Mission Statement:
Across Douglas County, our vision is a comprehensive, coordinated, and community-wide approach to juvenile services that eliminates the need for youth involvement with our justice system while maintaining public safety.

For all youth who do enter our justice system, our goals are to provide effective, compassionate and individualized support that empowers youth and their families to succeed and to build an environment of mutual trust and accountability.

Prevention Work Group Purpose Statement
Reduce system entry and recidivism by strengthening community support and increasing access to preventative services.

I. Welcome and Introductions
   a. Present: Andrea Wright, Sara Riffel, Melissa Schaefer, Aleah Stennis, Phillip Burrell, Reshea Bristol, Ronda Newman, Deborah Dancer, Kyle Kinney, Fred Ross, JaQuala Yarbro, MaryPat Coe, Tracy Scherer, Karla Dush, Debora Faga

II. Activity
   a. Douglas County Community Response Presentation (DCCR) - Deborah Dancer, DCCR Coordinator
      i. DCCR was chartered in February of 2015
      ii. Their vision is to inspire and mobilize a community response prevention system where children in Douglas County, NE have a safe, quality family and community environment
      iii. Their mission is to work across systems and community collaborations to promote child wellbeing, and provide coordinated prevention system services to create safe, quality environments for children and families in Douglas County, NE
      iv. Primary prevention believes that the primary responsibility for the development and well-being of children lies within the family, and all segments of society must support families as they raise their children. A prevention system includes coordinated services and efforts directed to a population to prevent maltreatment before it occurs and promote protective factors for families. We work to understand and recognize families and coordinate a response to best serve children, youth and families to access needed supports and services.
v. Primary preventions includes nurturing and attachment, responsive parents and other caregivers, assisting with healthy physical and emotional child development, knowledge of parenting and child development as accurate information, raising children and appropriate expectations for their behavior, parental resilience (the ability to cope and bounce back from challenges), social connections, concrete supports in times of need (financial security to cover basic needs and unexpected costs), children’s social and emotional development

vi. Partners who help distribute funds and resources include Boys Town, Carol’s House of Hope, Center for Holistic Development, Child Saving Institute, Compassion in Action, ENCAP, Empowerment Network, Family Housing Advisory Services, Heart Ministries, Heartland Family Service, KVC, Learning Community Center of North and South Omaha, Lutheran Family Services, Midwest Counseling and Associates, Nebraska Children’s Home Society, Nebraska Early Childhood Development, Nebraska Family Support Network, Nebraska Urban Indian Health Coalition, One World, Project Everlast, Project Harmony, Together, Inc., and Visiting Nurses Association

vii. Support sponsored trainings, flex funds, and community response

viii. Training areas include: Physical health, mental health, financial well-being, housing, parenting, education, employment, social connections and relationships, legal assistance, and transportation. The aforementioned trainings are for staff. There will be parent training and opportunities that will be available later.

ix. Community response is another tool that works to meet those particular needs. Families work within case management and they create their own goals; about 420 families with 935 children, were served and about 50% of those families meet their goals.

x. 351 families were provided flex funds with an average assistance of about $979

xi. Have evaluations that come through Nebraska Children and Families Foundation as well as UNMC, that allows them to collectively move those “wheels”

xii. They are also working with the Child Welfare Community Collaboration grant, which is a national grant, and started out with a data walk. They started out with a data walk, which gave them a chance to:

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1. Certain areas that needed the most support and assistance. In Douglas County, those areas were 68104, 68110 and 68111.
   a. Decided that in order to move the needle the best way is through the following strategies: Staff training, increasing capacity to support families, community cafes, community response support activities, collective impact, public awareness, and peer portal (working on both sides of system involvement)

2. Are starting to look at the 68107 area code, but want to come up with their own strategy instead of using the other zip codes strategy
   xiii. Have a steering committee, a collaborative, a progress/planning group and a resource group (direct staff) that work together
   xiv. There is a pregnant and parenting group that is working on young parents/adults/older youth

b.  Q & A
   i. If any of the parents that call the Boys Town Hotline could benefit from some of the economic assistance, what would be the best way to connect them to the collaborative?
      1. Give them Deborah’s email, ddancer@projectharmony.com, so she can connect them with central navigation and be able to follow up with them
      2. Assistance is available only for people who are non-system involved since they are prevention; however, sometimes see that there are some issues that are brought to them and they try to see what they can do assist, or make sure that gap is identified and get the right people working on it.
   ii. Can you talk about the alignment between DCCR and PEO for serving young people via community response?
      1. The older youth work happening through Project Everlast is a part of Douglas County Community Response so when talking about who might be eligible or ineligible, from a funder’s perspective, there isn’t anything that would make someone ineligible. From an older youth perspective, those that are involved in the juvenile justice system are considered unconnected youth which is who the connected youth initiative serves and that means child
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welfare involvement, history of juvenile justice involvement, homelessness, survivors of trafficking as well.

iii. Definitions of system involved, non-system involved, where child welfare falls in, etc. need to be clarified

iv. Need a roadmap so it makes everything clear for all partners
c. Community Resource Discussion
i. Through the Pregnancy Assistance grant, a Project Everlast staff member came up with the idea of trying to prevent some of the crises that come up when young people get pregnant and don’t make plans for it. So in an effort to get young people to plan they came up with a maternity matching program where any person who is accepted into the program, whatever money they save prior to delivery is matched at a 1 to 2 rate, so they have an incentive to save and plan. The program was funded as a pilot through the grant and was recently approved by the Douglas County Community Response Steering Committee to continue their support of it. Funding is for people who are non-system involved, but again would try to do what they can to connect them. Eligibility for maternity matching: 14-25 years old, bills in their name, and pregnancy.

ii. Need to create a respite place for families so they could have a time-out; it’s the funding piece that needs to be figured out. DCCR will start looking at seeing which programs/agencies might fit with this and get back to us next month. We don’t want to go down the easiest path; we need to look at an off-hours respite center.

III. Announcements
a. OYS
i. The JDAI/OYS RED Sub-Committee is having a RED Conference that will consist of monthly webinars starting with ATD presentations in July, August and September, on the 4th Wednesday of each month. On October 29 and 30, Dr. Shawne Ginwright and Antonio Fernandez (King Tone) will be our keynote speakers for these presentations, and then continuing with the monthly webinars on into next year and leading up to the 2nd Annual RED Conference, which will, hopefully, be in person. Registration is at no cost and available through the NJJA App or, if you would prefer, by emailing christybeckman@outlook.com to register. The first ATD webinar is July 22nd, from noon to 1 pm.
IV. Next Steps
   a. Andrea and JaQuala will do some research on different models for respite care and what agencies we might be able to bring in to collaborate with and bring that back to the group
   b. If you are interested in being in the small group to come up with some action items for a respite center, email Andrea at awright@heartlandfamilyservice.org
   c. We will get back with Deborah Dancer on the definition of systems and the status of respite discussion

V. Feedback Survey – Sent out

Next Meeting: Wednesday, August 19, 2020, via Zoom

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