore, 114 children statewide had 10 or more workers in that timeframe, most of whom (112) were from the Eastern Service Area. This resulted in a decrease in the Eastern Service Area since 3/31/24 when 118 children had experienced 10 or more workers. While there has been recent progress, the Eastern Service Area has been disproportionately impacted by caseworker changes for several years. (page 23)
- 155 (3.7%) youths in out-of-home care were involved with DHHS/CFS and Probation simultaneously, representing a 12.3% increase compared to youths on 3/31/24. (page 24)
- There was a 25.0% increase in the number of dually involved youth placed in congregate care facilities from the previous year to 3/31/25 (48 and 60, respectively). Of the 60 dually involved youth in congregate care, most were in Nebraska (81.7%); that is more than the 75.0% in congregate care placed in Nebraska on 3/31/24. (page 26)

***The FCRO is the independent state agency responsible for overseeing the safety, permanency, and well-being of children in out-of-home care in Nebraska.***

*Through a process that includes case reviews, data collection and analysis, and accountability, we are the authoritative voice for all children and youth in out-of-home care.*

<sup>1</sup> Data cited in this report are from the FCRO's independent data tracking system which include FCRO completed case file reviews unless otherwise noted. Some of the most requested data is also available through the FCRO's data dashboards (accessed via [fcronebraska.gov/data\\_dashboards](https://fcronebraska.gov/data_dashboards)). Data presented includes numbers of children impacted, the agencies and courts responsible, demographics, and key indicators, all of which can be sorted in the most useful ways.

- There were 516 (12.5%) youths that were in out-of-home care while supervised by Probation but were not simultaneously involved with DHHS/CFS or at the YRTC, a 7.5% increase compared to youths on 3/31/24. (page 27)
- There was a 10.0% increase in the number of Probation supervised youth placed in congregate care facilities from the previous year to 3/31/25 (360 and 396, respectively). Probation most often utilized in-state placements; 86.6% of the 396 youths in congregate care were placed in Nebraska. (page 30)
- 88 youths, 76 males and 12 females, from various counties across Nebraska were at a YRTC on 3/31/25 which is an 8.3% decrease compared to the 96 such youths at the YRTCs at the same time last year. (page 31)
- Disproportionate rates for children of color in out-of-home care remains a critical issue to be examined and addressed, regardless of which agency or agencies are involved. No meaningful change or improvement has occurred in the last year; disproportionality rates for Black or African American youth have increased and disproportionate rates are most notable at the YRTCs. (pages 17, 25, 28, 32)
- The median age for Nebraska children in care on 3/31/25 by agency involvement: 8 years old for DHHS/CFS wards and 16 years old for dually involved youth and Probation only youth. For youth at a YRTC the median age was 16 years old for females and 17 years old for males. (pages 17, 24, 28, 32)
- The average number of times in care on 3/31/25 by agency involvement: 1.3 for DHHS/CFS wards, 1.8 for dually involved youth, 2.1 for Probation only youth, and 2.8 for youth at a YRTC. (pages 18, 25, 29, 32)
- The median number of days in care on 3/31/25: 422.5 days for DHHS/CFS wards, 600 days for dually involved youth, 179.5 days for Probation only youth, and 414.5 days for youth placed at a YRTC. (pages 18, 25, 29, 32)
- The average number of lifetime placements as of 3/31/25 by agency involvement: 3.3 for DHHS/CFS wards, 10.0 for dually involved youth, 5.0 for Probation only youth, and 9.3 for youth at a YRTC. (pages 18, 25, 30, 32)
- Missing from care continues to be an issue. The following 32 children and youth were missing from care as of 3/31/25 by agency involvement: 12 DHHS/CFS wards, seven dually involved youth, and 13 Probation only youth. (pages 20, 25, 30)



## RECOMMENDATIONS

### Current Priority Recommendations

Children's experiences in out-of-home care have life-long impacts. In its September 2024 Annual Report, the FCRO made recommendations intended to improve conditions for children in Nebraska's child welfare and juvenile justice systems. Many of those recommendations remain relevant and can be found in the report on our website at [fcro.nebraska.gov](https://fcro.nebraska.gov). The recommendations offered in this quarterly report are based on an analysis of the data tracked by the FCRO, as well as information collected during case reviews, findings by local review boards, and publicly available data.

1. Meaningful and active efforts across all system-involved levels need to be made to address the continued and often increasing racial disproportionality and overrepresentation of children and youth of color in out-of-home care. System partners should hold town hall meetings in communities heavily impacted by the child protection system to identify the root causes and develop solutions to address disparities. DHHS should be intentional about recruiting, retaining, and promoting case managers and supervisors of color to better reflect the population served. This will continue to be a priority recommendation until more active efforts are seen to drive change in the right direction.
2. The Western Service Area (WSA) continues to have a much higher rate of children in out-of-home care per 1,000 children in the population compared to other service areas. More prevention services and drug treatment services in the WSA may be helpful in reducing the rate of children entering out-of-home care in the WSA.
3. Of the 516 Probation supervised youth in out-of-home care, 76.8% were in congregate care facilities and of those over 20% were in detention facilities. The FCRO remains concerned about the number of youths placed in these facilities. This is a trend we believe warrants further investigation to understand this population of youth, what their needs are, and whether those needs are being met. Youth placed in detention or other juvenile justice confinement must have access to appropriate treatment services and programming, including educational programming, to ensure that time spent in detention is not lost and youth can continue to make progress toward healing and rehabilitation. More needs to be done to develop prevention, diversion, and alternatives to detention to keep youth out of detention placements.
4. The increased use of congregate care placements across all agencies is concerning. Of note are the continued increases in the use of congregate care placements for DHHS/CFS only involved wards, which increased by 6.7% over the last year, and those that were dually involved with DHHS/CFS and Probation simultaneously, which increased by 25.0%. The increased use of congregate care placements is concerning not only because they are more restrictive settings, but they likely are not in the child's home community. The state of Nebraska must invest in infrastructure and capacity to support community-based services, including treatment foster care and residential care facilities so children can receive necessary treatment and support close to home.
5. The FCRO recognizes the progress DHHS has continued to make over the last year in decreasing the number of children in the Eastern Service Area who have had 10 or more caseworkers in their most recent episode in out-of-home care (from 118 to 112). Children with 10 or more caseworkers are minimal across the rest of the state. There remains an issue with children having five or more caseworkers across the state, but particularly in the Eastern Service Area where it is disproportionately an issue given 31.9% of the children have had five or more caseworkers. When

caseworker turnover is unavoidable, DHHS should ensure the case remains with the same supervisor to promote continuity of care and prevent the loss of case history. DHHS is encouraged to continue to make progress in workforce stability to prevent the unnecessary transfer of cases between caseworkers.

6. To address turnover and staffing challenges, DHHS is encouraged to create and implement a long-term plan to develop a recruitment pipeline for individuals who might consider pursuing a career in social work, psychology, mental health practice, and related professions. This includes partnering with post-secondary education institutions to develop academic programs in human services disciplines, offering job-shadowing, volunteer, and internship opportunities, and other efforts designed to elevate human services career choices.
7. YRTPCs tend to have the highest rates of disproportionality for youth of color, particularly Black or African American and American Indian or Alaska Native youth, who had the highest rates of overrepresentation amongst this group. The FCRO encourages the development of youth gang violence prevention programs and other community-based programs that engage families and youth to improve outcomes, increase public safety, and strengthen communities, as well as reentry programming focused on youth and family well-being.<sup>2</sup>
8. Youth dually involved with DHHS/CFS and Probation simultaneously have consistently had the longest median length of stay (600 days) as compared to youth involved with DHHS/CFS only (422.5 days) and Probation only (179.5 days). The FCRO supports the development of prevention services for youth and families in crisis to reduce the number of youths entering either system. The FCRO also supports the development of strengths-based and evidence-informed interventions focused on meeting the complex needs of these vulnerable youth.<sup>3</sup>

The FCRO will continue to work with all system partners to pursue the recommended changes.

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<sup>2</sup> See [ojjdp.ojp.gov/about/ojjdp-priorities](https://ojjdp.ojp.gov/about/ojjdp-priorities)

<sup>3</sup> The Children's Bureau, Dear Colleague Letter Addressing the Complex Needs of Dually Involved Youth, May 29, 2024, [Joint Letter on Dually Involved Youth](#)

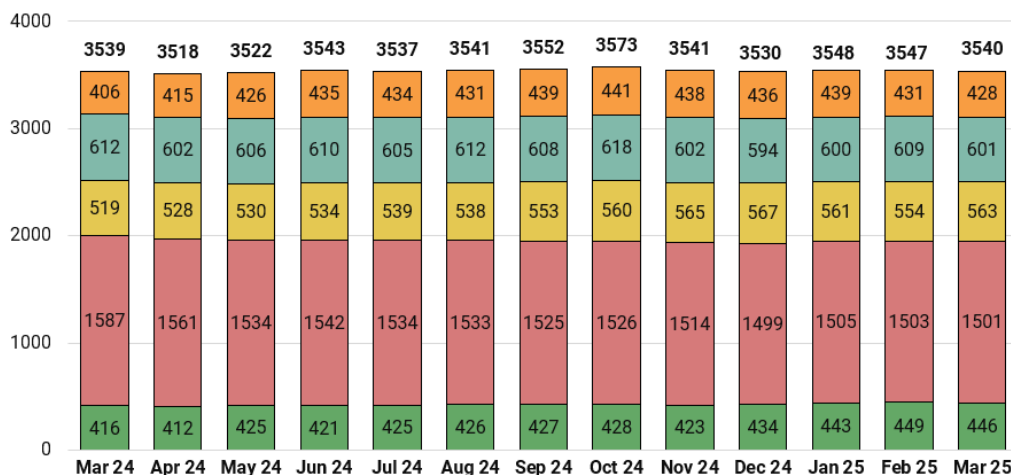
## OUT-OF-HOME TRENDS

This section includes Average Daily Population as well as Entry and Exit data for court-involved children in out-of-home care or a trial home visit involved with DHHS and/or Probation. Youth who were involved with both DHHS and Probation simultaneously (dually involved youth) are included in both system trends; youth who were placed at a YRTC are included with the Probation-involved youth.

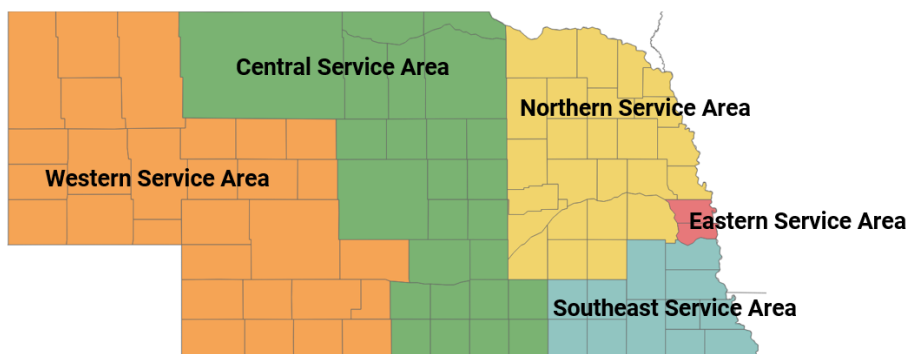
### CHILD WELFARE TRENDS

**Average Daily Population.** Figure 1 represents the average daily population (ADP) per month of all DHHS-involved children in out-of-home care or a trial home visit, including those simultaneously served by Probation, from March 2024 to March 2025. There was effectively no change of DHHS wards in out-of-home care on average in March 2025 compared to March 2024.

**Figure 1: Average Daily Population of DHHS Wards, March 2024-March 2025**



The colors refer to the service area (SA), as shown in the map below. Totals at the top of the chart may be slightly different than the sum of the service areas due to rounding.



## Out-of-Home Trends

Figure 2 indicates the percent change in average daily population varied throughout the state and illustrates the differences between service areas (geographic regions).

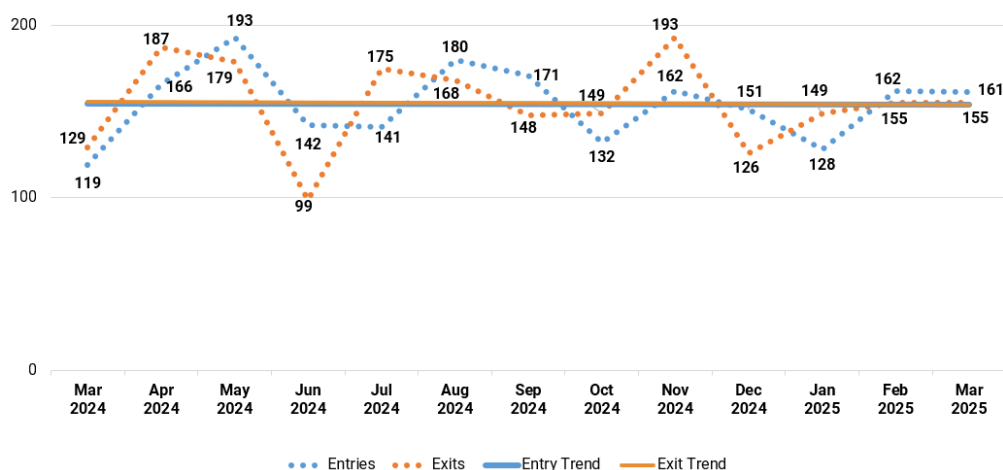
**Figure 2: Percent Change in Average Daily Population of DHHS Wards by Service Area, March 2024 to March 2025<sup>4</sup>**

Service Area (SA)	Mar-24	Mar-25	% Change
Central SA	416	446	7.2%
Eastern SA	1,587	1,501	-5.4%
Northern SA	519	563	8.5%
Southeast SA	612	601	-1.8%
Western SA	406	428	5.4%
<b>Statewide</b>	<b>3,539</b>	<b>3,540</b>	<b>0.0%</b>

**Entries and Exits.** Population changes of children in out-of-home care and trial home visits can be influenced by many factors, including changes in the number of children entering the system, changes in the number of children exiting the system, and changes in the amount of time children spend in the system. Some patterns tend to recur, such as more exits toward the end of the school year, prior to holidays, during reunification or adoption days, and more entrances just before summer and after school starts (when reports of abuse or neglect tend to increase).

Figure 3 represents exits and entrances per month of all DHHS-involved children in out-of-home care or a trial home visit, including those simultaneously served by Probation, from March 2024 to March 2025.

**Figure 3: Monthly Entries and Exits of DHHS Wards, March 2024-March 2025**



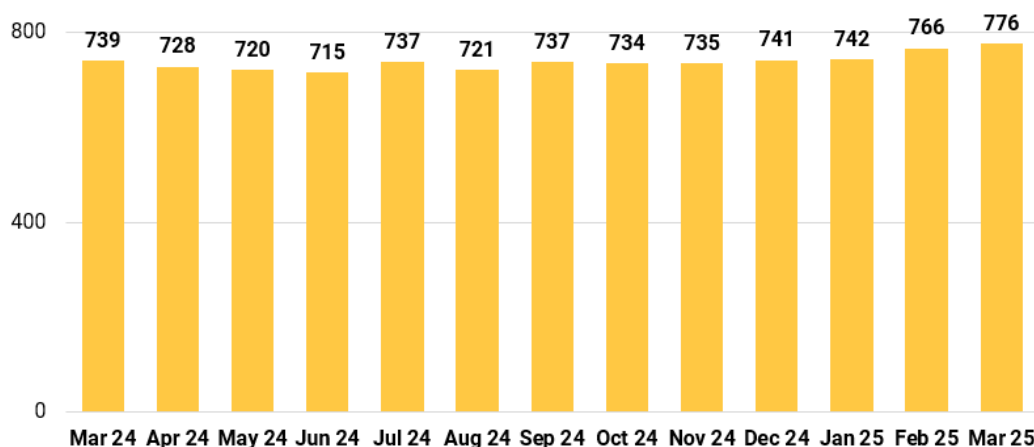
<sup>4</sup> Averages for each column may not be exactly equal to the sum of the service areas due to rounding.



## JUVENILE JUSTICE-PROBATION TRENDS

**Average Daily Population.** Figure 4 below represents the average daily population (ADP) per month of all Probation supervised youth in out-of-home care, including those simultaneously served by DHHS, from March 2024 to March 2025. The average daily population increased over the last year. There were 5.0% more Probation supervised youth in out-of-home care on average in March 2025 compared to March 2024.

**Figure 4: Average Daily Population of Probation Supervised Youth in Out-of-Home Care, March 2024 to March 2025**



Five of the 12 districts experienced a decline in the population of Probation supervised youth in out-of-home care, as demonstrated in Figure 5.

**Figure 5: Percent Change in Average Daily Population of Probation Supervised Youth by Probation District, March 2024 to March 2025<sup>5</sup>**

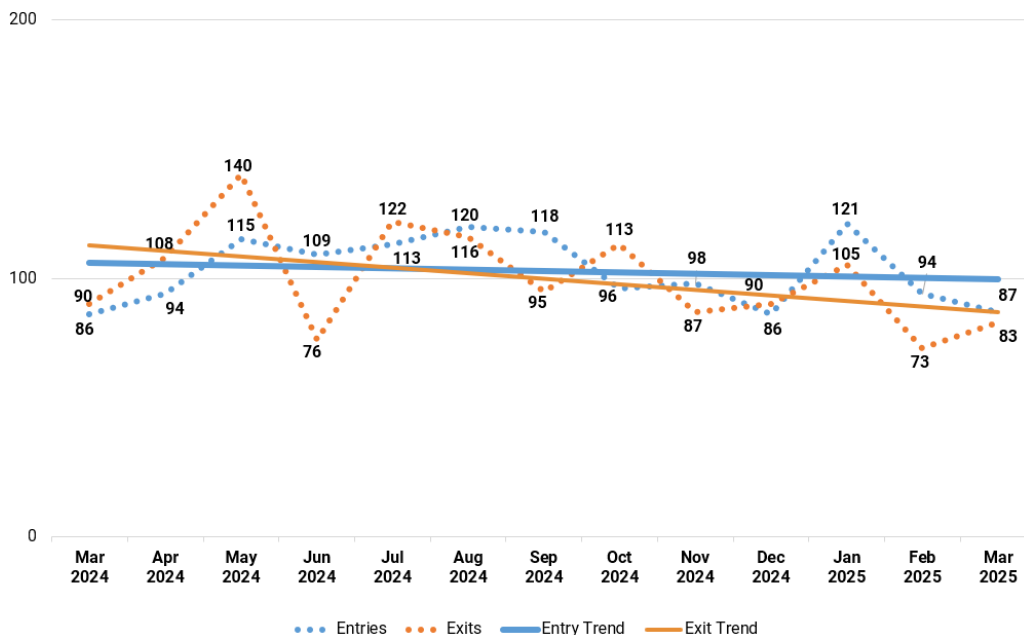
Probation District	Mar-24	Mar-25	% Change
District 1	24	13	-45.8%
District 2	37	37	0.0%
District 3J	115	137	19.1%
District 4J	267	289	8.2%
District 5	41	53	29.3%
District 6	38	44	15.8%
District 7	53	44	-17.0%
District 8	12	6	-50.0%
District 9	50	46	-8.0%
District 10	33	24	-27.3%
District 11	50	54	8.0%
District 12	18	30	66.7%
<b>State</b>	<b>739</b>	<b>776</b>	<b>5.0%</b>

<sup>5</sup> Averages for each column may not be exactly equal to the sum of the probation district due to rounding.

## Out-of-Home Trends

**Entries and Exits.** Probation-related placements are frequently long-term (6-12 months) placements, focused on community safety and rehabilitation of the youth. Under statute, the FCRO can track and review Probation supervised youth if they are in an out-of-home placement. For Probation supervised youth, the end of an episode of out-of-home care does not necessarily coincide with the end of their probation supervision; therefore, the FCRO is unable to report on successful or unsuccessful releases from Probation.

**Figure 6: Monthly Entries and Exits of Probation Supervised Youth, March 2024-March 2025**



### POINT-IN-TIME TREND OVERVIEW BY AGENCY

The following tables represent a trend comparison of the number of children and youth in out-of-home care or trial home visits by agency type over the last eight point-in-time quarters. The DHHS/CFS and Dually Involved tables below show the statewide total as well as the breakout by service area. Probation displays the statewide total and the breakout by probation district. Finally, YRTC represents the statewide total and the breakout by gender.

DHHS/CFS	6/30/23	9/30/23	12/31/23	3/31/24	6/30/24	9/30/24	12/31/24	3/31/25
Statewide	3,530	3,480	3,398	3,388	3,446	3,426	3,397	3,378
CSA	407	404	378	393	407	404	428	424
ESA	1,612	1,581	1,536	1,503	1,496	1,458	1,424	1,426
NSA	508	495	489	503	521	533	550	531
SESA	549	554	570	585	589	590	570	579
WSA	454	446	425	404	433	441	425	418

- For children and youth involved only with DHHS/CFS, the most recent point-in-time data shows a 0.6% statewide decrease over the previous quarter.
- Three of the five service areas experienced a decrease with the largest decrease occurring in the NSA at 3.5%; whereas SESA had the largest increase at 1.6%.

Dually Involved	6/30/23	9/30/23	12/31/23	3/31/24	6/30/24	9/30/24	12/31/24	3/31/25
Statewide	129	127	138	138	119	132	141	155
CSA	19	15	18	17	12	16	12	15
ESA	56	57	62	63	58	67	79	81
NSA	18	15	14	20	20	24	24	27
SESA	20	25	28	24	17	16	19	17
WSA	16	15	16	14	12	9	7	15

- For youth who were dually involved with DHHS/CFS and Probation, the most recent point-in-time data shows a 9.9% statewide increase over the previous quarter.
- Four of the five service areas (CSA, ESA, NSA, and WSA) experienced an increase and one service area (SESA) experienced a decrease over the previous quarter.

## Out-of-Home Trends

Probation	6/30/23	9/30/23	12/31/23	3/31/24	6/30/24	9/30/24	12/31/24	3/31/25
Statewide	435	473	483	480	486	475	479	516
District 1	16	20	18	18	19	13	8	7
District 2	31	30	35	34	29	30	28	30
District 3J	75	79	82	72	77	84	85	109
District 4J	125	139	151	155	163	154	156	162
District 5	32	37	32	35	29	31	32	37
District 6	37	32	28	25	30	30	33	36
District 7	20	28	28	30	26	20	28	23
District 8	8	7	6	4	4	6	6	6
District 9	32	30	29	38	37	40	34	33
District 10	15	22	24	25	27	19	17	15
District 11	30	29	34	30	31	28	35	35
District 12	14	20	16	14	14	20	17	23

- For youth who were only involved with Probation, the most recent point-in-time data shows a 7.7% statewide increase over the previous quarter.
- Six of the 12 probation districts had an increase, with the largest increase occurring in District 12 at 35.3%, followed by District 3J at 28.2%, District 5 at 15.6%, District 6 at 9.1%, District 2 at 7.1%, and District 4J at 3.8%.
- Four probation districts had a decrease over the previous quarter, with the largest decrease occurring in District 7 at 17.9%, followed by District 1 at 12.5%, District 10 at 11.8%, and District 9 at 2.9%.
- District 8 and District 11 had no change from the previous quarter.

YRTC's	6/30/23	9/30/23	12/31/23	3/31/24	6/30/24	9/30/24	12/31/24	3/31/25
Statewide	84	78	74	96	95	103	91	88
Females	22	12	14	25	29	22	15	12
Males	62	66	60	71	66	81	76	76

- For youth who were placed at a YRTC, the most recent point-in-time data shows a 3.3% total population decrease over the previous quarter.
- The population of females at the YRTC's decreased by 20.0% and the population of males had no change over the previous quarter.

## SYSTEM-WIDE TRENDS

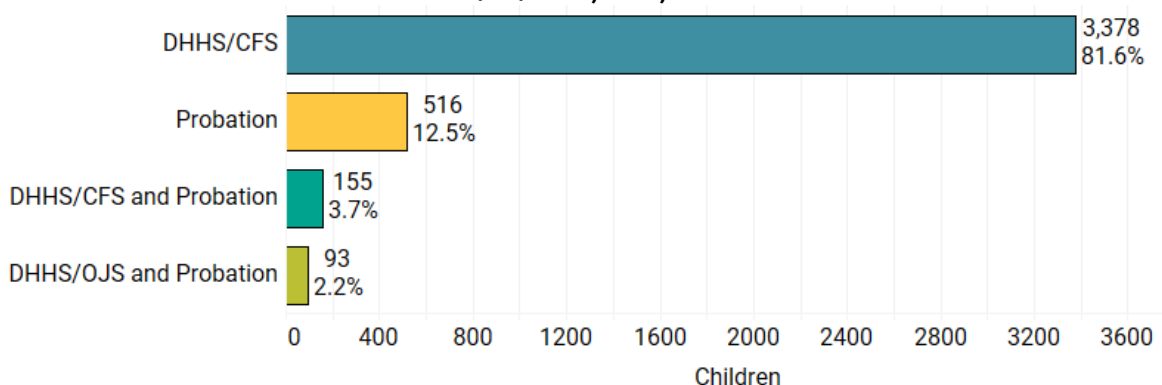
This section includes point-in-time data for court-involved children and youth under DHHS/CFS, DHHS/OJS, and/or the Administrative Office of the Courts and Probation – Juvenile Services Division (hereafter referred to as Probation) in out-of-home care or a trial home visit.

On 3/31/2025, 4,142 Nebraska children were in an out-of-home or trial home visit placement<sup>6</sup> under DHHS/CFS, DHHS/OJS, and/or Probation.

Over the course of a year, a child may enter or exit out-of-home care one or more times and may be involved with one or more state agencies. Additionally, children may be involved in voluntary placements, court-ordered placements, or both throughout a year.

Figure 7 provides a snapshot of the agency involvement of non-duplicated children in out-of-home care on 3/31/2025.

**Figure 7: All Court-Involved Children in Out-of-Home Care or a Trial Home Visit by Agency Involved on 3/31/2025, n<sup>7</sup>=4,142**

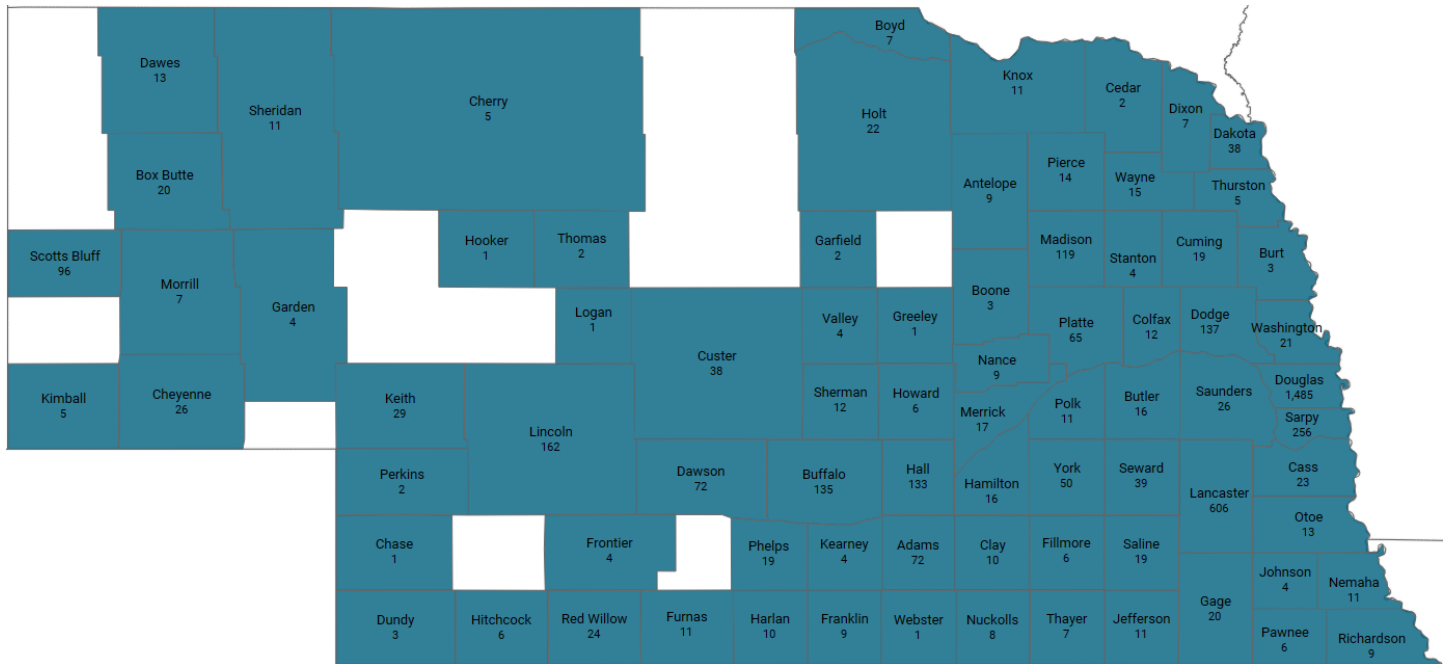


<sup>6</sup> This section does not include children in non-court Approved Informal Living Arrangements, tribal wards, or children that have never had a removal from the home.

<sup>7</sup> See Appendix B for a glossary of terms and a description of acronyms.



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## CHILD WELFARE CHILDREN

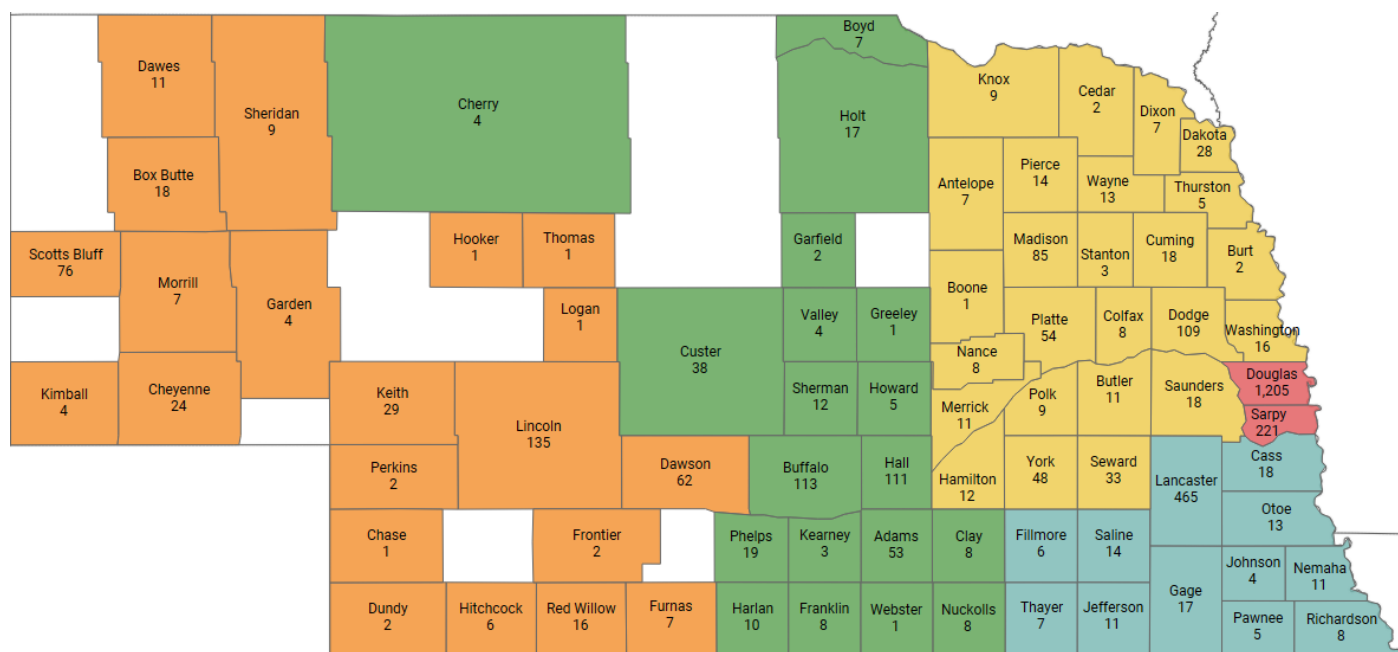
### DHHS/CFS COURT-INVOLVED CHILDREN IN CARE THROUGH THE CHILD WELFARE SYSTEM

This section includes point-in-time data for DHHS/CFS only court-involved children in out-of-home care or a trial home visit in the child welfare system (abuse and neglect). This does not include children and youth dually involved with DHHS/CFS and Probation.

#### POINT-IN-TIME DEMOGRAPHICS AND PLACEMENTS

**County.** Figure 9 shows the county of court jurisdiction for the 3,378 children solely involved with DHHS/CFS in out-of-home care or a trial home visit on 3/31/2025. This compares to 3,388 on 3/31/2024.

**Figure 9: County of Court Jurisdiction for DHHS/CFS Wards in Out-of-Home Care or Trial Home Visit on 3/31/2025, n=3,378**



\*Counties with no description or shading did not have any children in out-of-home care with DHHS/CFS involvement. These are predominately counties with sparse populations of children. Children who received services in the parental home without experiencing a removal and children placed directly with a non-custodial parent are not included as they are not within the FCRO's authority to track or review.

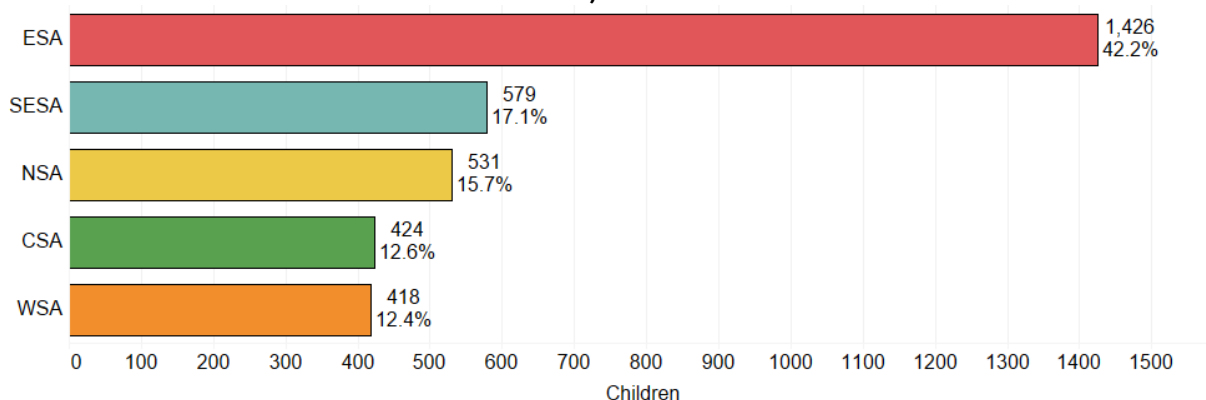
**Figure 10: Service Areas for DHHS/CFS Wards in Out-of-Home Care or Trial Home Visit on 3/31/2025, n=3,378**

Figure 11 represents the top 10 counties by rate of DHHS/CFS wards in care per 1,000 children in the population, ages 0 up to 19, on 3/31/2025. While the three most populous counties in Nebraska (Douglas, Lancaster, and Sarpy) make up approximately 56% of DHHS/CFS wards, these counties are not within the top 10 counties with the highest rates. Some rural counties, like Lincoln County (North Platte), which had the fourth highest count of children who are DHHS/CFS wards, have higher rates of children in out-of-home care. Statewide, the rate of DHHS/CFS wards in care per 1,000 children was 6.3.

**Figure 11: Top 10 Counties by Rate of DHHS/CFS Wards in Care per 1,000 Children in the Population on 3/31/2025**

County	Children in Care	Total Age 0-19 <sup>9</sup>	Rate per 1,000 Children	Number of Families
Boyd	7	355	19.7	2
Sherman	12	710	16.9	6
Lincoln	135	8,325	16.2	86
Keith	29	1,848	15.7	18
Harlan	10	728	13.7	3
Custer	38	2,789	13.6	23
York	48	3,781	12.7	28
Franklin	8	649	12.3	4
Garden	4	361	11.1	2
Dodge	109	10,303	10.6	37

<sup>9</sup> U.S. Census Bureau, Population Division, County Characteristics Datasets: Annual County Resident Population Estimates by Age, Sex, Race, and Hispanic Origin: July 1, 2023.

**Figure 12: Service Areas by Rate of DHHS/CFS Wards in Care per 1,000 Children in the Population on 3/31/2025**

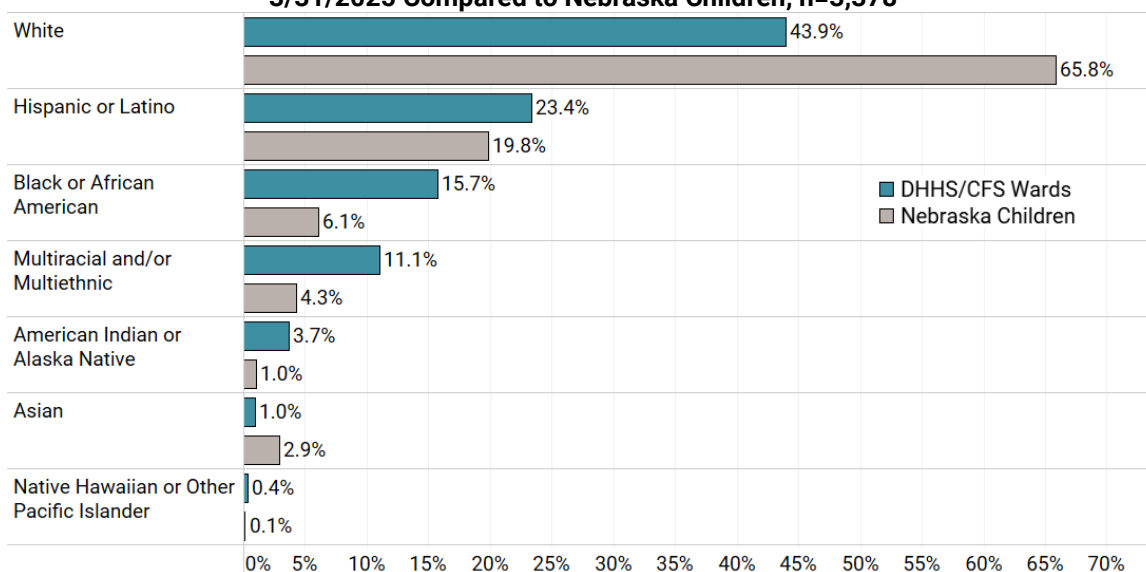
Service Area	Children in Care	Total Age 0-19 <sup>10</sup>	Rate per 1,000 Children	Number of Families
CSA	424	62,732	6.8	227
ESA	1,426	219,710	6.5	771
NSA	531	91,884	5.8	303
SESA	579	115,153	5.0	323
WSA	418	46,805	8.9	252

**Age.** The median age was 8 years old for both males and females who were DHHS/CFS wards in care on 3/31/2025.

- 36.2% of the children in out-of-home care or trial home visits on 3/31/2025 were age 5 and under.
- 35.2% of the children were age 6-12.
- 28.6% of the children were age 13-18.

**Gender.** Males (49.6%) and females (50.4%) are nearly equally represented in the number of DHHS/CFS wards in care.

**Race.** Figure 13 compares the race and ethnicity of children in out-of-home care or a trial home visit to the number of children in the state of Nebraska. Children of color continue to be overrepresented in the out-of-home population. This overrepresentation is very similar to the data presented last year. A truly balanced out-of-home care system should reflect a population composed of race/ethnicity ratios in out-of-home care equivalent to the ratios of children in the general population per census records.

**Figure 13: Race and Ethnicity of DHHS/CFS Wards in Out-of-Home Care and Trial Home Visits on 3/31/2025 Compared to Nebraska Children, n=3,378**

<sup>10</sup> U.S. Census Bureau, Population Division, County Characteristics Datasets: Annual County Resident Population Estimates by Age, Sex, Race, and Hispanic Origin: July 1, 2023.

**Times in Care Over Lifetime.** The average number of times in care over their lifetime for current DHHS/CFS wards as of 3/31/2025 was 1.3.

**Median Length of Stay.** For those in care on 3/31/2025, the median number of days in care for DHHS/CFS wards was 422.5 days.

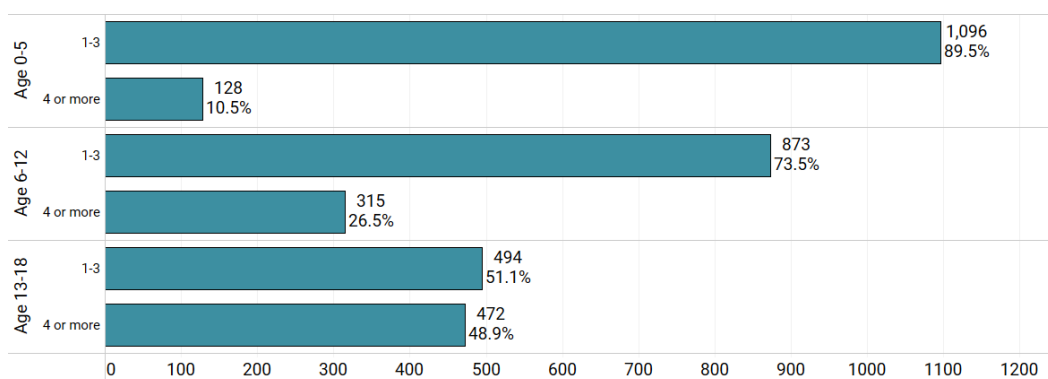
**Number of Placements.** Research indicates that children experiencing multiple placements over their lifetime puts them at greater risk for negative outcomes, such as delays in permanency, academic challenges, and difficulties forming meaningful attachments.<sup>11</sup> However, children who have experienced consistent, stable, and loving caregivers are more likely to have better long-term mental and physical health outcomes.<sup>12</sup>

On 3/31/2025, DHHS/CFS wards had an average of 3.3 placements in their lifetime.

Figure 14 shows the number of lifetime placements for DHHS/CFS wards by age group. It is unacceptable that 10.5% of children ages 0-5, and 26.5% of children ages 6-12 have been moved between caregivers four or more times. This has implications for children's health and safety at the time of review and throughout their lifetime.

By the time children reach their teen years, just under half (48.9%) have exceeded four lifetime placements.

**Figure 14: Lifetime Placements for DHHS/CFS Wards in Care 3/31/2025, n=3,378**



The percentage of children with four or more lifetime placements varies by service area, as shown in Figure 15.

**Figure 15: DHHS/CFS Wards with Four or More Lifetime Placements by Service Area 3/31/2025, n=3,378**

Age Group	CSA	ESA	NSA	SESA	WSA
0-5	5.3%	11.9%	11.7%	8.1%	12.4%
6-12	23.8%	33.7%	24.9%	20.3%	17.2%
13-18	43.5%	55.5%	40.6%	47.3%	42.2%

<sup>11</sup> sbrown@casey.org. 2024. "Placement Stability Impacts - Casey Family Programs." Casey Family Programs. May 22, 2024. <https://www.casey.org/placement-stability-impacts>

<sup>12</sup> sbrown@casey.org. 2024.



**Placement Restrictiveness.** It is without question that “children grow best in families.” While temporarily in foster care, children need to live in the least restrictive, most home-like placement possible for them to grow and thrive. Thus, placement type matters. The least restrictive placements are home-like settings, moderate restrictive placements include non-treatment group facilities, and the most restrictive are the facilities that specialize in psychiatric, medical, or juvenile justice related issues and group emergency placements.

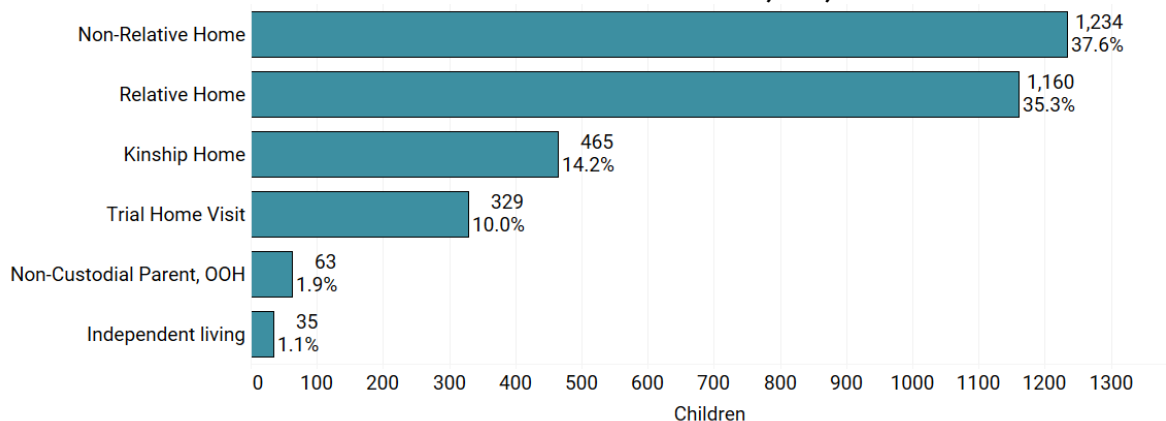
- The vast majority (97.3%) of DHHS/CFS state wards in care on 3/31/2025 were placed in the least restrictive placement, well above the 2021 national average of 90%.<sup>13</sup> This is a continuing trend.
  - Of the children placed in family-like settings (not including trial home visits), 55.0% were in a relative or kinship placement.<sup>14</sup>

Formalized relative and kinship care was put in place to allow children to keep existing and appropriate relationships and bonds with family members, or similarly important adults, thus lessening the trauma of separation from the parents.

If a maternal or paternal relative or family friend is an appropriate placement, children suffer less disruption by being placed with persons they already know, who make them feel safe and secure; however, it is not required that relatives have a pre-existing relationship with the child in order to be placed with them.

When considering Figure 16, remember that some children in out-of-home care do not have any adult relatives available for consideration, while others may have relatives, but the relatives are not suitable to provide care.

**Figure 16: Additional Details on Least Restrictive Placement Type for DHHS/CFS Wards in Out-of-Home Care or a Trial Home Visit on 3/31/2025, n=3,286**



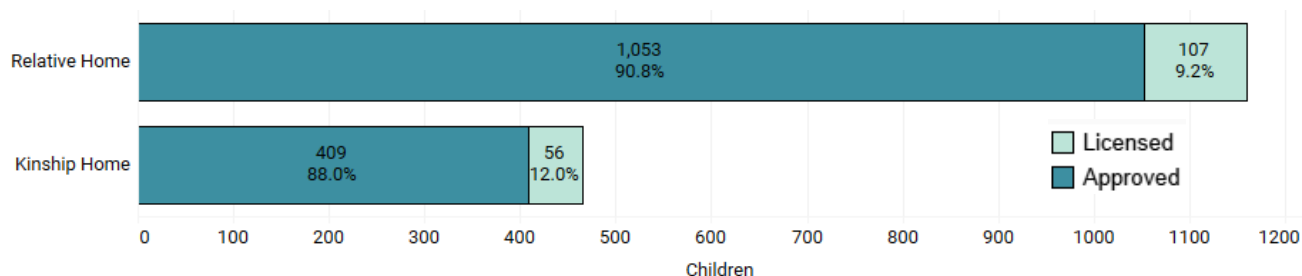
<sup>13</sup> Children in foster care by placement type: Kids Count Data Center. Children in foster care by placement type | KIDS COUNT Data Center. (n.d.). <https://datacenter.aecf.org/data/line/6247-children-in-foster-care-by-placement-type?loc=1&loc=1#1/any/true/2048/asc/2622,2621,2623,2620,2625,2624,2626/12995>

<sup>14</sup> Neb. Rev. Stat. §71-1901 defines relative care as placement with a relative of the child or of the child's sibling through blood, marriage, or adoption. Kinship care is with a fictive relative, someone with whom the child has had a significant relationship prior to removal from the home. Other states may use different definitions of kin, making comparisons difficult.

**Licensing of Relative and Kinship Foster Homes.** Compliance to the new DHHS relative and kinship foster home approval process approved by the Administration for Children and Families (ACF) is crucial to ensure placement safety and stability, as well as to increase the amount of federal Title IV-E funding accessed by the state.<sup>15</sup> Completion of the Reasonable and Prudent Parenting Standards training should support these approved caregivers so they are better able to cope with the types of behaviors that children with a history of abuse or neglect can exhibit, along with intra-familial issues present in relative care that are not present in non-family situations. These approved caregivers will also need ample information on the workings of the foster care system and supports available to them and the children.

**Current License Status.** Due to the prior fiscal impact and caregiver training issues, the FCRO looked at the licensing status for relative and kinship placement types. As shown in Figure 17, in keeping with the FCRO's focus on individual children, we see that relatively few are in a licensed placement. Since 3/31/2024, children in licensed relative placements have decreased from 22.3% to 9.2% and children in licensed kinship placements have decreased from 15.6% to 12.0%. Since licensure is no longer required to access federal Title IV-E funding, the number of children placed in licensed relative and kinship homes has trended downward.

**Figure 17: Licensing for DHHS/CFS Wards in Relative or Kinship Foster Homes on 3/31/2025, n=1,160 (Relatives) and n=465 (Kinship)**



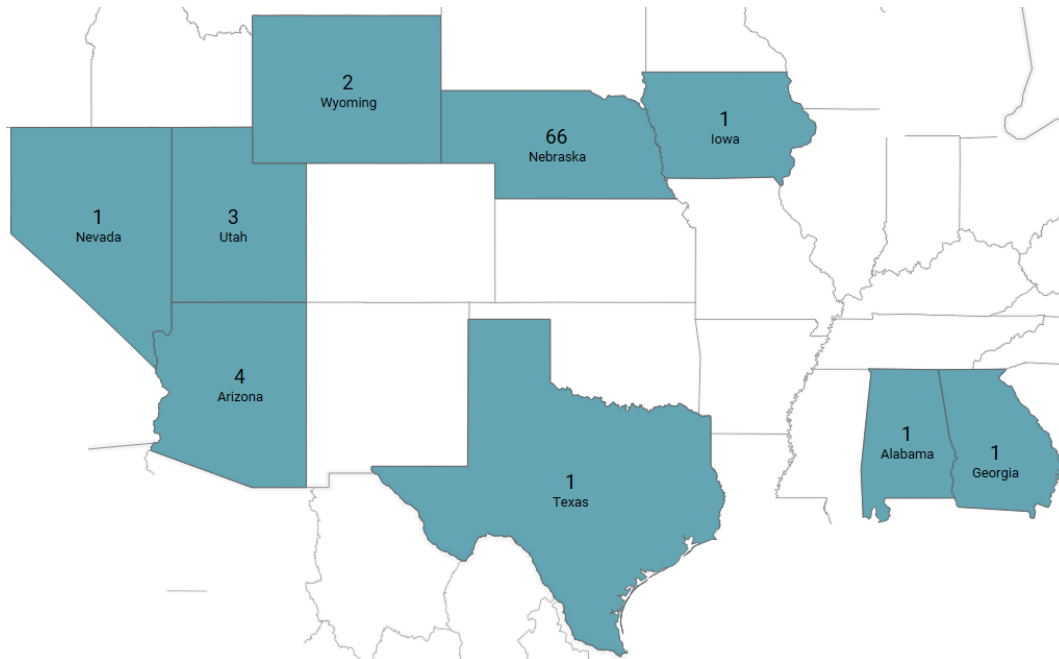
**Missing from Care.** On 3/31/2025, there were 12 DHHS/CFS wards missing from care. Of those missing, nine were female and three were male. This is always a serious safety issue that deserves special attention. While unaccounted for, these children have a higher likelihood of experiencing sex trafficking, exploitation, and victimization.

<sup>15</sup> Per a DHHS news release from May 8, 2024: On April 17, 2024, the Administration for Children and Families (ACF) approved Nebraska's plan to utilize a separate relative and kinship approval process. The process will allow Nebraska to draw additional federal dollars for child welfare services.

**Congregate Care.** A majority (82.5%) of DHHS/CFS wards in congregate care facilities<sup>16</sup> were placed in Nebraska (Figure 18).

- DHHS/CFS had 80 children in congregate care, resulting in an increase from 75 on 3/31/2024.

**Figure 18: DHHS/CFS Wards in Congregate Care on 3/31/2025 by State of Placement, n=80**



<sup>16</sup> Congregate care includes non-treatment group facilities, group facilities that specialize in psychiatric, medical, or juvenile justice related issues, and group emergency placements.

## CASEWORKER CHANGES

Caseworkers are charged with ensuring children's safety while in out-of-home care, and they are critical for children to achieve timely and appropriate permanency. The number of different caseworkers assigned to a case is significant because worker changes can create situations where there are gaps in the information and client relationships must be rebuilt, causing delays in permanency. It is also significant to the child welfare system because funding is directed to training new workers instead of serving families.

A study still frequently quoted from Milwaukee County, Wisconsin, found that children who only had one caseworker achieved timely permanency in 74.5% of the cases, as compared with 17.5% of those with two workers, and 0.1% of those having six workers.<sup>17</sup> Caseworker turnover has been associated with more placement disruptions, time in foster care, incidents of maltreatment, and re-entries into foster care.<sup>18</sup> Turnover is also significant to the child welfare system because resources are directed to recruiting, hiring, and training new workers instead of serving families. Every time a caseworker leaves the workforce, the cost to the agency can be approximately 70% to 200% of the exiting employee's annual salary.<sup>19</sup>

The FCRO receives information from DHHS/CFS about the caseworkers children have had while in out-of-home care or trial home visits during their current episode.<sup>20</sup> Due to system changes over the past couple of years, the following explanations are necessary:

- In the Eastern Service Area, ongoing casework was done by lead agency (contractor) Family Permanency Specialists (FPS) until March 2022. Since then, it has been conducted by DHHS/CFS Case Managers. Thus, the count for the Eastern Service Area may include workers in each category. The FCRO was careful not to duplicate the counts for previous lead agency workers who were hired by DHHS/CFS if they continued to serve the same family.<sup>21</sup>
- In the rest of the state, the data represents the number of DHHS/CFS Case Managers assigned to a case.

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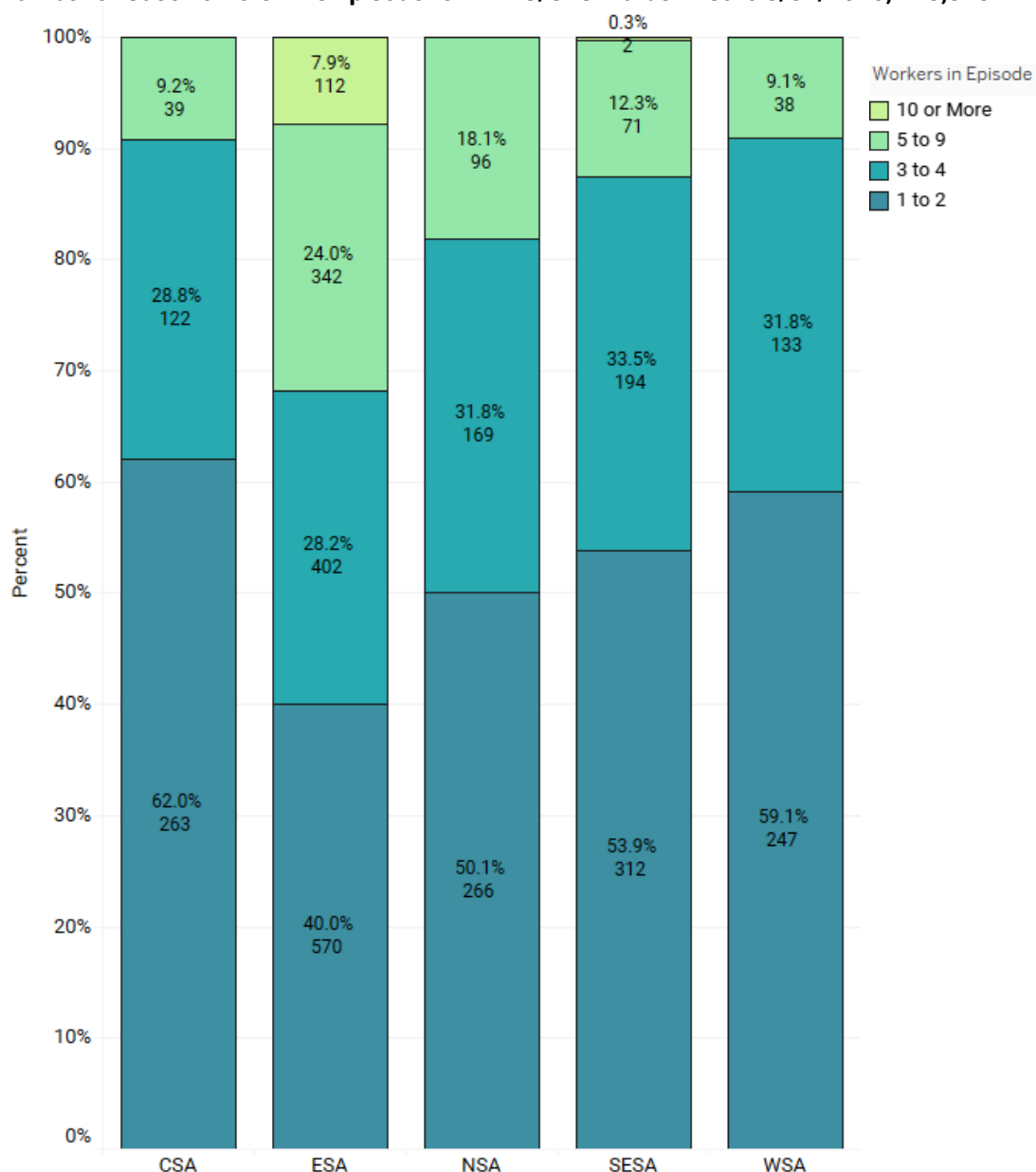
<sup>17</sup> Review of Turnover in Milwaukee County Private Agency Child Welfare Ongoing Case Management Staff, January 2005. Authors C. Flower, J. McDonald, and M. Sumski. Inquiries regarding the report should be directed to Child Welfare Associates LLC in Wheaton, IL. [turnoverstudy.pdf \(uh.edu\)](https://www.turnoverstudy.pdf(uh.edu))

<sup>18</sup> "How Does Turnover Affect Outcomes - Casey Family Programs." 2017. Casey Family Programs. December 29, 2017. <https://www.casey.org/turnover-costs-and-retention-strategies/>.

<sup>19</sup> "How Does Turnover Affect Outcomes - Casey Family Programs." 2017

<sup>20</sup> The FCRO has determined that there are issues with the way that DHHS reports the number of caseworker changes. Therefore, this information is issued with the caveat "as reported by DHHS."

<sup>21</sup> PromiseShip held the lead agency contract with DHHS until 2019 when DHHS rebid the contract and awarded it to Saint Francis Ministries. Cases transferred in the fall of 2019. Many former PromiseShip caseworkers were subsequently employed by Saint Francis. Then in spring 2022 the contract was discontinued, and many Saint Francis workers were hired as DHHS/CFS Case Managers. Throughout those transfers if the same worker remained with the child's case without a break of service, the FCRO ensured that the worker count was not increased. Counts were only increased during each transfer period if a new person became involved with the child and family.

**Figure 19: Number of Caseworkers This Episode for DHHS/CFS Wards in Care 3/31/2025, n=3,378**

Just over a fifth (20.7%) of the children served by DHHS/CFS have had five or more caseworkers during their current episode in care. Children in the Eastern Service Area (ESA), which had been served by a private contractor, were disproportionately impacted by caseworker changes, and had a much higher percentage of children with five or more caseworkers than any other service area in the state. In fact, many children (31.9%) in the ESA had five or more workers, and of those, 112 children (7.9% of the ESA total) had 10 or more workers in their current episode in care, just slightly less than the previous year. This does not include caseworkers that may have worked with the child during a previous episode in out-of-home care or a non-court, voluntary case. The FCRO encourages DHHS/CFS to continue to decrease the number of children who have had five or more caseworkers in their most recent episode in care.



## DUALLY INVOLVED YOUTH

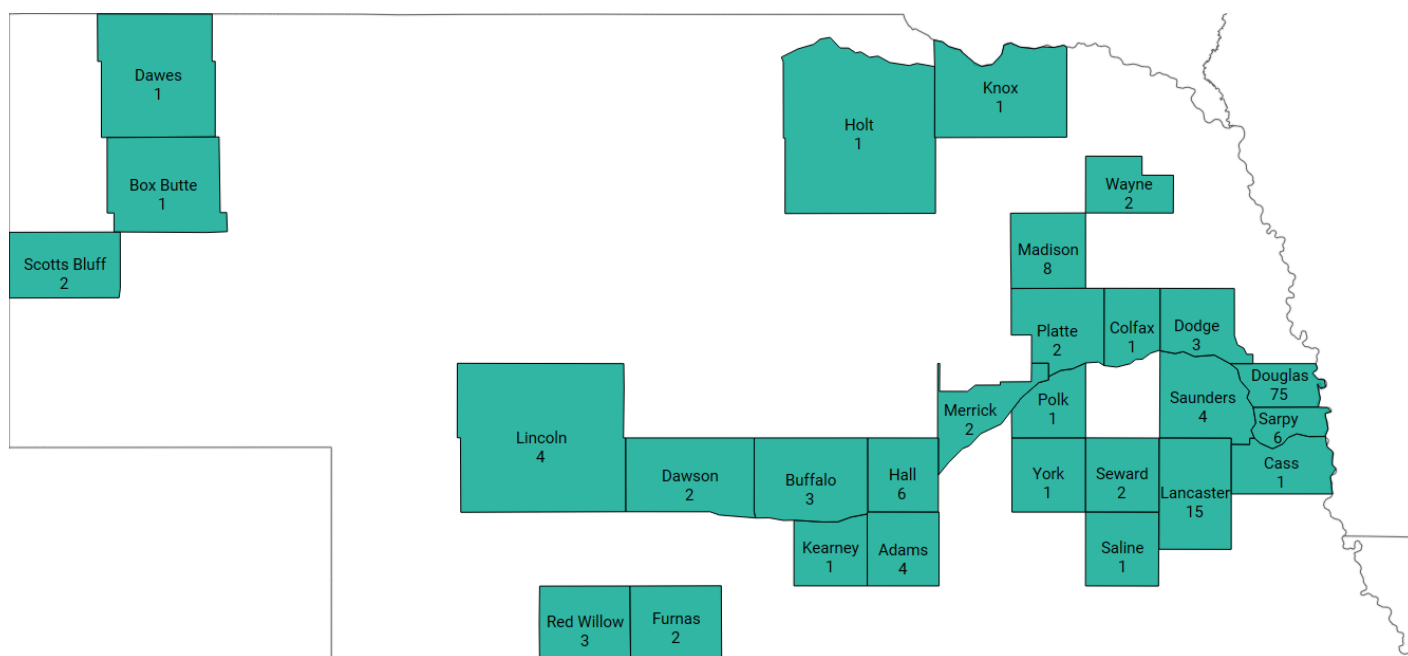
### COURT-INVOLVED YOUTH IN CARE THROUGH CHILD WELFARE AND SUPERVISED BY THE ADMINISTRATIVE OFFICE OF COURTS AND PROBATION – JUVENILE SERVICES DIVISION

This section includes point-in-time data for court-involved youth in out-of-home care, or a trial home visit simultaneously involved in the Child Welfare System (abuse and neglect) and supervised by the Administrative Office of Courts and Probation – Juvenile Services Division.

#### POINT-IN-TIME DEMOGRAPHICS AND PLACEMENTS

**County.** On 3/31/2025, there were 155 dually involved youths in out-of-home care, which is a 12.3% increase from the 138 youths on 3/31/2024. (See Appendix A for a list of counties and their respective judicial districts and service areas).

**Figure 20: County of Origin for Dually Involved Youth on 3/31/2025, n=155**



\*Counties with no description or shading did not have any youth in out-of-home care simultaneously involved with DHHS/CFS and Probation. These are predominately counties with sparse populations of children and youth. Youth who received services in the parental home without experiencing a removal and children and youth placed directly with a non-custodial parent are not included as they are not within the FCRO's authority to track or review.

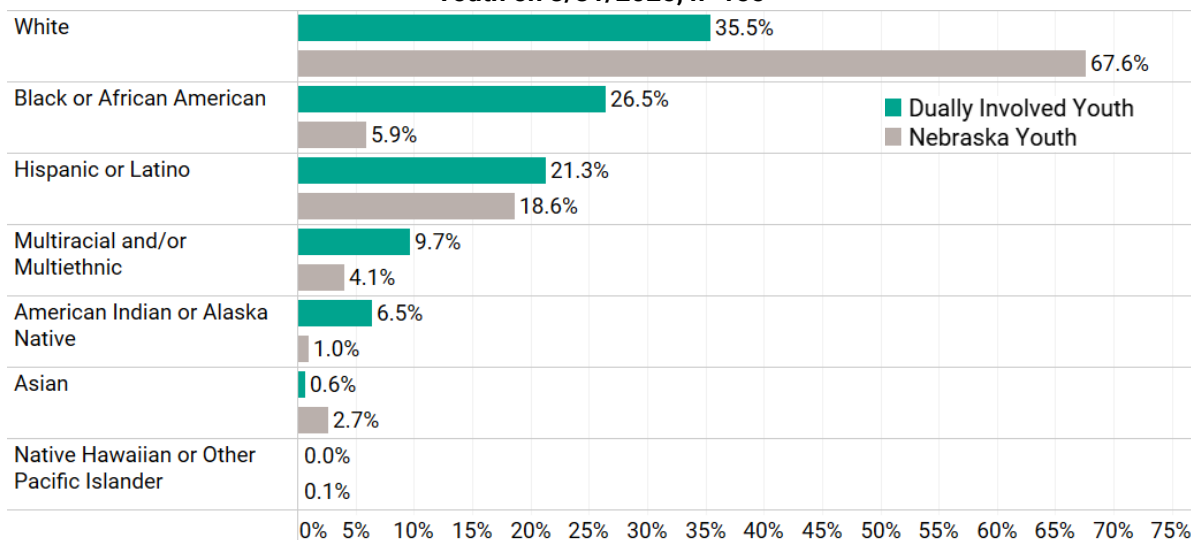
**Age.** The median age for dually involved youth was 16 years old for both males and females.

- 2 (1.3%) were age 11-12.
- 19 (12.3%) were age 13-14.
- 76 (49.0%) were age 15-16.
- 58 (37.4%) were age 17-18.

**Gender.** Males outnumbered females among dually involved youth (57.4% to 42.6%, respectively).

**Race and Ethnicity.** As discussed throughout this report, there is racial disproportionality in this group also. Many racial and ethnic groups of color are overrepresented, while white youth are underrepresented.

**Figure 21: Race and Ethnicity of Dually Involved Youth in Out-of-Home Care Compared to Nebraska Youth on 3/31/2025, n=155**



**Times in Care Over Lifetime.** The average number of times in care over their lifetime for current dually involved youth as of 3/31/2025 was 1.8.

**Median Length of Stay.** For those in care on 3/31/2025, the median number of days in care for dually involved youth was 600 days.

**Number of Placements.** The average number of placements over their lifetime for dually involved youth on 3/31/2025 was 10.0.

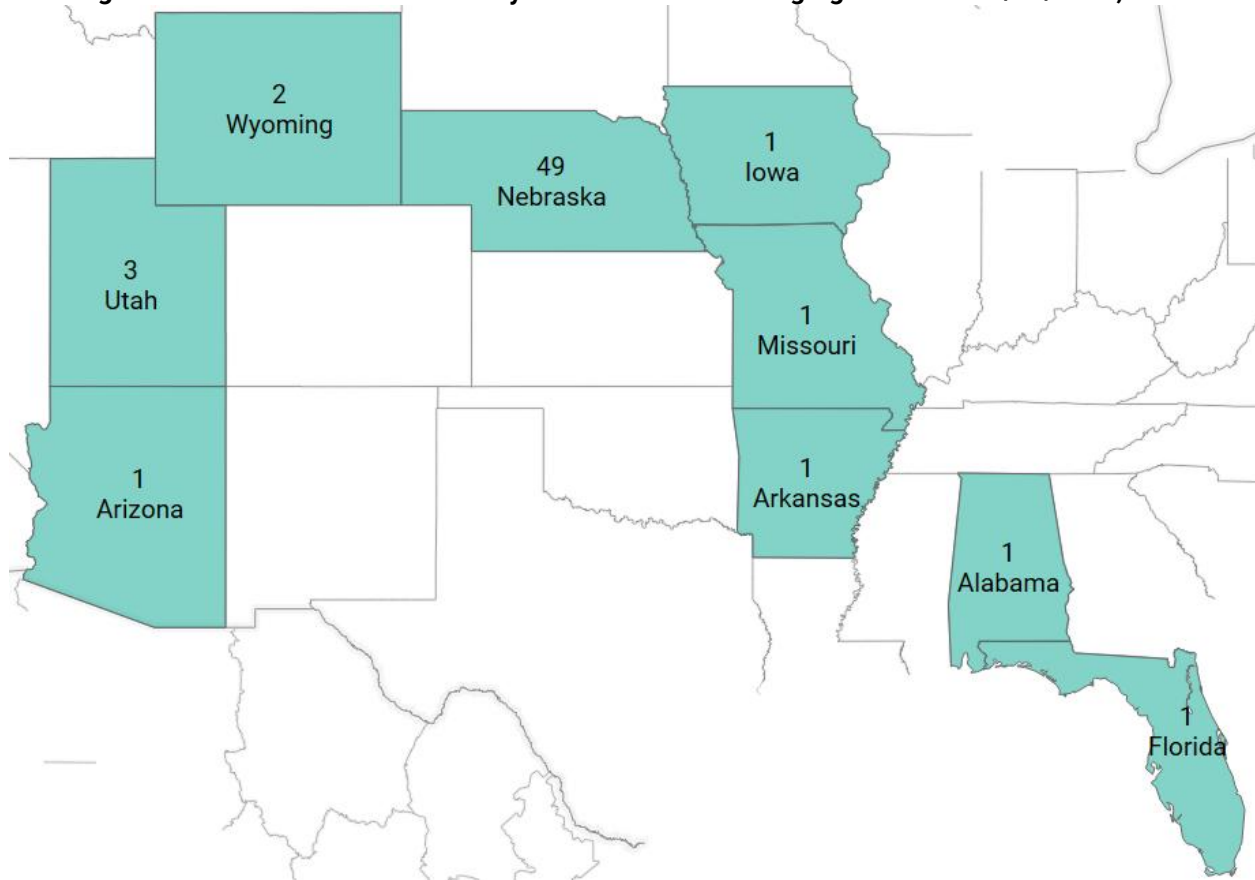
**Placement Types.** On 3/31/2025:

- 53.6% were in family-like settings (relative, kin, or non-relative foster care).
- 15.5% were in non-treatment congregate care, excluding corrections related placements (see below).
- 12.9% were in a corrections related placement.
- 10.3% were in treatment congregate care.
- 4.5% were missing from care.
- 3.2% were in independent living.

**Missing from Care.** On 3/31/2025, there were seven dually involved youth missing from care. Of the missing youth, two were female and five were male.

**Congregate Care.** Most (81.7%) dually involved youth in congregate care were placed in Nebraska.

**Figure 22: Placement State for Dually Involved Youth in Congregate Care on 3/31/2025, n=60**



## PROBATION YOUTH

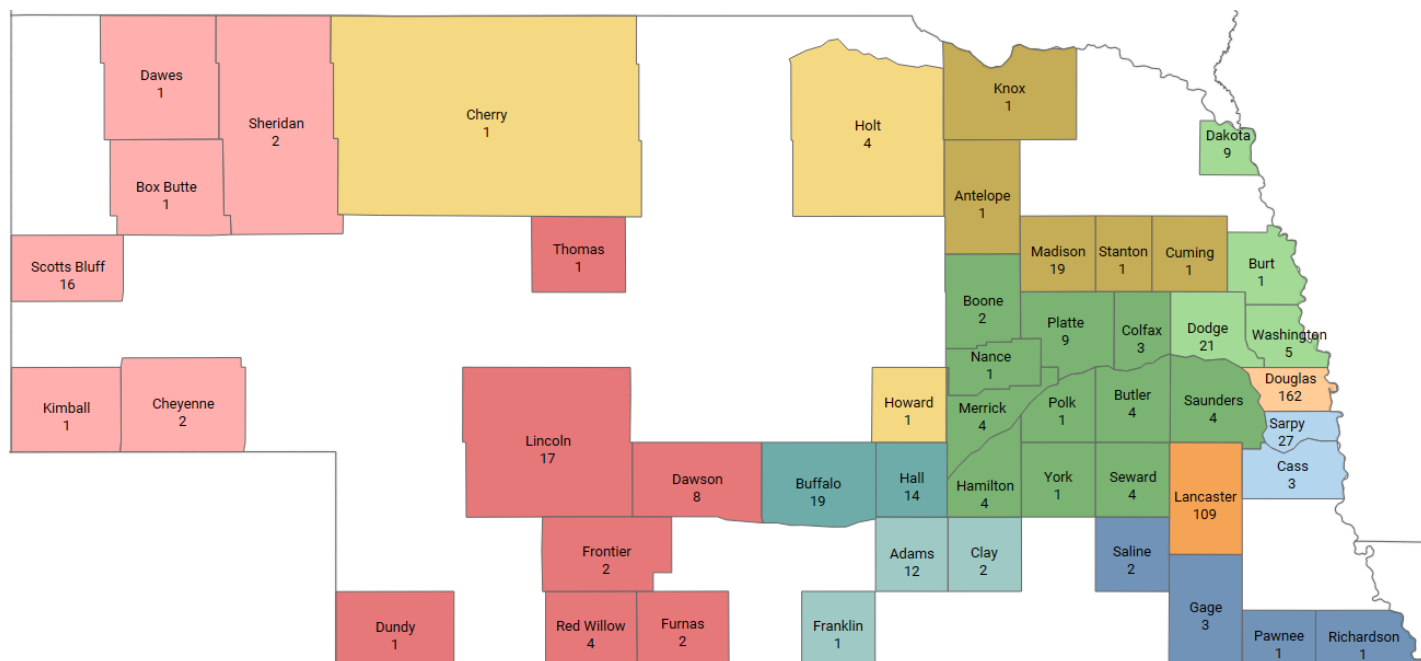
### YOUTH IN OUT-OF-HOME CARE SUPERVISED BY THE ADMINISTRATIVE OFFICE OF THE COURTS AND PROBATION – JUVENILE SERVICES DIVISION

This section includes point-in-time data for court-involved youth in out-of-home care for Probation only supervised youth.

#### POINT-IN-TIME DEMOGRAPHICS AND PLACEMENTS

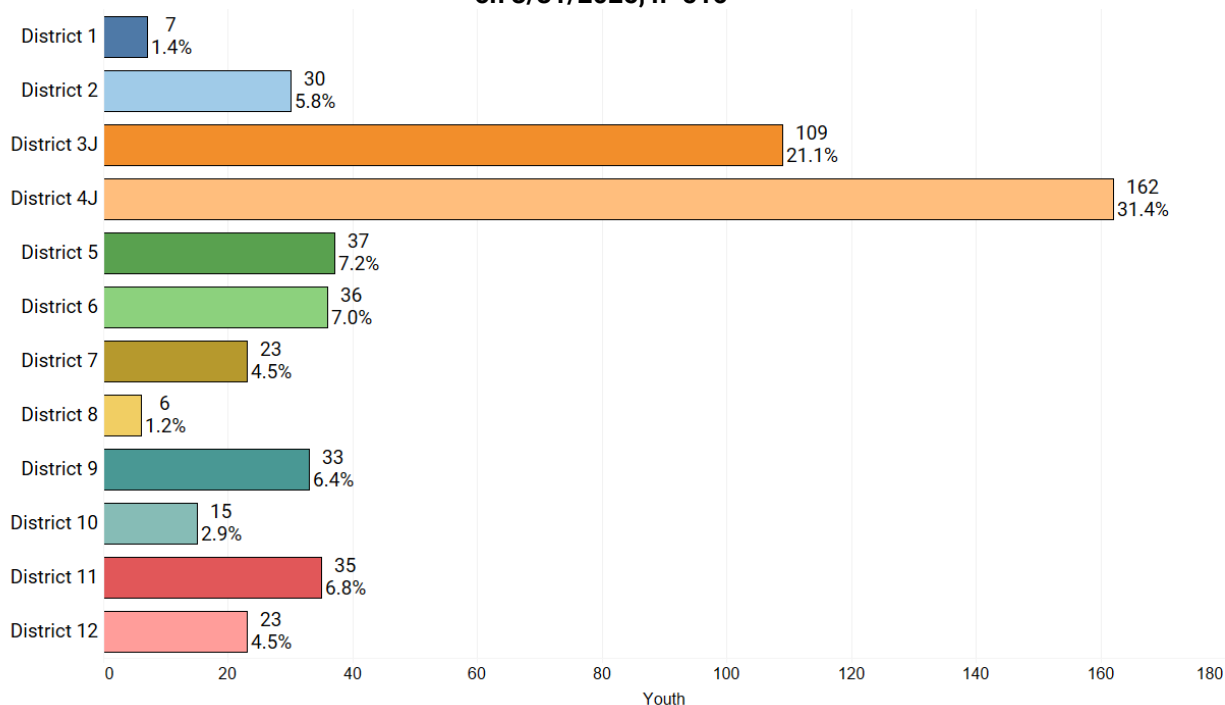
**County.** Figure 23 shows the county of court jurisdiction for Probation supervised youth in out-of-home care on 3/31/2025, based on the judicial district. On 3/31/2025, there were 516 youths in out-of-home care supervised by Probation compared to 480 on 3/31/2024, a 7.5% increase. (See Appendix A for a list of counties and their respective districts).

**Figure 23: County of Court Jurisdiction for Probation Supervised Youth in Out-of-Home Care on 3/31/2025, n=516**



\*Counties with no description or shading did not have any youth in out-of-home care under Probation supervision. These are predominately counties with sparse populations of children and youth. Youth who received services in the parental home without experiencing a removal and youth placed directly with a non-custodial parent are not included as they are not within the FCRO's authority to track or review.

**Figure 24: Probation Districts for Probation Supervised Youth in Out-of-Home Care or a Trial Home Visit on 3/31/2025, n=516**



**Age.** The median age of Probation supervised youth in out-of-home care on 3/31/2025 was 16 years old for both males and females.

- 8 (1.6%) were age 11-12.
- 65 (12.6%) were age 13-14.
- 242 (46.9%) were age 15-16.
- 201 (39.0%) were age 17-18.

**Gender.** Males were 71.3% of the population of Probation supervised youth in out-of-home care, females were 28.7%.

**Race.** Black or African American and American Indian or Alaska Native youth were disproportionately represented in the population of Probation supervised youth in out-of-home care.

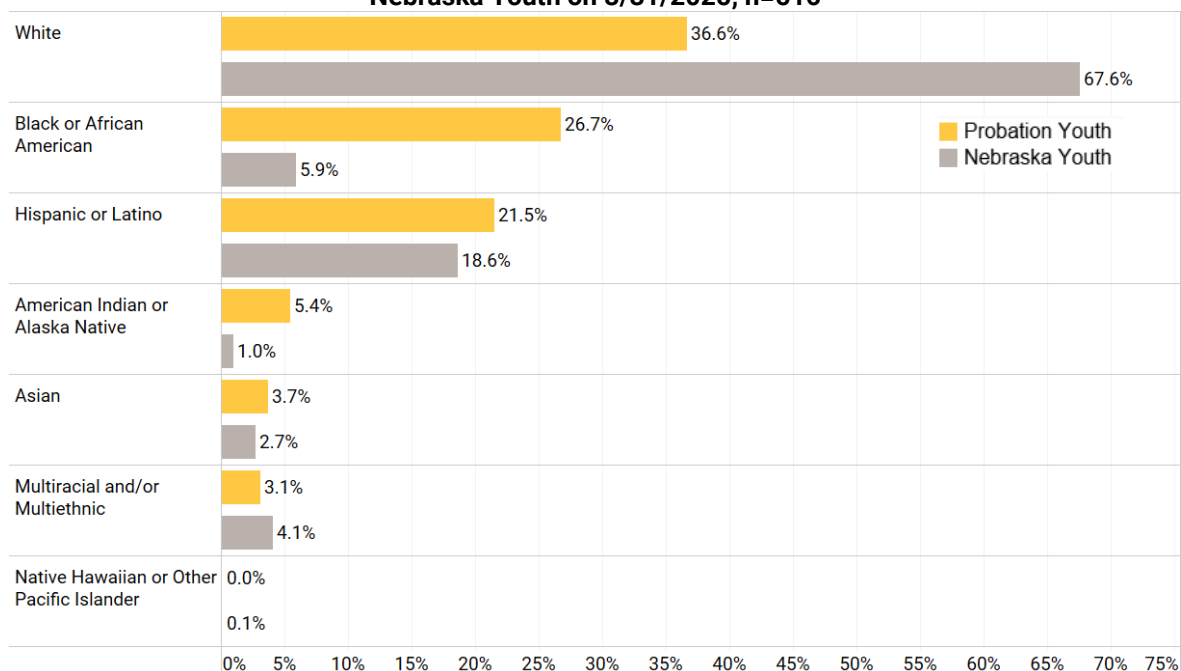
- As shown in Figure 25, Black or African American youth make up 5.9% of Nebraska's youth population but represent 26.7% of the Probation supervised youth in out-of-home care.
- American Indian or Alaska Native youth are just 1.0% of Nebraska's youth population, but 5.4% of the Probation supervised youth in out-of-home care.<sup>22</sup>

The disproportionality for Black or African American youth has increased 4.6% and the disproportionality for American Indian or Alaska Native youth has slightly increased from the previous year (22.1% and 5.0%, respectively).

<sup>22</sup> The number of American Indian or Alaska Native youth in out-of-home care while on probation does not include those involved in Tribal Court.



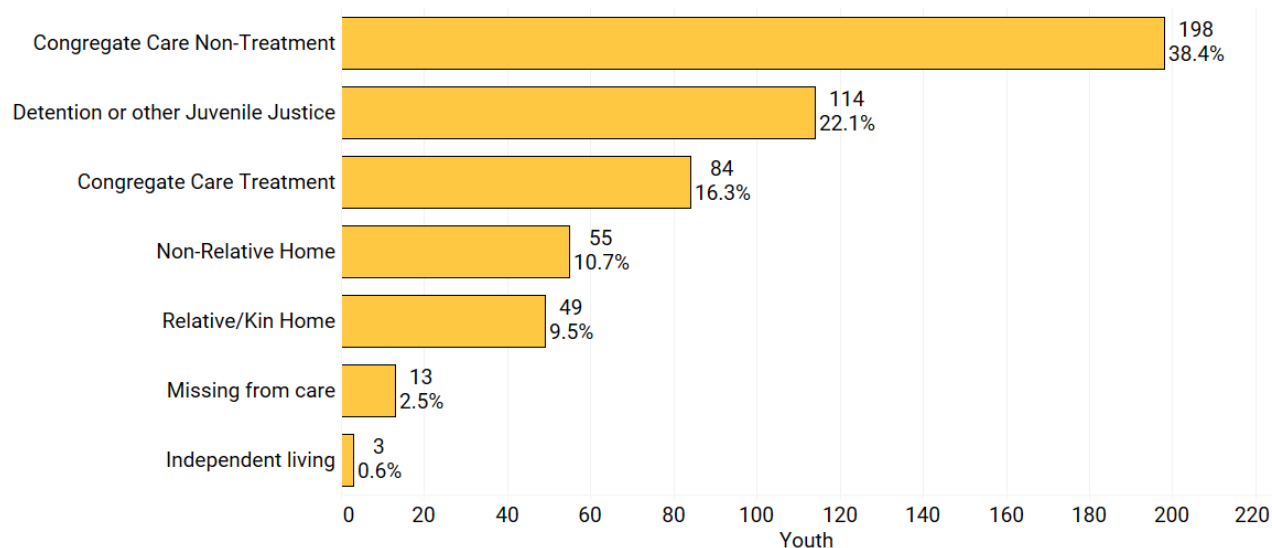
## Juvenile Probation

**Figure 25: Race and Ethnicity of Probation Supervised Youth in Out-of-Home Care Compared to Nebraska Youth on 3/31/2025, n=516**

**Times in Care Over Lifetime.** The average number of times in care over their lifetime for Probation supervised youth as of 3/31/2025 was 2.1.

**Median Length of Stay.** For those in care on 3/31/2025, the median number of days in care for Probation supervised youth was 179.5 days.

**Placement Type.** Probation supervised youth in out-of-home care were most frequently placed in a non-treatment group care facility (Figure 26). Of note, 22.1% were in a detention-type setting and only 16.3% were in a treatment facility.

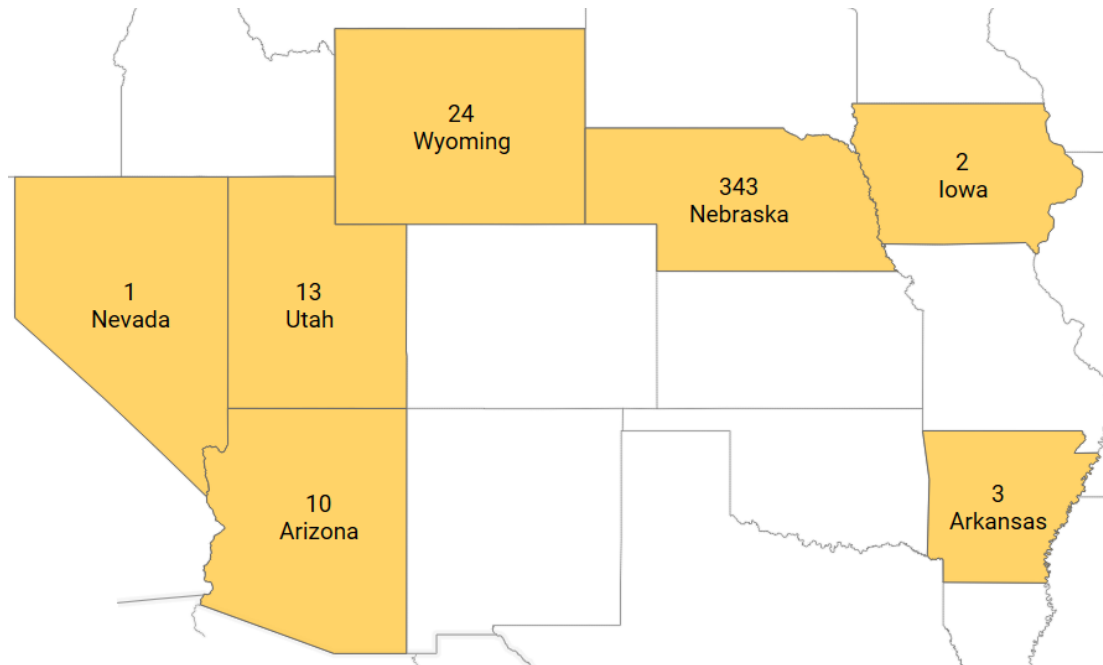
**Figure 26: Probation Supervised Youth in Out-of-Home Care on 3/31/2025 by Placement Type, n=516**

**Number of Placements.** The average number of lifetime placements as of 3/31/2025 for Probation supervised youth was 5.0 placements.

**Missing from Care.** On 3/31/2025, there were 13 Probation supervised youth missing from care. Of the missing youth, three were female and 10 were male.

**Congregate Care.** Comparing 3/31/2025 to 3/31/2024, there was a 10.0% increase in the number of Probation supervised youth placed in congregate care facilities (396 and 360, respectively). On 3/31/2025, 86.6% were placed in Nebraska.

**Figure 27: Probation Supervised Youth in Congregate Care on 3/31/2025 by State of Placement, n=396**



## YRTC YOUTH

### YOUTH PLACED AT THE YOUTH REHABILITATION AND TREATMENT CENTERS

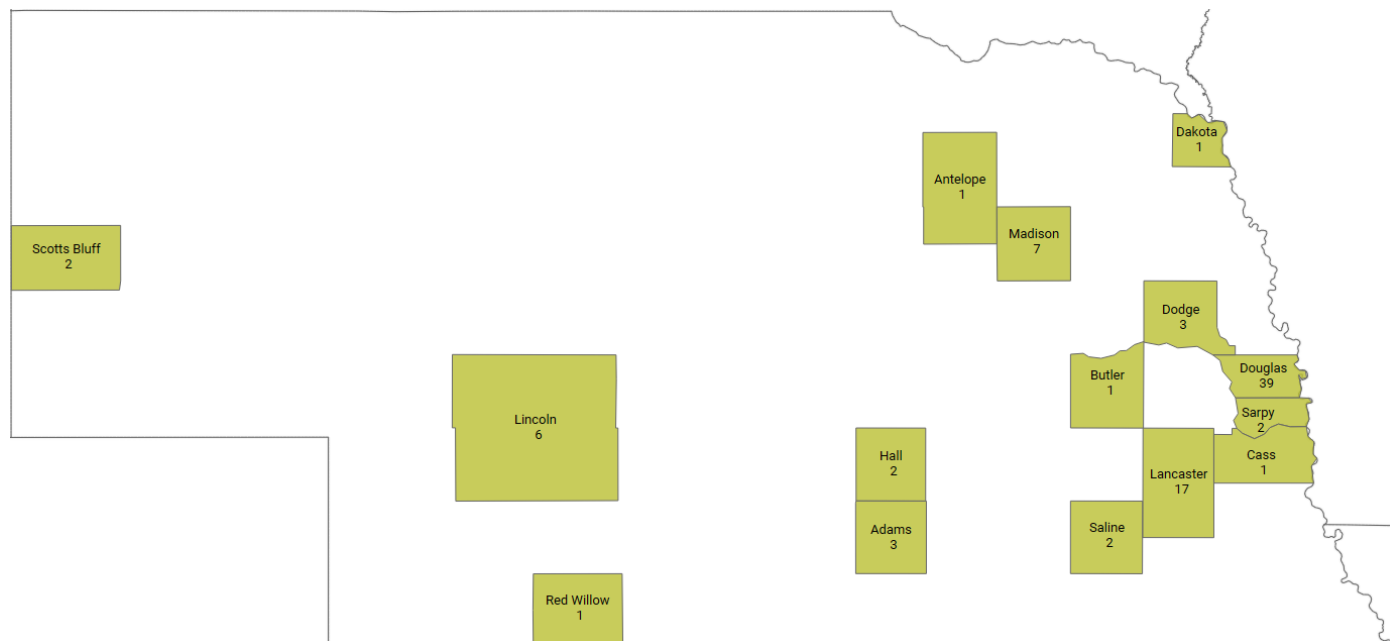
This section includes point-in-time data for youth placed at a Youth Rehabilitation and Treatment Center (YRTC). There are currently three YRTC facilities in the state; they are located in Lincoln, Hastings, and Kearney. Data describes population trends, snapshot distributions, and point-in-time data for youth at the YRTCs.

Over the past few years, the YRTC system has gone through some substantial changes, including to the program, the educational structure, and even the physical locations. While some changes were in response to COVID-19, other changes were aimed to improve the programs within the YRTC system. Only the most pertinent measures are included in this section.

### POINT-IN-TIME DEMOGRAPHICS

**County.** On 3/31/2025, there were 93 youth involved with OJS and Probation; 88 of these youth were placed at a YRTC. Of the five remaining youths not at a YRTC, three were placed at a detention center or juvenile justice facility, one was in an approved kinship placement, and one was in a non-relative placement. Figure 28 illustrates the county of court of each of the 88 youths placed at a YRTC.

**Figure 28: Youth Placed by a Juvenile Court at a YRTC on 3/31/2025 by County of Court, n=88**



\*Counties with no shading had no youth at one of the YRTCs on that date.

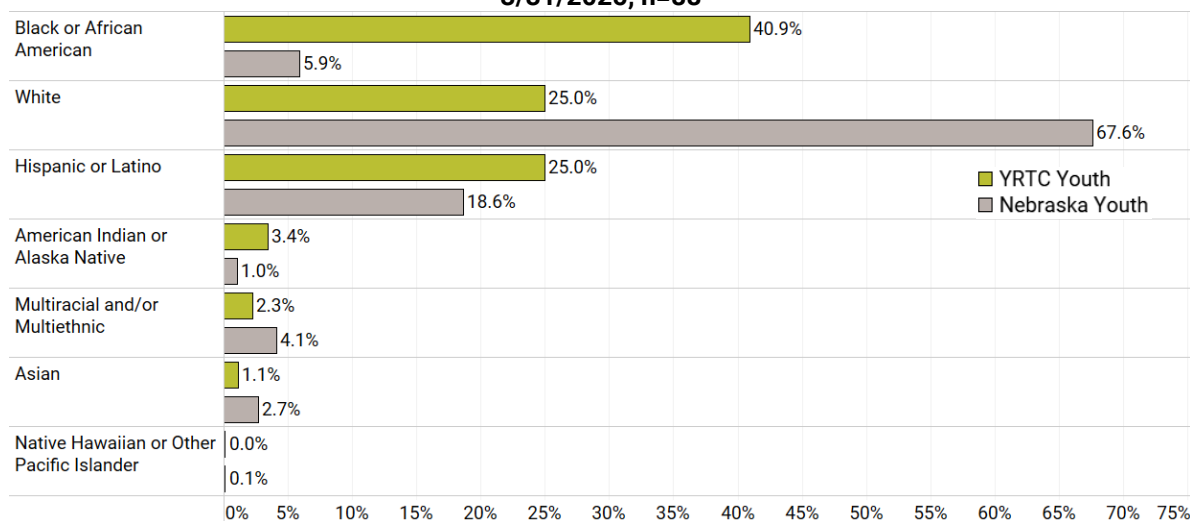
**Age.** By law, youth placed at a YRTC range in age from 14 to 18. On 3/31/2025, the median age for males was 17 years old and for females it was 16 years old.

**Gender.** On 3/31/2025, there were 76 males, and 12 females placed at a YRTC.

**Race and Ethnicity.** Youth of color are disproportionately represented at the YRTCs. In particular:

- Black or African American and American Indian or Alaska Native youth were disproportionately represented in the YRTC population on 3/31/2025.
  - Black or African American youth make up 5.9% of Nebraska's youth population but were 40.9% of the YRTC population on 3/31/2025. This is an overrepresentation of nearly seven times their census population.
  - American Indian or Alaska Native youth make up only 1.0% of Nebraska's youth population but were 3.4% of the YRTC population on 3/31/2025, meaning they are overrepresented by more than three times their census population.

**Figure 29: Race and Ethnicity of Youth Placed at a YRTC Compared to Nebraska Youth on 3/31/2025, n=88**



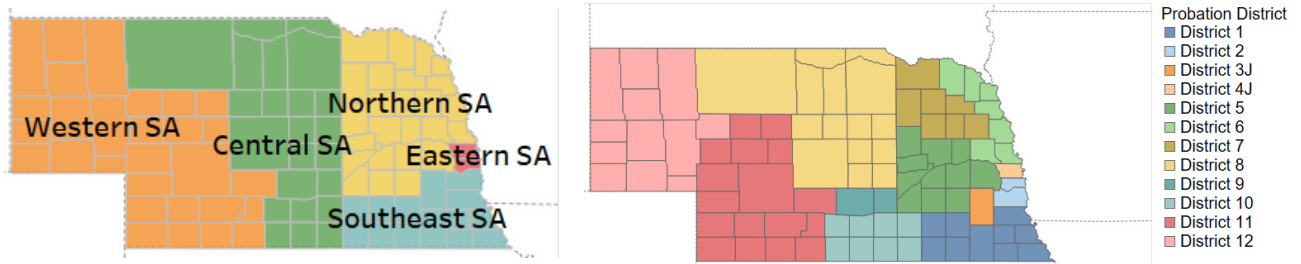
**Times in Care Over Lifetime.** The average number of times in care over their lifetime for youth at a YRTC on 3/31/2025 was 2.8.

**Median Length of Stay.** For those in care on 3/31/2025, the median number of days in care for youth at a YRTC was 414.5 days.

**Number of Placements.** The average number of placements over their lifetime for youth at a YRTC on 3/31/2025 was 9.3.

## Appendix A

### County to DHHS Service Area and Judicial (Probation) District<sup>23</sup>



County	DHHS Service Area	Probation District
Adams	Central SA	District 10
Antelope	Northern SA	District 7
Arthur	Western SA	District 11
Banner	Western SA	District 12
Blaine	Central SA	District 8
Boone	Northern SA	District 5
Box Butte	Western SA	District 12
Boyd	Central SA	District 8
Brown	Central SA	District 8
Buffalo	Central SA	District 9
Burt	Northern SA	District 6
Butler	Northern SA	District 5
Cass	Southeast SA	District 2
Cedar	Northern SA	District 6
Chase	Western SA	District 11
Cherry	Central SA	District 8
Cheyenne	Western SA	District 12
Clay	Central SA	District 10
Colfax	Northern SA	District 5
Cuming	Northern SA	District 7
Custer	Central SA	District 8

County	DHHS Service Area	Probation District
Dakota	Northern SA	District 6
Dawes	Western SA	District 12
Dawson	Western SA	District 11
Deuel	Western SA	District 12
Dixon	Northern SA	District 6
Dodge	Northern SA	District 6
Douglas	Eastern SA	District 4J
Dundy	Western SA	District 11
Fillmore	Southeast SA	District 1
Franklin	Central SA	District 10
Frontier	Western SA	District 11
Furnas	Western SA	District 11
Gage	Southeast SA	District 1
Garden	Western SA	District 12
Garfield	Central SA	District 8
Gosper	Western SA	District 11
Grant	Western SA	District 12
Greeley	Central SA	District 8
Hall	Central SA	District 9
Hamilton	Northern SA	District 5
Harlan	Central SA	District 10

<sup>23</sup> District boundaries in statute effective July 20, 2018, Neb. Rev. Stat. §24-301.02. DHHS service areas per Neb. Rev. Stat. §81-3116.

County	DHHS Service Area	Probation District
Hayes	Western SA	District 11
Hitchcock	Western SA	District 11
Holt	Central SA	District 8
Hooker	Western SA	District 11
Howard	Central SA	District 8
Jefferson	Southeast SA	District 1
Johnson	Southeast SA	District 1
Kearney	Central SA	District 10
Keith	Western SA	District 11
Keya Paha	Central SA	District 8
Kimball	Western SA	District 12
Knox	Northern SA	District 7
Lancaster	Southeast SA	District 3J
Lincoln	Western SA	District 11
Logan	Western SA	District 11
Loup	Central SA	District 8
Madison	Northern SA	District 7
McPherson	Western SA	District 11
Merrick	Northern SA	District 5
Morrill	Western SA	District 12
Nance	Northern SA	District 5
Nemaha	Southeast SA	District 1
Nuckolls	Central SA	District 10
Otoe	Southeast SA	District 1
Pawnee	Southeast SA	District 1
Perkins	Western SA	District 11
Phelps	Central SA	District 10
Pierce	Northern SA	District 7
Platte	Northern SA	District 5
Polk	Northern SA	District 5
Red Willow	Western SA	District 11
Richardson	Southeast SA	District 1

County	DHHS Service Area	Probation District
Rock	Central SA	District 8
Saline	Southeast SA	District 1
Sarpy	Eastern SA	District 2
Saunders	Northern SA	District 5
Scotts Bluff	Western SA	District 12
Seward	Northern SA	District 5
Sheridan	Western SA	District 12
Sherman	Central SA	District 8
Sioux	Western SA	District 12
Stanton	Northern SA	District 7
Thayer	Southeast SA	District 1
Thomas	Western SA	District 11
Thurston	Northern SA	District 6
Valley	Central SA	District 8
Washington	Northern SA	District 6
Wayne	Northern SA	District 7
Webster	Central SA	District 10
Wheeler	Central SA	District 8
York	Northern SA	District 5

## Appendix B

### Glossary of Terms and Acronyms

**Adjudication** is the process whereby a court establishes its jurisdiction for continued intervention in the family's situation. Issues found to be true during the court's adjudication hearing are to subsequently be addressed and form the basis for case planning throughout the remainder of the case. Factors adjudicated by the court also play a role in a termination of parental rights proceeding should that become necessary.

**AILA** is an Approved Informal Living Arrangement for children who are involved with DHHS/CFS and placed in out-of-home care voluntarily by their parents. AILA cases are not court-involved.

**Child** is defined by statute [Neb. Rev. Stat. §43-245(2)] as being age birth through eighteen; in Nebraska a child becomes a legal adult on their 19<sup>th</sup> birthday.

**Congregate care** includes non-treatment group facilities, facilities that specialize in psychiatric, medical, or juvenile justice related issues, and group emergency placements.

**Court** refers to the Separate Juvenile Court or County Court serving as a Juvenile Court. Those are the courts with jurisdiction for cases involving child abuse, child neglect, and juvenile delinquency.

**Delinquency** refers to offenses that constitute criminal behavior in adults – misdemeanors, felonies, or violations of a city ordinance.

**DHHS/CFS** is the Nebraska Department of Health and Human Services Division of Children and Family Services. DHHS/CFS serves children with state involvement due to abuse or neglect (child welfare).

**DHHS/OJS** is the Department of Health and Human Services (DHHS) Office of Juvenile Services. **OJS** oversees the **YRTCs**, which are the Youth Rehabilitation and Treatment Centers for delinquent youth.

**Disproportionality/overrepresentation** refers to instances where the rate of what is measured (such as race or gender) in the foster care population significantly differs from the rate in the overall population of Nebraska's children.

**Dually involved youth** are court-involved youth in care through the child welfare system (DHHS/CFS) simultaneously supervised by the Administrative Office of Courts and Probation - Juvenile Services Division.

**Episode** refers to the period between removal from the parental home and the end of court action. There may be THV placements during this time.

**FCRO** is the Foster Care Review Office, the author of this report.

**Guardian Ad Litem (GAL)** is to "stand in lieu of a parent of a protected juvenile who is the subject of a juvenile court petition..." and "shall make every reasonable effort to become familiar with the needs of the protected juvenile which shall include...consultation with the juvenile." according to Neb. Rev. Stat. §43-272.01.

**ICWA** refers to the Indian Child Welfare Act.

**Kinship home.** Per Neb. Rev. Stat. §71-1901(7) "kinship home" means a home where a child or children receive out-of-home care and at least one of the primary caretakers has previously lived with or is a trusted adult that has a preexisting, significant relationship with the child or children or a sibling of such child or children as described in Neb. Rev. Stat. §43-1311.02(8).

**Missing from care** includes children and youth whose whereabouts are unknown. Those children are sometimes referred to as runaways and are at a much greater risk for human trafficking.

**n** refers to the number of individuals represented within the dataset.

**Neglect** is a broad category of serious parental acts of omission or commission resulting in the failure to provide for a child's basic physical, medical, educational, and/or emotional needs. This could include a failure to provide minimally adequate supervision.

**Normalcy** includes extracurricular, or other enrichment and fun activities designed to give any child the skills that will be useful as adults, such as strengthening the ability to get along with peers, leadership skills, and skills common for hobbies such as those in 4-H, choir, band, scouts, athletics, etc.

**Out-of-home (OOH) care** is 24-hour substitute care for children placed away from their parents or guardians and for whom a state agency has placement and care responsibility. This includes, but is not limited to, foster family homes, foster homes of relatives or kin, group homes, emergency shelters, residential treatment facilities, child-care institutions, pre-adoptive homes, detention facilities, youth rehabilitation facilities, and children missing from care. It includes court-ordered placements only unless noted.

The FCRO uses the term "out-of-home care" to avoid confusion because some researchers and groups define "**foster care**" narrowly as only care in foster family homes, while the term "**out-of-home care**" is broader.

**Probation** is a shortened reference to the Administrative Office of the Courts and Probation – Juvenile Services Division. Geographic areas under Probation are called districts.

**Psychotropic medications** are drugs prescribed with the primary intent to stabilize or improve mood, behavior, or mental illness. There are several categories of these medications, including antipsychotics, antidepressants, anti-anxiety, mood stabilizers, and cerebral/psychomotor stimulants.<sup>24,25</sup>

**Relative placement**. Neb. Rev. Stat. §71-1901(9) defines "relative placement" as one in which the foster caregiver has a blood, marriage, or adoption relationship to the child or a sibling of the child; and for American Indian children they may also be an extended family member per the child's Tribe's definition of extended family.

**Structured Decision Making (SDM)** is a proprietary set of evidence-based assessments that DHHS/CFS used to guide decision-making. Per the CFS Field Guidance on Assessments of Family, made effective December 1, 2023; previously used SDM assessments are no longer required.

**Service Area (SA)** is the geographic region within the state of Nebraska responsible for DHHS wards. The service areas are broken out as Central, Eastern, Northern, Southeast, and Western. Counties in each are listed in Appendix A.

**SFA** is the federal Strengthening Families Act. Among other requirements for the child welfare system, the Act requires courts to make certain findings during court reviews.

**Siblings** are children's brothers and sisters, whether full, half, or legal.

**System Oversight Specialists (SOS)** are FCRO staff members that perform reviews, facilitate board meetings, and work directly with volunteers who provide recommendations to the court for each individual child reviewed in out-of-home care.

**Status offense** is a term that applies to conduct that would not be considered criminal if committed by an adult, such as truancy or leaving home without permission.

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<sup>24</sup> American Academy of Child and Adolescent Psychiatry. February 2012. "A Guide for Community Child Serving Agencies on Psychotropic Medications for Children and Adolescents. Available at: [https://www.aacap.org/App\\_Themes/AACAP/docs/press/guide\\_for\\_community\\_child\\_serving\\_agencies\\_on\\_psychotropic\\_medications\\_for\\_children\\_and\\_adolescents\\_2012.pdf](https://www.aacap.org/App_Themes/AACAP/docs/press/guide_for_community_child_serving_agencies_on_psychotropic_medications_for_children_and_adolescents_2012.pdf)

<sup>25</sup> State of Florida Department of Children and Families Operating Procedure. October 2018. "Guidelines for the Use of Psychotherapeutic Medications in State Mental Health Treatment Facilities." Available at: [https://www.myflfamilies.com/sites/default/files/2022-12/cfop\\_155-01\\_guidelines\\_for\\_the\\_use\\_of\\_psychotherapeutic\\_medications\\_in\\_state\\_mental\\_health\\_treatment\\_facilities.pdf](https://www.myflfamilies.com/sites/default/files/2022-12/cfop_155-01_guidelines_for_the_use_of_psychotherapeutic_medications_in_state_mental_health_treatment_facilities.pdf)



**Termination of Parental Rights (TPR)** is the most extreme remedy for parental deficiencies. With a TPR, parents lose all rights, privileges, and duties regarding their children and children's legal ties to the parent are permanently severed. Severing parental ties can be extremely hard on children, who in effect become legal orphans; therefore, in addition to proving one or more of the grounds enumerated in Neb. Rev. Stat. §43-292, it requires proof that the action is in the children's best interests.

**Trial home visits (THV)** by statute are temporary placements with the parent(s) from which the child was removed and during which the Court and DHHS/CFS remain involved. This applies only to DHHS wards, not to youth who are only under Probation supervision.

**Youth** is a term used by the FCRO in deference to the developmental stage of children involved with the juvenile justice system and older children involved in the child welfare system.

## Appendix C

### The Foster Care Review Office

The Foster Care Review Office (FCRO) celebrated 42 years of service on July 1, 2024. The FCRO is the independent state agency responsible for overseeing the safety, permanency, and well-being of children in out-of-home care in Nebraska. Through a process that includes case reviews, data collection and analysis, and accountability, we are the authoritative voice for all children and youth in out-of-home care.

**Mission.** Ultimately, our mission is for the recommendations we make to result in meaningful change, great outcomes, and hopeful futures for children and families.

**Data.** Tracking is facilitated by the FCRO's independent data system, through collaboration with our partners at DHHS and the Administrative Office of the Courts and Probation. Every episode in care, placement change, and caseworker/probation officer change is tracked; relevant court information for each child is gathered and monitored; and data relevant to the children reviewed is gathered, verified, and entered into the data system by FCRO staff. This allows us to analyze large scale system changes and select children for citizen review based on the child's time in care and certain upcoming court hearings.<sup>26</sup>

Once a child is selected for review, FCRO System Oversight Specialists track children's outcomes and facilitate citizen reviews. Local board members, who are community volunteers who have successfully completed required initial and ongoing instruction, conduct case file reviews, and make required findings.<sup>27</sup>

**Oversight.** The oversight role of the FCRO is two-fold. During each case file review, the needs of each specific child are reviewed, the results of those reviews are shared with the legal parties on the case, and if the system is not meeting those needs, the FCRO will advocate for the best interest of the individual child. Simultaneously, the data collected from every case file review is used to provide a system-wide view of changes, successes, and challenges of the complicated worlds of child welfare and juvenile justice.

**Looking forward.** The recommendations in this report are based on the careful analysis of the FCRO data. The FCRO will continue to tenaciously make recommendations and to repeat unaddressed recommendations as applicable, until Nebraska's child welfare and juvenile justice systems have a stable, well-supported workforce that utilizes best practices and a continuum of evidence-based services accessible across the state, regardless of geography.

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<sup>26</sup> Data quoted in this report are from the FCRO's independent data tracking system and FCRO completed case file reviews unless otherwise noted.

<sup>27</sup> Children and youth are typically reviewed at least once every six months for as long as they remain in care.

## ADDITIONAL INFORMATION IS AVAILABLE

The Foster Care Review Office can provide additional information on many of the topics in this Report. For example, much of the data previously presented can be further divided by judicial district, DHHS/CFS service area, county of court involved in the case, and various demographic measures.

Some of the most requested data is publicly accessible with easy-to-use sort and limitation features at the FCRO's data dashboard:

[https://fcro.nebraska.gov/data\\_dashboards.html](https://fcro.nebraska.gov/data_dashboards.html)

If you are interested in more data on a particular topic, or would like a speaker to present on the data, please contact us with the specifics of your request at:

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