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Results for Nebraska, Models for the Nation

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RESULTS FOR NEBRASKA
MODELS FOR THE NATION
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In January 1998, the University of Nebraska Board of Regents established a Public Policy Center with the mission of contributing to public policy by developing and making available objective analysis of public issues for the public, elected officials, executive agencies, and others who represent the diverse interests of Nebraskans.

From the Center's inception, we have worked with policymakers at the state and local levels—as well as at the national level—on a broad range of significant and timely issues. Unlike other university-based policy centers, the University of Nebraska Public Policy Center is unique in that it serves all three branches of the state's government. Our work has resulted in important changes to state statutes and administrative policies, new collaborative partnerships for economic development, and more effective systems for human services delivery. In work that extends beyond Nebraska, Center products have been highlighted as national "psychological first-aid" curriculum models for hospitals and also as the basis for anticipating more benefits than costs for states planning adoption of a three-digit dialing code (2-1-1) for health and human services information. Our approaches to collaboration and networking have been praised by national experts and officials in the behavioral health and health information technology areas. The effort to eliminate racial and ethnic bias in the state's judicial system has been highlighted at national conferences.

The Center enriches Nebraska public policy by:

- Catalyzing policy change.
- Creating effective partnerships.
- Conducting policy-relevant research.
- Deploying University expertise.
- Facilitating public participation.

Center staff and students conduct original research, advise based on experiences and knowledge, cull existing academic literatures for ideas and information, and create processes whereby many expertises and perspectives may be brought to bear on policy issues. We rely heavily on students: half of the Center staff are graduate or undergraduate students at the University, and their studies are in a wide variety of fields. The Center researchers also come from diverse disciplines, including Business, Economics, Family and Consumer Sciences, Law, Political Science, Psychology, and Sociology.

Because the Center was created as a systemwide unit, engaging all the University's campuses (University of Nebraska-Lincoln, University of Nebraska Medical Center, University of Nebraska at Omaha, University of Nebraska at Kearney, and the Institute of Agriculture and Natural Resources), the Center is able to link University experts throughout the system to assist policymakers. We have worked with hundreds of faculty and staff from across the five campuses on our projects, drawing on a rich array of expertise present at the University of Nebraska. I invite you to take a few minutes to look through the following pages to see what we have been doing recently to provide policymakers with the most accurate and current information available to help them better make informed decisions. Please also visit our Web site—www.ppc.nebraska.edu—for further information on our completed and current work. You will see how the Public Policy Center has made a difference to Nebraska and why our work has, in several instances, become a model for the nation.

Alan J. Tomkins  
Director
The University of Nebraska Public Policy Center has impacted policy-relevant change throughout the state and in national policy efforts as well. Here’s a quick look at some of our outcomes “by the numbers” over the past three years:

- Administered Minority and Justice Initiative, which, among other reforms, brought about the passage of two Nebraska state laws to improve the representativeness of juries.
- Awarded $1.5 million to organizations involved in providing behavioral health services to Nebraskans.
- Trained nearly 600 school personnel, health care professionals, faith leaders, and community members to provide psychological first-aid services in response to disasters.
- Developed comprehensive disaster preparedness curricula for hospitals that are being utilized in Nebraska and five other states.
- Hosted the ne211.org Web site, which received 14,061 visits during its first six months of operation and provides users with information on 3,788 community programs.
- Created consensus for one comprehensive plan to exchange health information among all major Nebraska Panhandle health care providers including hospitals and clinics, the public health district, the behavioral health region, and the federally qualified health center.
- Convened more than 400 Nebraskans and engaged them in public policy deliberations.
- Catalyzed the cooperation of three rural Nebraska communities to address water quality and economic development.
- Authored 15 publications in diverse fields of study.
- Generated more than $6 million in federal grants and contracts for Nebraska.

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> “Without the Public Policy Center’s involvement in the Minority and Justice effort, we would not be close to where we are today. I expected a University Center to contribute to cutting-edge knowledge about race and justice matters. What I didn’t anticipate was the Center being able to provide key leadership, sophisticated facilitation skills, and real sensitivity to delicate policy matters. The Center has been key to the initiative’s numerous successes.” — Justice John M. Gerrard, Nebraska Supreme Court
MINORITY AND JUSTICE INITIATIVE

In 2001, the Nebraska Supreme Court and the Nebraska State Bar Association partnered with the Public Policy Center to work with the Minority and Justice Task Force in examining racial and ethnic inequities in the Nebraska justice system. In its two years of activities, the Task Force received information from literally thousands of Nebraskans working in and affected by the court system.

To proactively address the issues the Task Force identified in the study, the Minority and Justice Implementation Committee (MJIC) was formed in 2003. The MJIC championed legislation to regularly update jury pools and, in May 2003, the Legislature passed a new law mandating annual updating of lists of residents eligible for jury service, meaning that Nebraska’s juries are now closer to representing diverse communities. Further progress came in 2005 when Governor Dave Heineman signed into law a bill authorizing the use of a uniform juror qualification form, which standardizes the race and ethnic information collected about jurors. Access to this information enables demographics to be tracked, thereby ensuring minorities are included in jury pools.

The MJIC is also addressing opportunities for minorities in Nebraska’s judicial and legal professions. In April 2005, Nebraska hosted the Legal Diversity Summit for the state’s legal employers and minority law students from the region. The Summit provided minority law students the opportunity to learn more about legal employment in Nebraska, educated legal employers on how to improve their efforts recruiting and retaining attorneys of color, and encouraged legal employers to develop and implement goals to diversify.

The MJIC has been successful in addressing a wide variety of policy issues related to racial and ethnic inequalities in Nebraska’s justice system. Indeed, the Committee is being recognized for its work bringing about positive policy change. Recently, the Committee’s work was showcased at the annual meeting of the National Consortium for Racial and Ethnic Fairness in the Courts.

Sitting: Honorable John M. Gerrard, Nebraska Supreme Court. Standing L to R: Jane Schoenike, Executive Director, Nebraska State Bar Association; Elizabeth Neeley, Project Manager, Public Policy Center; and Linda R. Crump, Office of Equity Access and Diversity, University of Nebraska-Lincoln. (Gerrard and Crump are the co-chairs of the Minority and Justice Implementation Committee.)

> In smaller counties where language interpreters are not available on a daily basis, non-English speaking defendants were sometimes detained without being advised of their right to post bond. In an effort to ensure equal access to the bond system, the MJIC developed bilingual forms, designed to provide information on defendants’ rights while in custody and the procedures for posting bond. The forms were approved by the Nebraska Supreme Court and are being utilized in county jails and courthouses. The forms will be translated into additional languages and also disseminated in a video or CD format to address barriers presented by illiteracy.
CREATING EFFECTIVE PARTNERSHIPS

RESULTS FOR NEBRASKA  >  MODELS FOR THE NATION

EXPANDING BEHAVIORAL HEALTH ACCESS THROUGH SYSTEM REFORM

At some point in their lives, almost half of all Americans are affected by mental illness—their own or the illness of a family member, a close friend, or a co-worker. Effective care for behavioral health issues such as addiction, compulsive disorders, and substance abuse is undermined by gaps in services, long waiting lists, cultural and language barriers, and other factors that can hinder assistance.

Under the Public Policy Center’s leadership, a diverse group of organizations from across the state came together to expand access to behavioral health services. The Center, working with state, community, and consumer groups, received a grant from the Compassion Capital Fund of the U.S. Department of Health and Human Services in 2002. The project, called NEBHANDS (Nebraskans Expanding Behavioral Health Access through Networking Delivery), was a three-year initiative to provide funding, training, and technical assistance to faith and community organizations to assist with behavioral health issues.

The Center’s NEBHANDS program partnered with more than 100 community and faith-based organizations during its three years of work and awarded over $1.5 million of direct funding and technical assistance in such areas as grant writing, fiscal management, strategic planning, and volunteer coordination. As part of the NEBHANDS effort, Nebraska organizations contributed another $2.1 million to support behavioral health systems of care. As a consequence, organizations not previously part of the care system have been integrated and now are better equipped to provide assistance in their communities.

Although NEBHANDS has ended, the effort continues to strengthen communities and organizations and to improve their capacity to respond to mental health and substance abuse issues. For example, the Sound Partners program is a collaboration with NET Radio that provides information about mental health issues in rural Nebraska and technical assistance resources via the Web (www.nebhands.nebraska.edu). The Center also is collaborating with the Nebraska Department of Health and Human Services to fund a coalition in central Nebraska that will address the mental health needs of young children.

“We came together through NEBHANDS to respond—through unconventional and never-before-heard-of alliances—to the behavioral health needs across our 76,000-plus square miles of prairie land. NEBHANDS knew the value of each person living in every corner of our state, and together we responded, recognizing the importance of volunteers, community and faith-based organizations, and public agencies and institutions. We have responded through NEBHANDS with increased care and compassion to the needs of those among us who suffer with behavioral health issues.”  — Ruth Henrichs, Executive Director, Nebraska Lutheran Family Services

L to R: Christine Peterson, Policy Secretary, Nebraska Health and Human Services System; Mark DeKraai, Project Director, Public Policy Center; and Jim Jensen, Chairman, Health and Human Services Committee, Nebraska State Legislature.
Nebraska experiences an average of 50 tornadoes annually, each storm unique in its intensity and destructiveness. These storms take a toll on Nebraska, resulting in damage to homes and schools, as well as straining families and individuals dealing with the storms’ consequences. Responding to the emotional aftermath of natural disasters, acts of terrorism, or other critical incidents presents a challenge to public policymakers. Recovery may be a long and arduous process and may impact entire communities and regions. The emotional consequences of a disaster can be significant and are often overlooked in the midst of more obvious physical damage.

To address the needs that arise in the wake of disasters, the Public Policy Center partnered with UNMC’s Department of Psychiatry and Nebraska’s disaster relief agencies to create a comprehensive behavioral health plan and curriculum. The Center and its partners have created formal linkages between mental health/substance abuse resources and public health systems, health care networks, emergency management, and first responder groups that are now a part of Nebraska’s All-Hazards Disaster Behavioral Health Plan. This extensive plan creates a mental health safety net for those suffering in the wake of disaster.

The Center has also developed innovative “psychological first aid” curricula that equip community leaders and residents to complement the professional behavioral health response to disasters and terrorism. Almost 600 health care professionals, school personnel, faith leaders, and community members in Nebraska have been trained. The program is not only beneficial for Nebraskans but also is a model for other communities around the country. In fact, the Nebraska Psychological First Aid curricula is cited as a training and education resource for the nation’s hospitals in the U.S. Health Resources and Services Administration (HRSA) Behavioral Health guidebook and is being used in Indiana, Kansas, Massachusetts, Minnesota, and Oregon.

> “Volunteers who took the Nebraska Psychological First Aid course prior to responding to Hurricane Katrina reported that it was the most helpful disaster training they’ve received. I’ve had participants tell me they used the Nebraska Psychological First Aid skills not only after disasters but in response to the small crises that happen every day in our state.” — Robin Zagurski, L.C.S.W., University of Nebraska Medical Center
DES PENDING POLICY-RELEVANT RESEARCH

RESUL T S F O R N E BR A S K A > M O D E L S F O R T H E N AT I O N

2-1-1 COMMUNITY INFORMATION AND REFERRAL

R
epite care, job training, drug intervention, and emergency shelter—these are some of the many critical services that community organizations provide every day in Nebraska. Too often, however, the person or family in need has to navigate through a confusing network of health and human service agencies to locate the program that can directly help with their situation.

The Public Policy Center worked with University faculty to research the projected costs and benefits of the establishment of a statewide three-digit dialing code (2-1-1) for connecting Nebraskans to trained specialists who help them identify the resources they need. The 2-1-1 Report has been widely used as a model by other states across the nation and was cited when legislation was introduced in Congress to fund 2-1-1 nationwide. In Nebraska, the Report helped spur the establishment of a state 2-1-1 and Web-based system that was unveiled by Lieutenant Governor Rick Sheehy on February 11, 2005.

2-1-1 “impacts communities by connecting people with important service and volunteer opportunities that benefit users and community service providers 24 hours a day, 7 days a week,” according to Governor Dave Heineman’s proclamation.

The information-sharing backbone for Nebraska’s 2-1-1 system was the result of another Center effort. The Center received a U.S. Department of Commerce Technology Opportunities Program grant to work with the industry association, AIRS (Alliance of Information and Referral Systems), and commercial software vendors to develop data exchange standards to make it possible for organizations in the state—and around the country—to share information with one another.

> A multidisciplinary team worked together to create Nebraska’s Web-based 2-1-1 information and referral resource. The Center is partnering with the United Way of the Midlands, Lincoln/Lancaster County Health Department, Panhandle Partnership for Health and Human Services/Volunteers of America, and the Nebraska Department of Health and Human Services. These partners share information collected by their organizations to create a powerful, searchable statewide database. In the future, additional partners and information will be added.
RURAL HEALTH CARE TECHNOLOGY INITIATIVE

Health information technology holds the promise of improving quality of care and patient safety across the United States. However, very few hospitals currently have interoperable systems in place that enable information sharing within their own walls, much less with other entities. The inability to share information not only compromises patient care but also prevents providers, researchers, and policymakers from identifying important health care trends, determining the costs of health care alternatives, and rapidly responding to health care-related events such as outbreaks of illnesses and pharmaceutical recalls.

In Nebraska’s Panhandle, the Public Policy Center is working with the region’s hospitals, clinics, behavioral health providers, federally qualified health centers, and public health district to create seamless patient-centered health information exchange, an effort supported by two grants from the U.S. Agency for Healthcare Research and Quality. Through the grants, the partners are developing and implementing a viable and comprehensive plan for regional health information exchange across the Panhandle’s 14,000-square-mile area.

The Panhandle’s vision for this project is to eventually connect with other providers throughout Nebraska and the nation. Thus, the project focuses on developing processes and structures based on current and emerging national and international standards. To that end, this plan and process will serve as a national model for integrating rural health care providers through electronic information sharing. It will be relevant to small health care providers across the country as it accommodates the wide variability in technological capacity and readiness represented by the partnering organizations. The team has presented its processes and accomplishments at several conferences and will be the subject of a nationally disseminated article by the U.S. Agency for Healthcare Research and Quality.

Standing L to R: Dan Griess, CEO, Box Butte General Hospital; Diane Stevens, CEO, Garden County Health Services; Mehdi Merred, CEO, Gordon Memorial Hospital; Joan Frances, Executive Director, Rural Healthcare Cooperative Network; and Nancy Shank, Associate Director, Public Policy Center. Seated L to R: Todd Sorensen, MD, CEO, Regional West Medical Center; Carol Kraus, CEO, Perkins County Health Services; and Shaun Grannis, MD, Project Consultant, Regenstrief Institute.

> When an ambulance delivers an unaccompanied, unconscious patient to an emergency room, doctors and nurses must provide immediate and appropriate care without knowing about the patient’s possible allergic reactions, chronic conditions, medications, and other critical information. When health information exchange is implemented, providers will have instant access to patient information that will allow them to provide more timely and appropriate care. In addition, doctors will be able to more readily consult with specialists and providers from other organizations. Patients will be more efficiently transferred to providers who are most able to intervene. Health care services and outcomes throughout the Panhandle will be aggregated and will serve as a rich data and public health surveillance source for policymakers and researchers.
Rarely is more stringent federal legislation the catalyst for successful community development initiatives, but in the case of Nebraska’s Shelby and Stromsburg, new groundwater regulations gave the Polk County communities an opportunity to think creatively—and cooperatively. In 2001, as required by the Safe Drinking Water Act, the Environmental Protection Agency issued a rule to decrease the amount of arsenic allowed in drinking water effective January 2006. To reduce arsenic levels to acceptable standards, many Nebraska communities were faced with making substantial investments such as building water treatment plants, closing wells and digging new ones, and forming a regional water distribution system.

The Public Policy Center saw in the new EPA provisions an opportunity to develop a new approach to compliance and community development in rural Nebraska. By fostering collaboration and bringing an array of expertise to the project, the Center broadened the discussion from one of a sole focus on arsenic remediation to one of community enhancement. Known as the Community Water and Development Project, this initiative brought together University researchers and students with expertise in water science and technology, community development, consensus facilitation, engineering, and rural assistance to work with nongovernmental agencies and local, state, and federal policymakers. This multifaceted approach provided rural communities with the technical support needed to comply with new water regulations as well as to create productive new partnerships, enabling it to serve as a model for other communities—and regions—facing similar challenges.

For Shelby and Stromsburg, what began as the groundwater discussion evolved into a dialogue about how to mutually enhance economic opportunities. New interstate highways and regional manufacturing opportunities present economic development opportunities for these two communities and, as a result, they are working and planning together more strategically than ever. In fact, the project has been so successful, neighboring Osceola joined the planning team, enabling an even broader approach. Rural Nebraska residents are now more optimistic that they can not only deal successfully with changed drinking regulations but also develop new, cooperative ideas for their communities and the region.

> The Shelby/Stromsburg project was an innovative partnership of policymakers, scientists, educators, students, and citizens. Key partners included the Nebraska Department of Environmental Quality, Nebraska Department of Health and Human Services, Upper Big Blue Natural Resources District, Southeast Development District, Great Plains RC&D, USDA Rural Development, and the UNL Water Research Initiative. The Groundwater Foundation and UNL School of Natural Resource Arsenic Information System supplied expertise as educators about water matters. The Midwest Assistance Program provided water-related technical assistance, and the University of Nebraska Rural Initiative and Cooperative Extension provided community and economic development expertise.
DELIBERATIVE DISCUSSIONS

Inundated with information, citizens can often feel overwhelmed or become apathetic about important policy issues. It can be difficult to involve the public in meaningful dialogue on policy matters. The Public Policy Center seeks to enrich policy making by increasing public participation.

A vehicle for citizen participation in Nebraska has been the PBS By the People project, designed to increase citizen engagement in the country’s foreign policy dialogue. In 2004, Nebraskans in Lincoln and Kearney participated in two, day-long civic discussions on issues of national security, international free trade, and the U.S. economy. With NET Television and the University of Nebraska at Kearney, the Center has been a local partner for several By the People discussions, providing topical research and experts for the programs.

In 2005, By the People was in Kearney for an evening discussion of education policy issues. After the program, Robert Evnen, District 1, Nebraska State Board of Education member commented: “Listening to a broad cross-section of those who are involved in K–12 education in our state and who have differing views made the Kearney By the People program an unusually informative session. The way in which the event was organized resulted in a program that was intensely interesting and very helpful to me as a state policymaker from both a policy and a political perspective.”

Building on the success of By the People, the Center—in partnership with Leadership Lincoln and the Lincoln Journal Star—has brought deliberative discussions to local policy issues. More than 60 citizens gathered in February 2005 to discuss economic development, education, and downtown Lincoln initiatives as part of the Center’s Community Conversation program. The dialogue and shared information resulted in significant changes in opinions and knowledge levels among participants. These shifts represent the conclusions that citizens reach when they have the opportunity to become more informed about and engaged in the issues. Another Community Conversation was held in August with some of the same Lincoln participants to discuss mandatory labeling of genetically modified foods.

An additional opportunity for engaging the public in policy matters is the Thomas C. Sorensen Policy Seminar Series. The Public Policy Center’s seminar program provides the forum and expertise to teach citizens, government and nonprofit professionals, and lawmakers about public policy formation and implementation. The series brings in well-known public policy experts from NU units such as UNO’s School of Public Administration and UNL’s Department of Political Science or others from outside Nebraska to discuss and analyze relevant policy issues. Participants not only gain a better understanding of important policy matters but also learn about the policymaking process overall.
EXPANDING HORIZONS

Charged by the Board of Regents to serve the people and communities of Nebraska, the Public Policy Center has evolved into a dynamic research and engagement enterprise that not only makes an impact in Nebraska but also provides innovative policy solutions for the nation.

In upcoming years, the Center will continue to work with all branches of state government and other stakeholders with particular focus in five distinct areas:

• Access, Equity, and Fairness in Government Services
• Behavioral Health and Human Services
• Health Information Technology, Information Systems, and Health and Human Services Information and Referral Systems
• Water Science, Law, and Policy
• Deliberation, Democracy, and Public Participation

A few of the exciting new projects that the Center is working on include:

• Assessing the expansion and coordination of 2-1-1 information and referral access in Arkansas, Louisiana, and Mississippi in partnership with the United Way of America.
• Convening community conversations and conducting community-based participatory research to identify strategies to reduce the co-occurrence of such health problems as diabetes, obesity, and depression.
• Evaluating a Centers for Disease Control citizen and expert consensus process in Nebraska and three other states that engages the public in establishing priorities for vaccine protection against influenza in the event of a pandemic.
• Partnering with other researchers from the Water Resources Research Initiative to design and test user-friendly, computer-based information technology systems to assess and manage water quantity as part of an adaptive management policy for water management in Nebraska.

EXPANDING HORIZONS

Looking ahead, the staff, faculty, and students of the University of Nebraska Public Policy Center will continue the Center’s innovative research on current and emerging policy issues, thereby enhancing the state’s public policy efforts and making a positive impact in the lives of citizens from Nebraska and across the country.
> “My work as a PPC undergraduate research assistant over the past four years, more than anything else during my educational experiences, helped solidify my goal to become a policy researcher. I’m now pursuing my master’s degree in International Science and Technology Policy at George Washington University and was awarded a fellowship for 2006 with the National Academy of Sciences, Committee on Science, Engineering and Public Policy.” — Ian Christensen, BA of Science in Biochemistry, UNL, August 2005
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