

# Progress of the New Jersey Department of Children and Families

Monitoring Period XIX  
(July 1 – December 31, 2016)

*Charlie and Nadine H. v. Christie*

July 19, 2017

Center  
for the  
Study  
of  
Social  
Policy



**Progress of the New Jersey  
Department of Children and Families**

**Monitoring Period XIX Report for  
*Charlie and Nadine H. v. Christie*  
July 1 – December 31, 2016**

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<sup>1</sup> This includes Permanency, Adoption, Impact and Advocacy Center caseload carrying workers.

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## I. INTRODUCTION

Stanley R. Chesler of the United States District Court for the District of New Jersey appointed the Center for the Study of Social Policy (CSSP) as Federal Monitor of the class action lawsuit *Charlie and Nadine H. v. Christie*, aimed at improving New Jersey's child welfare system. As Monitor, CSSP has been charged with independently assessing New Jersey's compliance with the goals, principles and outcomes of the Court Order entered on December 1, 2005, the Modified Settlement Agreement (MSA) entered on July 17, 2006 and now the Sustainability and Exit Plan (SEP) entered on November 4, 2015 that supersedes the MSA. This is the third monitoring report measuring progress under the SEP and includes performance data for the period July 1 through December 31, 2016.<sup>2</sup>

### **Monitoring Methodology**

The Monitor's public reports cover six-month periods.<sup>3</sup> The primary sources of information on New Jersey's progress are quantitative and qualitative aggregate and back-up data supplied by the Department of Children and Families (DCF) and independently validated by the Monitor. DCF provides back-up data and access to staff at all levels to enable the Monitor to verify performance.

Over the years, as part of the reform, DCF's capacity to accurately collect and analyze data and make it regularly available to the public has significantly grown. Reflecting this increased capacity, the Monitor first looks to the state's data for analysis and takes steps to validate its accuracy. The Monitor also retains the authority to engage in independent data collection and analysis where needed. The state has committed to continuing to expand the data that it publishes on its public website.<sup>4</sup>

Reports that the state currently publishes on its website, the schedule for regular production of those reports and the addition of new reports include:

- Commissioner's Monthly Report<sup>5</sup> – *Current and produced monthly*. This report gives a broad data snapshot of various DCF services. The report includes information from Child Protection & Permanency (CP&P), Office of Adolescent Services (OAS), Institutional Abuse Investigation Unit (IAIU), Children's System of Care (CSOC), Family & Community Partnerships and the Division on Women.

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<sup>2</sup> Copies of all Monitoring Reports can be found at: [http://www.cssp.org/publications/child-welfare?type=child\\_welfare\\_class\\_action\\_reform&title=Child%20Welfare:%20Class%20Action%20Reform](http://www.cssp.org/publications/child-welfare?type=child_welfare_class_action_reform&title=Child%20Welfare:%20Class%20Action%20Reform)

<sup>3</sup> The exceptions to this time frame were monitoring period 13, which covered July 1, 2012 through March 31, 2013; monitoring period 14, which covered April 1 through December 31, 2013; and monitoring period 17, which covered January 1 through December 31, 2015.

<sup>4</sup> To see DCP&P's public website, go to: <http://www.state.nj.us/dcf/about/>

<sup>5</sup> To see the December 2016 Commissioner's Monthly Report, go to: [http://www.nj.gov/dcf/childdata/continuous/Commissioners.Monthly.Report\\_12.16.pdf](http://www.nj.gov/dcf/childdata/continuous/Commissioners.Monthly.Report_12.16.pdf)

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- Screening and Investigations Report<sup>6</sup> – *Current and produced monthly*. This report details State Central Registry (SCR) activity, including data regarding calls to the Child Abuse and Neglect Hotline, assignments to CP&P offices and trends in Child Protective Services (CPS) Reports and Child Welfare Services (CWS) Referrals.
  - Workforce Report<sup>7</sup> – *Planned to be annually; last report completed December 2016*. This report provides information regarding the demographics and characteristics of current workers, as well as a variety of indicators of workforce planning and development.
  - Demographics Report<sup>8</sup> – *Current and produced quarterly*. This report provides demographic data on children and youth receiving in-home and out-of-home services.
  - Qualitative Review Report<sup>9</sup> – *Formerly produced annually as a separate report (last report dated 2014)*. Going forward, the results of yearly Qualitative Reviews are to be included in an annual report entitled “Our Work with Children, Youth and Families,” anticipated in CY 2017. This report will assess the status of children and youth in care throughout the state, as well as the overall performance of DCF systems and practice models. The qualitative data is used to uncover trends and provide insight into systems issues.
  - Children’s InterAgency Coordinating Council Report<sup>10</sup> – *Current and produced monthly*. This summary report details referral and service activity for CSOC. It also includes the demographics of the youth, referral sources, reasons, resolutions and services provided.
  - New Jersey Youth Resource Spot<sup>11</sup> – *Ongoing and updated as relevant*. The website offers the latest resources, opportunities, news and events for young people. This site includes a list of current Youth Advisory Boards, as well as additional resources available in each county and statewide.
  - DCF Needs Assessment<sup>12</sup> – *Planned to be annual*. DCF will produce an annual report on its website and will report twice annually to the Monitor. The most recent report entitled *DCF Needs Assessment 2016 Report #2: Qualitative Findings* updates interim findings

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<sup>6</sup> To see the December 2016 Screening and Investigations Report, go to:

[http://www.nj.gov/dcf/childdata/protection/screening/Screening.and.Investigation.report\\_12.16.pdf](http://www.nj.gov/dcf/childdata/protection/screening/Screening.and.Investigation.report_12.16.pdf)

<sup>7</sup> To see the NJ DCF Workforce Report, go to: [http://www.nj.gov/dcf/childdata/exitplan/NJ.DCF.Workforce.Report\\_2015-2016.pdf](http://www.nj.gov/dcf/childdata/exitplan/NJ.DCF.Workforce.Report_2015-2016.pdf). To see the NJ DCF Workforce: Preliminary Highlights 2014-2015 Report, go to:

[http://www.state.nj.us/dcf/childdata/orgdev/NJ.DCF.Workforce.Report\\_2015.pdf](http://www.state.nj.us/dcf/childdata/orgdev/NJ.DCF.Workforce.Report_2015.pdf)

<sup>8</sup> To see the 4<sup>th</sup> Quarter 2016 Demographics Report, go to: <http://www.nj.gov/dcf/childdata/protection/summary/Demo-2016Q4.pdf>

<sup>9</sup> To see the 2014 Qualitative Report, go to: <http://www.nj.gov/dcf/about/divisions/opma/Qualitative%20Review%20-%202014%20Annual%20Report.pdf>

<sup>10</sup> To see December 2016 Children’s InterAgency Coordinating Council Report, go to:

[http://www.nj.gov/dcf/childdata/continuous/CIACC\\_Dashboard\\_AllCounty\\_12.16.pdf](http://www.nj.gov/dcf/childdata/continuous/CIACC_Dashboard_AllCounty_12.16.pdf)

<sup>11</sup> To see the New Jersey Youth Resource Spot, go to: <http://www.njyrs.org/>

<sup>12</sup> To See the CP&P Needs Assessment 2016 Report #2 go to:

[http://www.nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Quality.Report\\_4.17.pdf](http://www.nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Quality.Report_4.17.pdf). To see the CP&P Needs Assessment Interim Report, go to:

[http://www.state.nj.us/dcf/childdata/protection/DCF.Needs.Assessment.Interim.Report\\_3.16.pdf](http://www.state.nj.us/dcf/childdata/protection/DCF.Needs.Assessment.Interim.Report_3.16.pdf)



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on DCF's three year multi-phase needs assessment process to identify the resources needed to serve families with children at risk for entering out-of-home placement and those already in placement. DCF expects the final report to be released in December 2017.

- Adoptions Report<sup>13</sup> – *Current and produced annually; last report dated 2016*. This report reviews CP&P adoption data and practice related to SEP requirements. This report will be based on CY data.
- New Jersey's Child Welfare Outcomes Report<sup>14</sup> – *Current and produced annually; last report dated May 2017*. This report focuses on longitudinal, quantitative data measuring outcomes of children served by CP&P.

Reports not yet available but that the state has committed to produce and publish on DCF's website include:

- Our Work with Children, Youth and Families Report – *To be produced annually; first report expected in CY 2017*. This report will analyze DCF's implementation of the Case Practice Model (CPM), largely utilizing annual data from the QRs as well as selected quantitative data sets.
- Healthcare of Children in Out-of-Home Placement – *To be produced annually; first report expected in CY 2017*. This report will be a review of the health indicators identified in the SEP and will be based on state FY (July 1 – June 30) data.

In November 2016, DCF launched an online data portal, the New Jersey Child Welfare Data Hub. The data portal, which was developed in collaboration with Rutgers University, allows users to view customized charts and graphs related to New Jersey child welfare data from CY 2008 to CY 2015.<sup>15</sup>

For this report, the Monitor engaged in the following additional verification activities:

- **Caseload Data Verification**

The Monitor conducted a verification review during January and February 2017 of 131 workers to verify their individual caseloads during the period July to December 2016. Findings from this review are discussed in Section V.L – Caseloads – of this report.

- **Housing, Employment and Education Status Review for Older Youth Exiting Care**

The Monitor collaborated with DCF to review case records of 67 youth ages 18 to 21 who exited care between July and December 2016 without achieving permanency. The

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<sup>13</sup> To see the Adoptions Report, go here: <http://www.nj.gov/dcf/childdata/exitplan/AdoptionReport2016.pdf>

<sup>14</sup> To see the New Jersey's Child Welfare Outcomes Report go to:  
<http://www.nj.gov/dcf/childdata/exitplan/Outcomes.Report.and.Executive.Summary-2017.pdf>

<sup>15</sup> To see the New Jersey Child Welfare Data Hub, go here: <https://njchilddata.rutgers.edu/#home>

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review focused on the housing, education and employment status of these youth to determine if performance met the level required by the SEP. Findings from the review are discussed in Section V.J – Older Youth – of this report.

- **Visitation Data Review**

The Monitor conducted a review of a statistically significant sample of 330 cases requiring parent visits with children in which documentation indicated that the parent was unavailable or the visit was not required. Findings are discussed in Section V.E – Visitation – of this report.

- **Family Team Meeting Data Review**

The Monitor reviewed 190 cases from July to December 2016 to verify how workers were using and documenting instances in which Family Team Meetings (FTMs) were not required in the first twelve months of placement. Further discussion of the current performance on this measure is included in Section V.B – Family Team Meetings – of this report.

- **Other Monitoring Activities**

The Monitor interviewed and/or visited multiple internal and external New Jersey child welfare system stakeholders, including staff at all levels, contracted service providers, youth, relatives, birth parents and advocacy organizations. The Monitor also periodically attended DCF’s ChildStat meetings, statewide Child Fatality/Near Fatality Review Board meetings, adolescent practice forums and Area Director meetings. The Monitor staff participate as reviewers in almost every scheduled statewide Qualitative Review throughout the year. DCF has fully cooperated with the Monitor in notifying Monitor staff of schedules and facilitating their participation in relevant activities.

### **Structure of the Report**

Section II of this report provides an overview of the state’s accomplishments and challenges. Section III provides summary performance data on each of the outcomes and performance measures required by the SEP in Table 1, *Charlie and Nadine H. v. Christie* Child and Family Outcome and Case Practice Performance Measures (*Summary of Performance as of December 31, 2016*). Section IV provides details and discussion of the SEP Foundational Elements.<sup>16</sup>

Section V of the report provides more detailed data and discussion of performance on SEP Measures *To Be Maintained* and Measures *To Be Achieved* in the following areas:

- Investigations of alleged child maltreatment (Section V.A);

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<sup>16</sup> The Foundational Elements requirements of the SEP intentionally recognize the state’s accomplishments in early implementation of the MSA. At the Monitor’s discretion, based on a concern that a Foundational Element has not been sustained, the Monitor may request additional data. If the data demonstrate a persistent problem, in the Monitor’s discretion, the State will propose and implement corrective action (SEP.II).

- Implementation of DCF’s Case Practice Model; including Family Team Meetings, case planning and visitation (Sections V.B, V.C & V.E);
- Educational engagement for children in out-of-home care (Section V.D);
- Placement of children in out-of-home settings, incidence of maltreatment of children in foster care and abuse of children when they reunite with families (Sections V.F & V.G);
- Efforts to achieve permanency for children either through reunification with family, legal guardianship or adoption (Section V.H);
- Provision of health care services to children and families (Section V.I);
- Services to older youth (Sections V.J & V.K);
- Caseloads (Section V.L);
- DAsG Staffing (Section V.M);
- Accountability through the Qualitative Review and the production and use of accurate data (Section V.N);
- Needs Assessment (Section V.O); and
- Fiscal Year 2018 budget (Section V.P).

## II. SUMMARY OF PERFORMANCE DURING JULY THROUGH DECEMBER 2016

During this monitoring period, DCF continued its work to meet the requirements of the SEP, achieving important milestones and maintaining acceptable performance on each of the Foundational Elements of the SEP. Measures newly met include those related to the stability of placement for children in out-of-home care; the rate of maltreatment of children post-reunification; and education, employment and housing outcomes for older youth exiting foster care without having achieved permanency.

At the start of this monitoring period, 20 of the 36 SEP performance measures originally designated in the SEP as *To Be Achieved* were met and had been re-designated as *To Be Maintained*.<sup>17</sup>

During this monitoring period, DCF continued to focus efforts on the 16 key remaining SEP Outcomes *To Be Achieved*, and has made additional progress with respect to many measures. The Monitor has assessed that between July and December 2016, four<sup>18</sup> of these remaining *To Be Achieved* measures were met, and one<sup>19</sup> was partially met.

<sup>17</sup> These measures include: Timeliness of Investigation Completion (60 days) (IV.A.13); Timeliness of Investigation Completion (90 days) (IV.A.14); Initial Family Team Meeting (IV.B.16); Subsequent FTMs within 12 months (IV.B.17); Subsequent FTMs after 12 months – Reunification Goal (IV.B.18); Initial Case Plans (IV.D.22); Intake Workers (Local Offices) (IV.E.24); Intake Workers (IV.E.25); Adoption Local Office Caseload (IV.E.26); Adoption Workers (IV.E.27); Parent-Child Visits – weekly (IV.F.29); Parent-Child Visits – bi-weekly (IV.F.30); Sibling Placements (IV.G.32); Sibling Placements of Four or More Children (IV.G.33); Recruitment for Sibling Groups of Four or More (IV.G.34); Placement Stability 13-24 Months in Care (IV.G.36); Repeat Maltreatment (In-home) (IV.H.37); Permanency within 12 Months (IV.I.40); and Independent Living Assessments (IV.K.45); and Quality of Case Planning and Services (IV.K.46).

<sup>18</sup> Measures met between July and December 2016 include: Placement Stability for First 12 months in care (IV.G.35); Maltreatment Post-Reunification (IV.H.38); Housing for Older Youth Exiting to Non-Permanency (IV.K.47); and Employment/Education for Older Youth Exiting to Non-Permanency (IV.K.48).

<sup>19</sup> Measure partially met for monitoring period 19: Needs Assessment (IV.C.21).

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The discussion below highlights current performance within specific content areas. In accordance with the SEP, subsequent to the release of this report, the Monitor will be providing information to the Court on the new measures that the Monitor intends to certify as *To Be Maintained*.

### ***Child Safety***

DCF is responsible for ensuring the safety of children who come to their attention through allegations of abuse or neglect and of those children who subsequently are receiving or have received services from CP&P. This responsibility includes ensuring the safety of children who are placed in resource family homes and congregate facilities, and preventing future maltreatment. As discussed in Section V.G below, DCF sustained performance with respect to the two SEP measures that had been designated as *To Be Maintained* (abuse and neglect of children in foster care and repeat maltreatment for children remaining in home). Notably, DCF met the SEP standard for maltreatment post-reunification for the first time this reporting period, reflecting the hard work DCF has done to ensure safe reunification for children in its care.

### ***Permanency***

Permanency is a cornerstone of child welfare practice. As a core aspect of DCF's Case Practice Model (CPM), work towards achieving permanency begins at intake and continues through the life of a case. DCF's continued training and implementation of the CPM, and sustained focus on improving permanency outcomes led to progress on permanency outcomes this reporting period. The permanency outcomes track the percentage of children in entry cohorts who achieve timely permanency through reunification with parents or relatives, guardianship or adoption. As detailed in Section V.H, DCF maintained satisfactory performance with respect to permanency within 12 months, and, for the first time, performance nearly met the SEP standard for those children and youth achieving permanency within 24 months and permanency within 48 months of entering foster care.

### ***Appropriate Placements and Services***

DCF has maintained an adequate pool of placement resource homes and group settings to meet the needs of children in out-of-home settings, as described in more detail in Section V.F.

As of December 31, 2016 a total of 6,663 children were in out-of-home placement; 6,095 (91%) were in family-like settings, 52 percent placed in non-kinship resource family homes and 39 percent in kinship homes. Seven percent of children were placed in group and residential settings and two percent were in independent living programs. Between July 1 and December 31, 2016, DCF recruited and licensed 485 new kinship and non-kinship family homes; 324 (67%) of the 485 newly licensed homes were kinship homes. As of December 31, 2016, there were a total of 4,741 licensed resource family homes in the state, 1,738 (37%) of which were kinship homes.

As described in more detail in Section V.F, DCF continues to refine its recruitment planning and targeting processes to more thoroughly account for characteristics of existing placement resources and unmet needs, with a particular focus on tailoring recruitment towards homes

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willing and able to accommodate large sibling groups. As of December 2016, there were a total of 85 large capacity SIBS homes: 27 homes with a capacity to accommodate five or more children, and 58 homes that could accommodate four children. DCF hopes to further refine its approach to allow for more targeted recruitment of homes to accommodate specific age groups of children and youth.

### ***Placement Stability***

Appropriate, stable placement for children in foster care is critical to a child's safety and well-being, and maintaining family, school and community bonds. DCF's continued focus on the retention of an appropriate pool of resource homes and on the goal of making the first placement the best placement for children in out-of-home care has led to further performance improvement. Both SEP measures related to placement stability are longitudinal; CY 2015 data for placement stability for children in their first 12 months in care (SEP IV.G.35) became available this period, as well as CY 2014 data for placement stability for those children remaining in care for 13 to 24 months (SEP IV.G.36). For the first time, both of these SEP placement stability measures were met simultaneously.

### ***Family Team Meetings***

A critical component of DCF's CPM is the use of Family Team Meetings (FTMs) to engage families and their formal and informal supports to discuss strengths and needs, craft individualized service plans and track progress toward accomplishing case plan goals. As discussed in Section V.B, the SEP includes five performance measures pertaining to FTMs, three of which have previously been met and are designated as *To Be Maintained*: the requirement that FTMs be held within 45 days of a child's removal (SEP IV.B.16); the requirement that for children in out-of-home placement, at least three additional FTMs after the initial FTM be held within the first 12 months of placement (SEP IV.B.17); and the requirement that children in care after 12 months with the goal of reunification have at least three FTMs each year (SEP IV.B.18). DCF has not yet met the remaining two SEP targets in this area: FTMs held after 12 months in placement for children with a goal other than reunification (SEP IV.B.19) and Quality of Teaming (SEP IV.B.20).

DCF's performance in holding FTMs for children in placement for 12 months with a permanency goal of reunification (SEP IV.B. 18) fell again this monitoring period. In response, the Department's CP&P division will implement a corrective action plan to address barriers to performance. Under the plan, Local Office Managers (LOMs) and Area Directors will review records of cases in which FTMs did not occur and identify barriers to improved performance. In addition, LOMs will identify FTM coordinators in each Local Office to more closely monitor performance and to assist staff in addressing barriers. A statewide FTM Coordinators Convening is planned for fall 2017 so that workers will have an opportunity to share effective strategies, ensure consistency and develop additional strategies to improve practice. Finally, DCF's Central Office will partner with the Office of Training and Professional Development to move the Case Practice Model module on FTMs into new worker training to ensure that new workers are developed as FTM facilitators as early as possible. This modification to the training curricula will reinforce the importance of FTMs as a core component of the Case Practice Model.

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## ***Visitation***

Visitation between children in foster care and their workers, parents and siblings is a core element of child welfare practice and essential to ensuring safety, assessing children's well-being, strengthening families and achieving permanency. As discussed in Section V.E, DCF maintained satisfactory performance with respect to three of the six SEP visitation measures this monitoring period, exceeding requirements for caseworker visits with children in ongoing placements (SEP.III.F.10) and visits between children and their parents (SEP.IV.F.29, SEP.IV.F.30). DCF has not yet met the measures that relate to caseworker contact with families with a reunification goal (SEP.IV.F.28) and sibling visits (SEP.IV.F.31). DCF's performance with respect to caseworker visits with children in new placements (SEP.III.F.9) which had initially been met, fell just below the SEP standard again in some months this reporting period. The Monitor considers this to be a temporary decline in performance and will track progress closely over the next reporting period. DCF has yet to meet the SEP requirements for sibling visits and caseworker visits with parent(s) with a goal of reunification.

## ***Services to Older Youth***

With the leadership and guidance of the Office of Adolescent Services, DCF remains committed to improving practice and services for older youth. The SEP includes four performance measures related to older youth.

The intensive work that DCF staff do to ensure that youth exiting foster care without achieving permanency have housing (SEP IV.K.47) and are either employed or enrolled in an educational program (SEP IV.K.48) is reflected in its current performance. As discussed in Section V.J, for the first time this reporting period, DCF met the SEP outcome that these youth have identified housing and are participating in education or employment. This is a significant achievement, and one that has come from sustained attention to needs at a critical moment in the lives of the older youth that DCF serves.

DCF's performance on the completion of independent living assessments for older youth (SEP IV.K.45) fell just below the SEP standard in four months, and performance on the quality of case planning and services for older youth (SEP IV.K.46) continues to be below the SEP standard.

## ***Accountability for Case Practice***

### ***Quality Reviews***

DCF uses a process of Quality Reviews (QRs) to hold itself accountable for practicing in accordance with its CPM and for consistently achieving results in its everyday practice. The QRs provide accountability for the quality of DCF's work. Through the QR process, trained review teams of two persons – including DCF staff at various levels, community stakeholders and Monitor staff – review CP&P records and interview as many people as possible who are involved with the children and families served by DCF, whether the children remain in the home or are in placement. Cases from each county are reviewed once every two years to allow for a robust and well supported performance improvement process. At the conclusion of each QR

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week, DCF's Office of Performance, Management and Accountability (PMA) works with each Area, through its Office of Quality, to develop short and long term goals to strengthen practice, called a Performance Improvement Plan (PIP). The Office of Quality approves each PIP, aggregates results and shares them with leaders across DCF's divisions. Findings from the QRs are incorporated into existing training and supervisory tools and used to identify systemic opportunities for improvement.

In January 2016, DCF began using a new QR protocol, created in CY 2015, in its review of 195 cases across 10 counties.<sup>20, 21</sup> Ratings from the 2016 QR reviews showed that the status of children and families served by DCF continued to be rated acceptable in the majority of cases in key areas including *learning and development, physical health of the child, safety and living arrangement*. Performance in some areas of practice/system performance also continued to be rated acceptable, such as on *family and community connections with siblings, assessment and understanding with resource families and provision of health care services*.

In other key practice areas, such as on the indicators that measure *teamwork and coordination, case planning, plan implementation and long term view*, performance between January and December 2016 was rated below acceptable levels. This is an area requiring improvement.

### *ChildStat*

ChildStat is a case conferencing forum in which one case is seen as an opportunity to critically analyze practice, policy, and procedures from a systems perspective. The purpose of ChildStat is to encourage a culture of learning through self-reflective and self-diagnostic processes. ChildStat consists of three primary components: the case presentation, group learning activities and the case and practice update. In October 2016, the Office of Performance, Management and Accountability (PMA) modified the ChildStat format slightly by adding a Round Table discussion period to support group learning. The Round Table discussion invites the audience to participate in small groups to answer questions developed by the presenting Local Office and PMA. The audience reconvenes to discuss the questions and lessons learned from the case analysis. When appropriate, PMA calls on experts to provide additional information related to the questions.

Case and practice updates are held six months following each ChildStat presentation. The Area and/or Local Office provides DCF Leadership and the OCQI with an update on the case that was reviewed and any lessons learned to improve case practice. The Monitor continues to support DCF's development of its accountability processes and believes DCF's efforts including ChildStat to self-assess progress have contributed to improved system performance and outcomes for children, youth and families.

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<sup>20</sup> Qualitative Reviews were conducted in Burlington, Essex, Gloucester, Hudson, Hunterdon, Mercer, Monmouth, Passaic, Salem and Union.

<sup>21</sup> To read more about the changes made to the QR protocol, see Section V.N of the [Progress of the New Jersey Department of Children and Families Monitoring Period XVIII \(January 1 – June 30, 2016\)](#) report.

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### III. CHILD AND FAMILY OUTCOMES AND CASE PRACTICE PERFORMANCE MEASURES

The child and family outcomes and case practice performance measures are 48 measures and Foundational Elements that assess the state's performance in meeting the requirements of the SEP (see Table 1). These performance measures cover the areas of child safety, permanency, service planning, child well-being and ongoing infrastructure development pertaining to core elements such as appropriate staffing, caseloads and training.

Many of the measures are assessed through a review of data from NJ SPIRIT and SafeMeasures,<sup>22</sup> and, in some areas, these data are independently validated by the Monitor. Some data are also provided through DCF's work with Hornby Zeller Associates, Inc. who assist with data analysis. Data provided in this report are as of December 2016, or the most current date available.

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<sup>22</sup> SafeMeasures is a data warehouse and analytical tool that allows tracking of critical child welfare indicators by worker, supervisor, Local Office, county and statewide. It is used by different levels of staff to track, monitor and analyze performance and trends in case practice and targeted measures and outcomes.



**Table 1: *Charlie and Nadine H. v. Christie* Child and Family Outcome and Case Practice Performance Measures  
(Summary of Performance as of December 31, 2016)**

<b>Table 1A: To Be Achieved</b>					
<b>SEP Reference</b>	<b>Quantitative or Qualitative Measure</b>	<b>Sustainability and Exit Plan Standard</b>	<b>June 2016 Performance<sup>23</sup></b>	<b>December 2016 Performance<sup>24</sup></b>	<b>Requirement Fulfilled (Yes/No/Partially/NA)<sup>25</sup></b>
<b><i>Investigations</i></b>					
IV.A. 15	<u>Quality Investigations</u>	85% of investigations shall meet the standards for quality investigations. The Monitor, in consultation with the parties, shall determine appropriate standards for quality investigations.	A review of a statistically significant sample <sup>26</sup> of investigations completed in February 2016 found that 83% of investigations met quality standards. <sup>27</sup>	NA: quality measured through an Investigation Case Record Review, last conducted in Winter 2016. <sup>28</sup>	No

<sup>23</sup> In some instances where the Monitor does not have June 2016 data, the most recent data available are included.

<sup>24</sup> In some instances where the Monitor does not have December 2016 data, the most recent data available are included.

<sup>25</sup> “Yes” indicates that, in the Monitor’s judgment based on presently available information, DCF has fulfilled its obligations regarding the requirement under the SEP. “Partially” is used when DCF has come very close but, in the Monitor’s judgment, has not met the SEP standard. “No” indicates that, in the Monitor’s judgment, DCF has not fulfilled its obligation regarding the requirement. “NA” indicated that data are not available for the relevant monitoring period.

<sup>26</sup> Three-hundred and twenty-seven investigations were reviewed.

<sup>27</sup> Reviewers could select four possible responses to the question of the quality of the investigation which included completely, substantially, marginally and not at all. Completely and substantially responses are considered as having met quality standards. The results have a ± 5% margin of error with 95% confidence.

<sup>28</sup> Investigation Case Record Review is generally conducted every two years.

**Table 1A: To Be Achieved**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance <sup>23</sup>	December 2016 Performance <sup>24</sup>	Requirement Fulfilled (Yes/No/Partially/NA) <sup>25</sup>
<i>Family Teaming</i>					
IV.B. 19	<u>Subsequent FTMs after 12 months – Other than Reunification Goal</u>	After the first 12 months of a child being in care, for those children with a goal other than reunification, 90% shall have at least two FTMs each year.	In June 2016, 83% of children with a goal other than reunification had two or more FTMs after 12 months of placement. Monthly range during January – June 2016 monitoring period: 73 to 87%.	In December 2016, 85% of children with a goal other than reunification had two or more FTMs after 12 months of placement. Monthly range during July – December 2016 monitoring period: 74 to 87%. <sup>29</sup>	No
IV.B. 20	<u>Quality of Teaming</u>	75% of cases involving out-of-home placements that were assessed as part of the QR process will show evidence of both acceptable team formation and acceptable functioning. The Monitor, in consultation with the parties, shall determine the standards for quality team formation and functioning.	51% of cases rated at least minimally acceptable on QR indicator <i>teamwork and coordination</i> . <sup>30</sup> (January-June 2016)	49% of cases rated at least minimally acceptable on QR indicator <i>teamwork and coordination</i> . <sup>31, 32</sup> (CY 2016).	No

<sup>29</sup> Monthly performance is as follows: July, 84%; August, 84%; September, 87%; October, 84%; November, 74%; December, 85%.

<sup>30</sup> Under the new QR protocol, the *team formation* and *team functioning* indicators are measured under one indicator, *teamwork and coordination*.

<sup>31</sup> All in-home cases are excluded from this measure.

<sup>32</sup> Seventy-two of the 146 (49%) cases reviewed for Quality of Teaming were rated acceptable on the *teamwork and coordination* indicator.

**Table 1A: To Be Achieved**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance <sup>23</sup>	December 2016 Performance <sup>24</sup>	Requirement Fulfilled (Yes/No/Partially/NA) <sup>25</sup>
<i>Needs Assessment</i>					
IV.C. 21	<u>Needs Assessment</u>	The state shall regularly evaluate the need for additional placements and services to meet the needs of children in custody and their families, and to support intact families and prevent the need for out-of-home care. Such needs assessments shall be conducted on an annual, staggered basis that assures that every county is assessed at least once every three years. The State shall develop placements and services consistent with the findings of these needs assessments.	DCF began the Phase III process to consist of interviews and focus groups involving 170 participants, including external and internal stakeholders.	Between July and December 2016, DCF and the Rutgers University research team continued to analyze qualitative data collected from Phase III of the Needs Assessment Process. DCF and Rutgers began to develop a survey to administer to families of a randomly selected statewide sample of approximately 300 target children. Parents and caseworkers of the sample of children will serve as the main informants of this portion of Phase IV of the Needs Assessment process. The final report, synthesizing data and information from all four phases of the Needs Assessment process and focusing on regional and statewide system issues is anticipated to be completed by December 2017.	Partially

**Table 1A: To Be Achieved**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance <sup>23</sup>	December 2016 Performance <sup>24</sup>	Requirement Fulfilled (Yes/No/Partially/NA) <sup>25</sup>
<b><i>Case And Service Planning</i></b>					
IV.D. 23	<u>Quality of Case Plans</u>	80% of case plans shall be rated acceptable as measured by the QR process. The Monitor, in consultation with the parties, shall determine that standards for quality case planning.	51% of cases rated at least minimally acceptable on both QR indicators <i>case planning process</i> and <i>tracking and adjusting</i> . (January – June 2016)	49% of cases rated at least minimally acceptable on both QR indicators <i>case planning process</i> and <i>tracking and adjusting</i> . <sup>33</sup> (CY 2016)	No
<b><i>Visitation</i></b>					
IV.F. 28	<u>Caseworker Contacts with Family When Goal is Reunification</u>	90% of families will have at least twice-per-month, face-to-face contact with their caseworker when the permanency goal is reunification.	In June 2016, 74% of applicable parents of children in custody with a goal of reunification had at least two face-to-face visits with a caseworker. Monthly range during January – June 2016 monitoring period: 71 to 74%.	In December 2016, 84% of applicable parents of children in custody with a goal of reunification had at least two face-to-face visits with a caseworker. Monthly range during July – December 2016 monitoring period: 81 to 86%. <sup>34, 35</sup>	No

<sup>33</sup> One-hundred and ninety five cases were reviewed as part of the QR conducted from January to December 2016. Ninety-five of the 195 (49%) in and out-of-home cases rated acceptable on *both* the *case planning process* and *tracking and adjusting* indicators; 106 cases (54%) rated acceptable on *case planning* and 123 cases (63%) rated acceptable on *tracking and adjusting*.

<sup>34</sup> Monthly performance is as follows: July, 81%; August, 84%; September, 82%; October, 86%; November, 82%; December; 84%.

<sup>35</sup> Based upon validation of a statistically significant sample with ± 5% margin of error with 95% confidence, these data reflect the exclusions of instances in which exceptions to the requirement for caseworker contacts with family were appropriately applied and documented. Data for this period are not comparable to data reported in the previous monitoring period given that similar exclusions were not made.

**Table 1A: To Be Achieved**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance <sup>23</sup>	December 2016 Performance <sup>24</sup>	Requirement Fulfilled (Yes/No/Partially/NA) <sup>25</sup>
IV.F 31	<u>Child Visits with Siblings</u>	85% of children in custody who have siblings with whom they are not residing will visit those siblings at least monthly, excluding those situations where a court order prohibits or regulates visits or there is supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.	In June 2016, 71% of children in custody who have siblings with whom they are not residing visited with their siblings monthly. Monthly range during January – June 2016 monitoring period: 71 to 76%.	In December 2016, 76% of children in custody who have siblings with whom they are not residing visited with their siblings monthly. Monthly range during July – December 2016 monitoring period: 74 to 76%. <sup>36, 37</sup>	No
<b>Placement</b>					
IV.G 35	<u>Placement Stability, First 12 Months in Care</u>	At least 84% of children entering out-of-home placement for the first time in a calendar year will have no more than one placement change during the 12 months following their date of entry.	CY 2015 data not yet available.	For CY 2015, 84% of children who entered out-of-home placement for the first time had no more than one placement change during the 12 months following their date of entry.	Yes

<sup>36</sup> Monthly performance is as follows: July, 75%; August, 75%; September, 75%; October, 76%; November, 74%; December, 76%.

<sup>37</sup> Reported performance may understate actual performance because data do not account for instances in which a visit is not required.

**Table 1A: To Be Achieved**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance <sup>23</sup>	December 2016 Performance <sup>24</sup>	Requirement Fulfilled (Yes/No/Partially/NA) <sup>25</sup>
<i>Maltreatment</i>					
IV.H 38	<u>Maltreatment Post-Reunification</u>	Of all children who enter foster care in a 12-month period for the first time who are discharged within 24 months to reunification or living with a relative(s), no more than 6.9% will be the victims of abuse or neglect within 12 months of their discharge.	CY 2013 data not yet available.	For CY 2013, 6.5% of children who entered foster care for the first time who were discharged within 24 months to reunification or living with relative(s) were the victims of abuse or neglect within 12 months of their discharge.	Yes
IV.H 39	<u>Re-Entry to Placement</u>	Of all children who enter foster care in a 12 month period for the first time who are discharged within 12 months to reunification, living with a relative(s), or guardianship, no more than 9% will re-enter foster care within 12 months of their discharge.	CY 2014 data not yet available.	For CY 2014, 12% of all children who entered foster care for the first time who were discharged within 12 months to reunification, living with relative(s), or guardianship re-entered foster care within 12 months of their discharge.	No

**Table 1A: To Be Achieved**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance <sup>23</sup>	December 2016 Performance <sup>24</sup>	Requirement Fulfilled (Yes/No/Partially/NA) <sup>25</sup>
<i>Timely Permanency</i>					
IV.I 41	<u>Permanency Within 24 Months</u>	Of all children who enter foster care in a 12-month period, at least 66% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 24 months of entering foster care.	CY 2014 data not yet available.	For CY 2014, 65% of children who entered foster care were discharged to permanency (reunification, living with relative(s), guardianship or adoption) within 24 months of entering foster care.	No
IV.I 42	<u>Permanency Within 36 Months</u>	Of all children who enter foster care in a 12-month period, at least 80% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 36 months of entering foster care.	CY 2013 data not yet available.	For CY 2013, 78% of children who entered foster care were discharged to permanency (reunification, living with relative(s), guardianship or adoption) within 36 months of entering foster care.	No
IV.I 43	<u>Permanency Within 48 Months</u>	Of all children who enter foster care in a 12-month period, at least 86% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 48 months of entering foster care.	CY 2012 data not yet available.	For CY 2012, 85% of children who entered foster care were discharged to permanency (reunification, living with relative(s), guardianship or adoption) within 48 months of entering foster care.	No

**Table 1A: To Be Achieved**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance <sup>23</sup>	December 2016 Performance <sup>24</sup>	Requirement Fulfilled (Yes/No/Partially/NA) <sup>25</sup>
<b><i>Services to Support Transition</i></b>					
IV.J 44	<u>Services to Support Transition</u>	80% of cases will be rated acceptable for supporting transitions as measured by the QR. The Monitor, in consultation with the parties, shall determine the standards for quality support for transitions.	65% of cases rated at least minimally acceptable on QR indicator <i>successful transitions</i> . (January – June 2016)	66% of cases rated at least minimally acceptable on QR indicator <i>successful transitions</i> . <sup>38</sup> (CY 2016)	No
<b><i>Older Youth</i></b>					
IV.K 47	<u>Housing</u>	95% of youth exiting care without achieving permanency shall have housing.	91% of youth exiting care between January and June 2016 without achieving permanency had documentation of a housing plan upon exiting care.	95% of youth exiting care between July and December 2016 without achieving permanency had documentation of a housing plan upon exiting care.	Yes
IV.K 48	<u>Employment/Education</u>	90% of youth exiting care without achieving permanency shall be employed, enrolled in or have recently completed a training or an educational program or there is documented evidence of consistent efforts to help the youth secure employment or training.	83% of youth exiting care between January and June 2016 without achieving permanency were either employed or enrolled in education or vocational training programs.	90% of youth exiting care between July and December 2016 without achieving permanency were either employed or enrolled in education or vocational training programs.	Yes

<sup>38</sup> Eighty-eight of the 133 cases reviewed were rated acceptable on the *successful transitions* indicator.



**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
<b>Investigations</b>					
III.A. 1	<u>Institutional Abuse Investigations Unit (IAIU)</u>	80% of IAIU will be completed within 60 days.	87% of IAIU were completed within 60 days.	83% of IAIU were completed within 60 days.	Yes
IV.A. 13	<u>Timeliness of Investigation Completion (60 days)</u>	85% of all investigations of alleged child abuse and neglect shall be completed within 60 days. Cases with documented acceptable extensions in accordance with policy are considered compliant.	In June 2016, 86% of all investigations were completed within 60 days. Monthly range during January – June 2016 monitoring period: 85 to 87%.	In November 2016, 84% of all investigations were completed within 60 days. Monthly range during July – November 2016 monitoring period: 84 to 87%. <sup>40</sup>	Yes <sup>41</sup>
IV.A. 14	<u>Timeliness of Investigation Completion (90 days)</u>	95% of all investigations of alleged child abuse and neglect shall be completed within 90 days. Cases with documented acceptable extensions in accordance with policy are considered compliant.	In June 2016, 95% of all investigations were completed within 90 days.	In November 2016, 95% of all investigations were completed within 90 days, <sup>42</sup> Performance from July to November 2016 ranged from a low of 95 percent to a high of 96 percent. <sup>43</sup>	Yes

<sup>39</sup> “Yes” indicates that, in the Monitor’s judgment based on presently available information, DCF has fulfilled its obligations regarding the requirement under the SEP. The Monitor has also designated “Yes” for a requirement where DCF has met or is within one percentage point of the SEP standard or there are a small number of cases causing the failure to meet the SEP standard. “NA” indicated that data are not available for the relevant monitoring period.

<sup>40</sup> November 2016 was the most current data available at the time of this report. December 2016 data will be included in the next monitoring report. Monthly performance for this measure is as follows: July, 84%; August, 87%; September, 87%; October, 86%; November, 84%.

<sup>41</sup> The Monitor considers this to be an insubstantial decline in performance that is still within an acceptable range. As this measure was designated as *To Be Maintained* in a previous monitoring period, the Monitor will continue to carefully track this data to determine if this decline in performance is temporary and/or insubstantial.

<sup>42</sup> Data on this measure may understate performance because they do not reflect acceptable extension requests.

<sup>43</sup> November 2016 was the most current data available at the time of this report. December 2016 data will be included in the next monitoring report. Monthly performance for this measure is as follows: July, 95%; August, 95%; September, 96%; October, 95%; November, 95%.

**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
<b><i>Family Teaming</i></b>					
IV.B. 16	<u>Initial Family Team Meeting</u>	80% of children newly entering placement shall have a family team meeting before or within 45 days of placement.	In June 2016, 75% of children newly entering placement had a FTM within 45 days of entering placement. Monthly range during January – June 2016 monitoring period: 74 to 87%.	In December 2016, 84% of children newly entering placement had a FTM within 45 days of entering placement. Monthly range during July – December 2016 monitoring period: 82 to 90%. <sup>44, 45</sup>	Yes
IV.B. 17	<u>Subsequent FTMs within 12 months</u>	80% of children will have three additional FTMs within the first 12 months of the child coming into placement.	In June 2016, 86% of children had an additional three or more FTMs within the first 12 months of placement. Monthly range during January – June 2016 monitoring period: 76 to 87%.	In December 2016, 74% of children had an additional three or more FTMs within the first 12 months of placement. Monthly range during July – December 2016 monitoring period: 74 to 90%. <sup>46, 47</sup>	Yes <sup>48</sup>

<sup>44</sup> Monthly performance for this measure is as follows: July, 85%; August, 82%; September, 90%; October, 83%; November, 82%; December, 84%.

<sup>45</sup> Reported performance may understate actual performance because data do not exclude all instances in which an FTM is not required.

<sup>46</sup> Monthly validated performance data for this measure is as follows: July, 90%; August, 84%; September, 76%; October, 87%; November, 90%; December, 74%.

<sup>47</sup> The Monitor reviewed 190 cases in which there was documentation of an exception to the FTM requirement and excluded from these data all instances (for each month) in which it determined that an exception was appropriately used.

<sup>48</sup> The Monitor considers this to be a temporary decline in performance that is still within an acceptable range. As this measure was designated as *To Be Maintained* in a previous monitoring period, the Monitor will continue to carefully track this data to determine if this decline in performance is temporary and/or insubstantial.

**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
IV.B. 18	<u>Subsequent FTMs after 12 months – Reunification Goal</u>	After the first 12 months of a child being in care, 90% of those with a goal of reunification will have at least three FTMs each year.	In June 2016, 79% of children with a goal of reunification had three or more FTMs after 12 months of placement. Monthly range during January – June 2016 monitoring period: 79 to 94%.	In December 2016, 80% of children with a goal of reunification had three or more FTMs after 12 months of placement. Monthly range during July – December 2016 monitoring period: 69 to 88%. <sup>49, 50</sup>	No <sup>51</sup>
<b><i>Case And Service Planning</i></b>					
IV.D. 22	<u>Initial Case Plans</u>	95% of initial case plans for children and families shall be completed within 30 days.	96% of children entering care had case plans developed within 30 days. Monthly range during January – June 2016 monitoring period: 91 to 99%.	96% of children entering care had case plans developed within 30 days. Monthly range during July – December 2016 monitoring period: 93 to 96%. <sup>52</sup>	Yes <sup>53</sup>

<sup>49</sup> Monthly performance for this measure is as follows: July, 88%; August, 81%; September, 82%; October, 77%; November, 69%; December, 80%.

<sup>50</sup> Reported performance may understate actual performance because data do not exclude all instances where an FTM is not required.

<sup>51</sup> DCF did not meet this SEP performance measure in any of the six months for the period July through December 2016.

<sup>52</sup> Monthly performance for this measure is as follows: July, 93%; August, 96%; September, 94%; October, 94%; November, 94%; December, 96%.

<sup>53</sup> While DCF met this measure in only two of the six months, performance was within one or two points of the SEP standard in the remaining four months. As this measure was designated as *To Be Maintained* in the previous monitoring period, the Monitor will continue to carefully track this data to determine if this decline in performance is temporary and/or insubstantial.

**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
<b>Caseloads</b>					
III.B. 2	<u>Supervisor/Worker Ratio</u>	95% of offices will have sufficient supervisory staff to maintain a 5 worker to 1 supervisor ratio.	100% of Local Offices have sufficient supervisory staff.	100% of Local Offices have sufficient supervisory staff.	Yes
III.B. 3	<u>IAIU Investigators Caseload</u>	95% of IAIU investigators will have (a) no more than 12 open cases, and (b) no more than eight new case assignments per month.	100% of IAIU investigators met caseload standards.	100% of IAIU investigators met caseload standards.	Yes
III.B. 4	<u>Permanency Workers (Local Offices) Caseload</u>	95% of local offices will have average caseloads for permanency workers of (a) no more than 15 families, and (b) no more than 10 children in out-of-home care.	100% of Local Offices met permanency standards.	100% of Local Offices met permanency standards.	Yes
III.B. 5	<u>Permanency Workers Caseload</u>	95% of permanency workers will have (a) no more than 15 families, and (b) no more than 10 children in out of home care.	100% of Permanency workers met caseload standards.	100% of Permanency workers met caseload standards. <sup>54</sup>	Yes

<sup>54</sup> Reported performance is the average of DCF’s performance in meeting individual caseload standards during this six month monitoring period.

**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
IV.E. 24	<u>Intake workers (Local Offices) Caseload</u>	95% of local offices will have average caseloads for Intake workers of no more than 12 families and no more than eight new case assignments per month.	100% of local offices met intake caseload standards. Monthly range during January-June 2016 monitoring period: 98 to 100%.	100% of local offices met intake caseload standards.	Yes
IV.E. 25	<u>Intake workers Caseload</u>	90% of individual intake works shall have no more than 12 open cases and no more than eight new case assignments per month. No intake worker with 12 or more open cases can be given more than two secondary assignments per month.	93% of Intake workers met caseload standards. Monthly range during January – June 2016 monitoring period: 90 to 95%.	95% of Intake workers met caseload standards. <sup>55</sup>	Yes
IV.E. 26	<u>Adoption Workers (Local Offices) Caseload</u>	95% of Local Offices will have average caseloads for adoption workers of no more than 15 children per worker.	100% of Local Offices met adoption standards.	100% of Local Offices met adoption standards.	Yes
IV.E. 27	<u>Adoption Workers Caseload</u>	95% of individual adoption worker caseloads shall be no more than 15 children per worker.	94% of Adoption workers met caseload standards. Monthly range during January – June 2016 monitoring period: 93 to 96%.	97% of Adoption workers met caseload standards. <sup>56</sup>	Yes

<sup>55</sup> Reported performance is the average of DCF’s performance in meeting individual caseload standards during this six month monitoring period.

<sup>56</sup> Ibid.

**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
<b>Case Plans</b>					
III. C. 6	<u>Timeliness of Current Plans</u>	95% of case plans for children and families will be reviewed and modified no less frequently than every six months.	96% of case plans were reviewed and modified as necessary at least every six months. Monthly range during January – June 2016 monitoring period: 95 to 96%.	95% of case plans were reviewed and modified as necessary at least every six months. Monthly range during July – December 2016 monitoring period: 95 to 96%. <sup>57</sup>	Yes
<b>DAsG</b>					
III.D. 7	<u>Adequacy of DAsG Staffing</u>	The State will maintain adequate DAsG staff positions and keep positions filled.	134 (100%) of 134 staff positions filled with four staff on leave; 130 (97%) available DAsG.	133 (100%) of 133 staff positions filled with five staff on leave; 128 (96%) available DAsG. <sup>58</sup>	Yes
<b>Child Health Units</b>					
III.E. 8	<u>Child Health Units</u>	The State will continue to maintain its network of child health units, adequately staffed by nurses in each local office.	As of June 2016, DCF had 180 health care case managers and 84 staff assistants.	As of December 2016, DCF had 180 health care case managers and 84 staff assistants. <sup>59</sup>	Yes

<sup>57</sup> Monthly performance on this measure is as follows: July, 96%; August, 96%; September, 95%; October, 95%; November, 95%; December, 95%.

<sup>58</sup> DCF reported that during this monitoring period select DAsG outside of the DCF Practice Group have dedicated some of their time to DCF matters.

<sup>59</sup> In December 2016, of the 180 health care case managers (HCCM), 177 were available for coverage for a ratio of one HCCM to every 38 children in out-of-home care. A ratio of one HCCM to 50 children in out-of-home care or less is considered adequately staffed.

**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
<b>Visitation</b>					
IV.F. 29	<u>Parent-Child Visits – Weekly</u>	60% of children in custody with a return home goal will have an in-person visit with their parent(s) at least weekly, excluding those situations where a court order prohibits or regulates visits or there is a supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.	In June 2016, 84% of applicable children had weekly visits with their parents. Monthly range during January – June 2016 monitoring period: 82 to 87%.	In December 2016, 85% of applicable children had weekly visits with their parents. Monthly range during July – December 2016 monitoring period: 82 to 87%. <sup>60, 61</sup>	Yes
IV.F 30	<u>Parent-Child Visits – Bi-Weekly</u>	85% of children in custody will have an in-person visit with their parent(s) or legally responsible family member at least every other week, excluding those situations where a court order prohibits or regulates visits or there is supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.	In June 2016, 89% of applicable children had bi-weekly visits with their parents. Monthly range during January – June 2016 monitoring period: 86 to 89%.	In December 2016, 96% of applicable children had bi-weekly visits with their parents. Monthly range during July – December 2016 monitoring period: 94 to 96%. <sup>62, 63</sup>	Yes

<sup>60</sup> Monthly performance is as follows: July, 84%; August, 86%; September, 86%; October, 87%; November, 82%; December, 85%.

<sup>61</sup> These data exclude all instances in which a documentation indicated that a visit was not required.

<sup>62</sup> Monthly performance is as follows: July, 95%; August, 96%; September, 96%; October, 96%; November, 94%; December, 96%.

<sup>63</sup> These data exclude all instances in which a documentation indicated that a visit was not required.

**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
III.F. 9	<u>Caseworker Contacts with Children – New Placement/Placement Change</u>	93% of children shall have at least twice-per-month face-to-face contact with their caseworker within the first two months of placement, with at least one contact in the placement.	In June 2016, 91% of children had two visits per month, one of which was in the placement, during the first two months of an initial or subsequent placement. Monthly range during January – June 2016 monitoring period: 88 to 94%.	In December 2016, 93% of children had two visits per month, one of which was in the placement, during the first two months of an initial or subsequent placement. Monthly range during July – December 2016 monitoring period: 89 to 94%. <sup>64</sup>	Yes <sup>65</sup>
III.F. 10	<u>Caseworker Contact with Children in Placement</u>	During the remainder of the placement, 93% of children shall have at least one caseworker visit per month, in the placement.	In June 2016, 96% of children had at least one caseworker visit per month in his/her placement. Monthly range during January – June 2016 monitoring period: 96 to 97%.	In December 2016, 98% of children had at least one caseworker visit per month in his/her placement. Monthly range during July – December 2016 monitoring period: 96 to 98%. <sup>66</sup>	Yes

<sup>64</sup> Monthly performance is as follows: July, 89%; August 92%; September, 92%; October, 94%; November, 90%; December 93%.

<sup>65</sup> The Monitor considers this to be a temporary decline in performance that is still within an acceptable range. As this measure was designated as *To Be Maintained* in a previous monitoring period, the Monitor will continue to carefully track this data to determine if this decline in performance is temporary and/or insubstantial.

<sup>66</sup> Monthly performance is as follows: July, 96%; August, 97%; September, 98%; October, 97%; November, 97%; December, 98%.



**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
<b><i>Placement</i></b>					
IV.G 32	<u>Placing Siblings</u>	At least 80% of siblings groups of two or three children entering custody will be placed together.	CY 2016 data not yet available.	For CY 2016, 78% of sibling groups of two or three children entering custody were placed together.	Yes <sup>67</sup>
IV.G 33	<u>Sibling Placements of Four or More Children</u>	All children will be placed with at least one other sibling 80% of the time.	CY 2016 data not yet available.	For CY 2016, children were placed with at least one other sibling 84% of the time.	Yes
IV.G.34	<u>Recruitment for Sibling Groups of Four or More</u>	DCF will continue to recruit for resource homes capable of serving sibling groups of four or more.	Between January and June 2016, DCF expanded its Siblings in Best Placement Settings (SIBS) program to include resource families (kinship, non-kinship or new families) willing and able to accommodate large sibling groups of four or more children. As of June 2016, DCF had 94 SIBS homes: 65 homes with the capacity for four children and 29 homes with the capacity of five or more children.	Between July and December 2016, DCF recruited a total of 34 SIBS homes. As of December 2016, DCF had a total of 85 large capacity SIBS homes; 27 homes that can accommodate five or more children, and 58 homes that can accommodate four children.	Yes

<sup>67</sup> DCF’s performance fell just below the SEP standard in CY 2016. As this measure was designated as *To Be Maintained*, the Monitor will continue to carefully track this data to determine if this decline in performance is temporary and/or insubstantial.

**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
IV.G 36	<u>Placement Stability, 13 – 24 Months in Care</u>	At least 88% of these children will have no more than one placement change during the 13 – 24 months following their date of entry.	CY 2014 data not yet available.	For CY 2014, 95% of applicable children had no more than one placement change during the 13 – 24 months following their date of entry.	Yes
<b>Education</b>					
III.G. 11	<u>Educational Needs</u>	80% of cases will be rated acceptable as measured by the QR in stability (school) and learning and development. The Monitor, in consultation with the parties, shall determine the standards for school stability and quality learning and development.	85% of cases rated acceptable for both QR indicators: <i>stability (school)</i> and <i>learning and development</i> . (January – June 2016)	87% of cases rated acceptable for both QR indicators: <i>stability (school)</i> and <i>learning and development</i> . <sup>68</sup> (CY 2016)	Yes

<sup>68</sup> Seventy-eight of the 90 cases reviewed rated acceptable on *both* the *stability in school* and *learning and development* indicators; 59% (61 of 102) were rated acceptable for *school stability* and 94% (87 of 93) were rated acceptable for *learning and development*.

**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
<b><i>Maltreatment</i></b>					
III.H. 12	<u>Abuse and Neglect of Children in Foster Care</u>	No more than 0.49% of children will be victims of substantiated abuse or neglect by a resource parent or facility staff member.	CY 2016 data not yet available.	For CY 2016, 0.11% of children were victims of substantiated abuse or neglect by a resource parent or facility staff member.	Yes
IV.H 37	<u>Repeat Maltreatment (In-home)</u>	No more than 7.2% of children who remain at home after a substantiation of abuse or neglect will have another substantiation within the next 12 months.	CY 2015 data not yet available.	For CY 2015, 6.5% of children who remained at home after a substantiation of abuse or neglect had another substantiation within the next 12 months.	Yes
<b><i>Permanency</i></b>					
IV.I 40	<u>Permanency within 12 Months</u>	Of all children who enter foster care in a 12-month period, at least 42% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 12 months of entering foster care.	CY 2015 data not yet available.	For CY 2015, 42% of applicable children were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 12 months of entering foster care.	Yes

**Table 1B: To Be Maintained**

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	June 2016 Performance	December 2016 Performance <sup>26</sup>	Requirement Maintained (Yes/No/NA) <sup>39</sup>
<i>Older Youth</i>					
IV.K 45	<u>Independent Living Assessments</u>	90% of youth ages 14 to 18 have an Independent Living Assessment.	95% of youth ages 14 to 18 in out-of-home placement for at least six months had a completed Independent Living Assessment.	In December 2016, 88% of applicable children had a completed Independent Living Assessment. Monthly range during July – December 2016 monitoring period: 87 to 93%. <sup>69</sup>	Yes <sup>70</sup>
IV.K 46	<u>Quality of Case Planning and Services</u>	75% of youth aged 18 to 21 who have not achieved legal permanency shall receive acceptable quality case management and service planning.	67% of youth cases reviewed rated acceptable. (January – June 2016)	63% of youth cases reviewed rated acceptable. <sup>71</sup> (CY 2016)	Yes

<sup>69</sup> Monthly performance is as follows: July, 93%; August, 92%; September, 89%; October, 89%; November, 87%; December 88%.

<sup>70</sup> The Monitor considers this to be a temporary decline in performance that is still within an acceptable range.

<sup>71</sup> Twenty of the 32 cases reviewed were rated acceptable for both the *child (youth)/family status* and *practice performance* indicators; 81% (26 of 32) of cases rated acceptable on the *child(youth)/family status* indicator and 69% (22 of 32) of cases rated acceptable on the *practice performance* indicator. The universe of cases to which this measure applies is small, making fluctuations more likely.

**Table 1C: Foundational Elements**

Reference	Additional SEP Requirements That DCF Must Sustain:	Data Source	December 2016 Fulfilled (Yes/No)
<p><b>A. Data Transparency</b></p>	<p>DCF will continue to maintain a case management information and data collections system that allows for the assessment, tracking, posting or web-based publishing, and utilization of key data indicators.</p>	<p>Data are currently provided directly to the Monitor and published by DCF in reports and on its website.<sup>72</sup></p> <p>NJ SPIRIT functionality is routinely assessed by the Monitor’s use of NJ SPIRIT data for validation and through use of SafeMeasures, as well as in conducting case inquiries and case record reviews.</p>	<p>Yes</p>

<sup>72</sup> Going forward, the following reports will be published as data sources for this Foundational Element: Report on Our Work with Children, Youth & Families; CP&P Outcome Report; Report on the Healthcare of Children in Out-of-Home Placement in NJ; Adoption Report; DCF Needs Assessment; and the DCF Workforce Report.

**Table 1C: Foundational Elements**

Reference	Additional SEP Requirements That DCF Must Sustain:	Data Source	December 2016 Fulfilled (Yes/No)
<b>B. Case Practice Model</b>	Implement and sustain a Case Practice Model	QR Data Data are currently provided directly to the Monitor. <sup>73</sup> Monitor site visits and attendance at QRs, ChildStat and other meetings.	Yes
	Quality investigation and assessment	Investigation case record review.	
	Safety and risk assessment and risk reassessment	Data are currently provided directly to the Monitor. <sup>74</sup>	
	Engagement with youth and families	QR Data Data are currently provided directly to the Monitor. <sup>75</sup>	
	Working with family teams	QR Data Data are currently provided directly to the Monitor. <sup>76</sup>	
	Individualized planning and relevant services	QR Data Data are currently provided directly to the Monitor. <sup>77</sup>	
	Safe and sustained transition from DCF	QR Data Data are currently provided directly to the Monitor. <sup>78</sup>	
	Continuous review and adaptations	Data are currently provided directly to the Monitor. <sup>79</sup>	

<sup>73</sup> Going forward, the following new report will be published as the data source for this Foundational Element: Report on Our Work with Children, Youth & Families.

<sup>74</sup> Ibid.

<sup>75</sup> Ibid.

<sup>76</sup> Ibid.

<sup>77</sup> Ibid.

<sup>78</sup> Ibid.

<sup>79</sup> Ibid.

**Table 1C: Foundational Elements**

Reference	Additional SEP Requirements That DCF Must Sustain:	Data Source	December 2016 Fulfilled (Yes/No)
<b>C. State Central Registry</b>	Received by the field in a timely manner	Commissioner’s Monthly Report	Yes
	Investigation commenced within required response time	Commissioner’s Monthly Report	
<b>D. Appropriate Placements</b>	Appropriate placements of children	QR data Data are currently provided directly to the Monitor <sup>80</sup> Monitor site visits and attendance at QRs, ChildStat and other meetings	Yes
	Resource family homes licensed and closed (kinship/non-kinship)	Commissioner’s Monthly Report	
	Number of children in home/out of home demographic data	Quarterly Demographic Report	
	Placed in a family setting	Commissioner’s Monthly Report	
	Placement proximity	Data are currently provided directly to the Monitor. <sup>81</sup>	
	No children under 13 years old in shelters	Commissioner’s Monthly Report	
	Children over 13 in shelters no more than 30 days	Commissioner’s Monthly Report	
	No behavioral health placements out of state without approval	Commissioner’s Monthly Report	
	Adequate number of resource placements	CP&P Needs Assessment Data are currently provided directly to the Monitor <sup>82</sup>	

<sup>80</sup> Ibid

<sup>81</sup> Ibid

<sup>82</sup> Ibid

**Table 1C: Foundational Elements**

Reference	Additional SEP Requirements That DCF Must Sustain:	Data Source	December 2016 Fulfilled (Yes/No)
E. Service Array	Services for youth age 18-21, LGBTQI, mental health and domestic violence for birth parents with families involved with the child welfare system	Services for older youth can be found at NJYRS.org DCF Website will be updated with information on services for youth (e.g., Safe Space Liaison Program) CP&P Needs Assessment	Yes
	Preventive home visitation programs	Commissioner's Monthly Report	
	Family Success Centers	Commissioner's Monthly Report Monitor Site Visits	



**Table 1C: Foundational Elements**

Reference	Additional SEP Requirements That DCF Must Sustain:	Data Source	December 2016 Fulfilled (Yes/No)
<b>F. Medical and Behavioral Health Services</b>	Appropriate medical assessment and treatment	Data are currently provided directly to the Monitor <sup>83</sup>	Yes  DCF continues to provide sustained access to health care for children in out-of-home placement.
	Pre-placement and entry medical assessments	Data are currently provided directly to the Monitor <sup>84</sup> Commissioner's Monthly Report	
	Dental examinations	Data are currently provided directly to the Monitor <sup>85</sup> Commissioner's Monthly Report	
	Immunizations	Data are currently provided directly to the Monitor <sup>86</sup> Commissioner's Monthly Report	
	Follow-up care and treatment	Data are currently provided directly to the Monitor <sup>87</sup>	
	Mental health assessment and treatment	Data are currently provided directly to the Monitor <sup>88</sup>	
	Behavioral health	CIACC Monthly Report	

<sup>83</sup> Going forward, the following new report will be published as the data source for this Foundational Element: Report on the Healthcare of Children in Out-of-Home Placement in NJ.

<sup>84</sup> Going forward, the following new reports will be published as data sources for this Foundational Element: Report on Our Work with Children, Youth & Families, CP&P Outcome Report, Report on the Healthcare of Children in Out-of-Home Placement in NJ and Adoption Report.

<sup>85</sup> Ibid.

<sup>86</sup> Ibid.

<sup>87</sup> Going forward, the following new report will be published as the data source for this Foundational Element: Report on the Healthcare of Children in Out-of-Home Placement in NJ.

<sup>88</sup> Going forward, the following new report will be published as the data source for this Foundational Element: Report on the Healthcare of Children in Out-of-Home Placement in NJ.

**Table 1C: Foundational Elements**

Reference	Additional SEP Requirements That DCF Must Sustain:	Data Source	December 2016 Fulfilled (Yes/No)
<p><b>G. Training</b></p>	Pre-service training	<p>Data are currently provided directly to the Monitor<sup>89</sup></p>	<p>Yes</p>
	Case practice model		
	Permanency planning		
	Concurrent planning		
	Adoption		
	Demonstration of competency		
<p><b>H. Flexible Funding</b></p>	<p>DCF will continue to make flexible funds available for use by workers in crafting individualized service plans for children, youth and families to meet the needs of children and families, to facilitate family preservation and reunification where appropriate, and to ensure that families are able to provide appropriate care for children and to avoid the disruption of otherwise stable and appropriate placements.</p>	<p>Data are currently provided directly to the Monitor DCF Online Policy Manual Budget Report</p>	<p>Yes</p>

<sup>89</sup> Going forward, the following new report will be published as the data source for this Foundational Element: Workforce Report

**Table 1C: Foundational Elements**

Reference	Additional SEP Requirements That DCF Must Sustain:	Data Source	December 2016 Fulfilled (Yes/No)
<b>I. Resource Family Care Support Rates</b>	Family care support rates	DCF Online Policy Manual DCF Website <sup>90</sup>	Yes
	Independent Living Stipend	DCF Online Policy Manual Youth Website	
<b>J. Permanency</b>	Permanency practices	Data are currently provided directly to the Monitor <sup>91</sup>	Yes
	Adoption practices	Monitor site visits and attendance at QRs, ChildStat and other meetings	
<b>K. Adoption Practice</b>	5- and 10-month placement reviews	Data are currently provided directly to the Monitor <sup>92</sup>	Yes
	Child specific recruitment	Monitor site visits and attendance at QRs, ChildStat and other meetings	

<sup>90</sup> USDA has altered its schedule for producing its Annual Report on costs of raising a child. By agreement, DCF now updates the rates within 30 days of the USDA annual report's release to meet the SEP standards and provides written confirmation to the Monitor.

<sup>91</sup> Going forward, the following new report will be published as the data source for this Foundational Element: Report on Our Work with Children, Youth & Families

<sup>92</sup> Going forward, the following new report will be published as the data source for this Foundational Element: Adoption Report

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## IV. FOUNDATIONAL ELEMENTS

The Foundational Elements identified in the SEP intentionally recognize the state's accomplishments in implementation of the MSA and the work that was done to establish the foundation for improved child welfare outcomes. These Foundational Elements remain enforceable if performance is not sustained. DCF collects and publishes data to support its continued maintenance of Foundational Elements described in the introduction to this report. Three anticipated reports have not yet been published and are planned for future production and dissemination through DCF's website: 1) Our Work with Children, Youth and Families Report; 2) CP&P Outcomes Report; and 3) Healthcare of Children in Out-of-Home Placement. As a result, for the reporting period July 1 to December 31, 2016, DCF provided data directly to the Monitor wherever necessary. Additionally, the Monitor assesses maintenance of Foundational Elements through its participation in statewide QRs, site visits to local offices and attendance at monthly ChildStat presentations and meetings with stakeholders throughout the state.

In the sections below, we do not comment on each of the Foundational Elements but have provided information on new developments, significant new accomplishments or other information judged by the Monitor to be relevant for our assessment and understanding of Foundational Elements this monitoring period.

### A. CASE PRACTICE MODEL – SEP Section II.B

#### *Safety and Risk Assessments*

DCF continues to perform Safety and Risk Assessments for children and families using Structured Decision Making® (SDM) tools. During this monitoring period, DCF re-validated its risk assessment SDM tools and made recommendations to revise its risk assessment, risk reassessment and family reunification assessment. DCF is working with the Children's Research Center, the developer of the tools, to finalize revisions, and will begin implementation – including policy revisions and staff training – in fall 2017.

### B. APPROPRIATE PLACEMENTS – SEP Section II.D

Section II.D of the SEP provides that “when out-of-home placement is necessary, DCF will provide the most appropriate and least restrictive placements, allowing children to remain in their own communities, be placed with or maintain contact with siblings and relatives, and have their educational needs met. The State shall maintain an adequate number and array of family-based placements to appropriately place children in family settings.”

DCF has continued to maintain an adequate pool of placement resource homes and congregate providers to meet the needs of children in out-of-home settings. DCF has also been working to improve its approach to setting recruitment targets for resource family homes, as described below.

As of December 31, 2016, a total of 6,663 children were in out-of-home placement; 6,095 (91%) were in family-like settings, with 52 percent placed in non-kinship resource family homes and 39

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percent in kinship homes. Seven percent of children were placed in group and residential settings and two percent were in independent living programs.

Between July 1 and December 31, 2016, DCF recruited and licensed 485 new kinship and non-kinship family homes; 324 (67%) of the 485 newly licensed homes were kinship homes. As of December 31, 2016, there was a total of 4,741 licensed resource family homes in the state; 1,738 (37%) are kinship homes.

A total of 694 resource family homes closed between July 1 and December 31, 2016, resulting in a net loss of 209 resource family homes during the monitoring period. DCF staff believe the agency is beginning to see results from its market segmentation efforts, an approach that strategically targets specific communities and venues where data show successful resource families live and/or frequent. The state closely tracks and evaluates these trends to assess whether it continues to have access to a solid pool of resource parents for all children needing placement in out-of-home settings.

As in previous monitoring periods, DCF calculated its placement needs through the use of a fixed formula, accounting for the number of children in placement in each county, the number and size of sibling groups placed, the number and location of the existing non-kinship resource families and the number of homes closed. DCF continues to refine its process to more thoroughly account for characteristics of existing placement resources so that recruitment targets and practices can be appropriately tailored. Its first focus has been on homes to accommodate large sibling groups. As of December 2016, there were a total of 85 large capacity SIBS homes: 27 homes with a capacity to accommodate five or more children, and 58 homes that could accommodate four children.

The Office of Resource Families has plans to refine the approach to allow for more targeted recruitment of homes to accommodate specific age groups of children and youth, recognizing that in some parts of the state more resource families are able and willing to care for children who have complex needs, but who may not need the level of care provided through CSOC resources, are needed.

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### **C. SERVICE ARRAY – SEP Section II.E**

Section II.E of the SEP requires the state to provide comprehensive, culturally responsive services to address the identified needs of the children, youth and families it serves, and maintain an adequate statewide network of Family Success Centers. These services shall include but not be limited to services for youth age 18 to 21, LGBTQI services, mental health and domestic violence services for birth parents whose families are involved with the child welfare system and preventive home visitation programs.

DCF has been engaged in a multi-year process to assess existing provider services contracts and, where indicated, re-orient resources to current needs. There has been expanded resource development in numerous important areas, including:

- Awarding four additional RFPs for Family Success Centers (FSCs) in Middlesex, Salem, Ocean and Monmouth counties, increasing the statewide number of FSCs to 57;
- Expanding trauma treatment and support services for child victims of domestic violence to Morris and Somerset counties;
- Piloting supportive housing services for young people in Burlington, Mercer and Union counties through a partnership with the Department of Community Affairs (DCA), with federal funding through a Youth at Risk of Homelessness grant. DCF was awarded 100 Section 8 vouchers, 60 allocated to expand stable, long term housing options for youth, with 10 of the 60 vouchers specifically allocated for expectant and parenting youth.

### **D. PERMANENCY - SEP Section II.J**

Section II.J of the SEP requires, “Consistent with the principles of this agreement, DCF will continue to strengthen and sustain appropriate permanency and adoption practices for the children and youth it serves, recognizing that DCF’s permanency work begins at intake and is encompassing of the elements of the Case Practice Model.”

DCF uses many different strategies and venues to communicate that permanency is a cornerstone of its child welfare work. DCF’s ongoing work to train and coach its staff to embed the CPM in all areas of practice provides a framework through which staff can focus on improved permanency outcomes for children and families.

**V. SUSTAINABILITY AND EXIT PLAN (SEP) PERFORMANCE MEASURES TO BE ACHIEVED AND TO BE MAINTAINED**

This section of the report provides information on the SEP requirements for which the state has satisfied the specified performance targets for at least six months – designated as *To Be Maintained* – and, in more detail, those requirements that the state still needs to achieve – designated as *To Be Achieved*.

**A. INVESTIGATIONS**

**Investigative Practice**

The SEP includes four measures related to investigative practice – one is currently designated as *To Be Achieved*: quality of investigations (SEP IV.A.15) and the other three measures are *To Be Maintained*: timeliness of IAIU investigation completion (SEP III.A.1); timeliness of alleged child abuse and neglect investigation completion within 60 days (SEP IV.A.13); and investigation completion within 90 days (SEP IV.A.14).

**Timeliness of Investigation Completion**

<b>Quantitative or Qualitative Measure</b>	13. <u>Timeliness of Investigation Completion</u> : Investigations of alleged child abuse and neglect shall be completed within 60 days.
<b>Performance Target</b>	85% of all abuse/neglect investigations shall be completed within 60 days. Cases with documented acceptable extensions in accordance with policy are considered compliant.

***Performance as of November 30, 2016:***<sup>93</sup>

In November 2016, there were 4,334 investigations of alleged child abuse and neglect, 3,618 (84%) of which were completed within 60 days. Performance from July to November 2016 ranged from a low of 84 percent to a high of 87 percent.<sup>94</sup> DCF continued to meet the SEP performance standard for timeliness of investigation completion within 60 days for the period of July through November 2016.

<sup>93</sup> November 2016 was the most current data available at the time of this report. December 2016 data will be included in the next monitoring report. For certain data elements such as this one which have an extended time frame built into the measurement, the Monitor and DCF have decided to alter the period for data review so that six-month monitoring reports can be produced more closely to the end of the monitoring period. Due to this change and the fact that June 2016 data was already reported on in the prior monitoring report, some measures in this report are assessed using July through November 2016 performance data; with the expectation that subsequent reports will again include assessment based upon six-month time frames.

<sup>94</sup> Monthly performance for this measure is as follows: July, 84%; August, 87%; September, 87%; October, 86%; November, 84%.

<b>Quantitative or Qualitative Measure</b>	14. <u>Timeliness of Investigation Completion</u> : Investigations of alleged child abuse and neglect shall be completed within 90 days.
<b>Performance Target</b>	95% of all abuse/neglect investigations shall be completed within 90 days. Cases with documented acceptable extensions in accordance with policy are considered compliant.

***Performance as of November 30, 2016:*<sup>95</sup>**

In November 2016, there were 4,334 investigations of child abuse and neglect and 4,106 (95%) were completed within 90 days. Performance from July to November 2016 ranged from a low of 95 percent to a high of 96 percent.<sup>96</sup> The SEP performance standard for the timeliness of investigation completion within 90 days continued to be met for the period July through November 2016.

**Quality of Investigations**

<b>Quantitative or Qualitative Measure</b>	15. <u>Quality of Investigations</u> : Investigations of alleged child abuse and neglect shall meet standards of quality.
<b>Performance Target</b>	85% of all abuse/neglect investigations shall meet standards of quality.

DCF, together with the Monitor, conducted a case record review of the quality of CP&P’s investigative practice in September 2016. Reviewers examined the quality of practice of 327 randomly selected CPS investigations assigned to DCF Local Offices between February 1 and February 14, 2016 involving 497 alleged child victims.<sup>97</sup> Overall, reviewers found that 271 (83%) of the investigations were of acceptable quality.<sup>98</sup> Although close, DCF did not meet the SEP performance standard for this measure.

The findings from the September 2016 review reflect some clear strengths in CP&P investigative case practice, as well as areas in need of further development. Key strengths include:

- Caseworkers interviewed the mother of the alleged child victim in 98 percent of the investigations;

<sup>95</sup> November 2016 was the most current data available at the time of this report. December 2016 data will be included in the next monitoring report. For certain data elements such as this one which have an extended time frame built into the measurement, the Monitor and DCF have decided to alter the period for data review so that six-month monitoring reports can be produced more closely to the end of the monitoring period. Due to this change and the fact that June 2016 data was already reported on in the prior monitoring report, some measures in this report are assessed using July through November 2016 performance data; with the expectation that subsequent reports will again include assessment based upon 6-month time frames.

<sup>96</sup> Monthly performance for this measure is as follows: July, 95%; August, 95%; September, 96%; October, 95%; November, 95%.

<sup>97</sup> These results have a ± 5% margin of error with 95% confidence.

<sup>98</sup> Reviewers could select four possible responses to the question regarding the quality of the investigation: “completely,” “substantially,” “marginally” or “not at all.” Investigations determined to be “completely” or “substantially” of quality were considered acceptable for the purpose of this measure.



- Caseworkers interviewed the father of the alleged child victim in 82 percent of the investigations;
- Pre- and post-investigation worker/supervisor conferences took place in 98 percent of the investigations; and
- Eighty-seven percent of pre-investigation conferences were found to be of acceptable quality; 82 percent of post-investigation conferences were found to be of acceptable quality.

The September 2016 review also found that an area in need of improvement in CP&P’s investigative practice includes securing and integrating significant collateral information into investigative decision making. Reviewers determined that all applicable collateral information was integrated into decision making in 76 percent of investigations.

Overall, recommendations for improvement include: continued training and coaching of staff and supervisors on areas of investigative practice; complete documentation of investigative activities and events and use of statewide presentations; and specialized workshops focused on quality improvements.

DCF will include the findings from this investigative case practice review in its Our Work with Children and Families Report to be released in CY 2017.

### **Institutional Abuse Investigations**

<b>Quantitative or Qualitative Measure</b>	1. <u>Timeliness of Completion</u> : IAIU investigations of child maltreatment in placements shall be completed within 60 days.
<b>Performance Target</b>	80% of IAIU investigations shall be completed within 60 days.

The Institutional Abuse Investigations Unit (IAIU) is responsible for investigating allegations of child abuse and neglect in resource family homes and other out-of-home care settings, as well as in child care facilities, detention centers, schools and residential facilities.<sup>99</sup>

***Performance as of December 31, 2016:***

Performance data for July through December 2016 shows that DCF continued to exceed the SEP performance standard for this measure, with 83 percent of IAIU investigations completed within 60 days.

<sup>99</sup> CP&P Policy Manual (4-1-2013). Introduction to IAIU, I, A, 100.

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## B. FAMILY TEAM MEETINGS

Family Team Meetings (FTMs) bring families, providers, formal and informal supports together to exchange information, participate in case planning, coordinate and follow up on services and examine and solve problems. Meetings are intended to be scheduled according to the family's availability in an effort to involve as many family members and supports as possible. Workers are trained and coached to hold FTMs at key decision and transition points in the life of a case, such as when a child enters placement, when a child has a change of placement and/or when there is a need to adjust a case plan to achieve permanency or meet a child's needs.

DCF has been steadily working to improve practice in this area as well as to strengthen documentation so that workers identify situations in which FTMs do not occur because the parent was unavailable or the parent declined to attend. Due to continued challenges in documenting and validating such data, FTM performance data, unless otherwise noted, include only the number of FTMs that have actually occurred.<sup>100</sup>

The SEP includes five performance measures pertaining to FTMs, three of which have been met and are designated as *To Be Maintained*: the requirement that FTMs be held within 45 days of a child's removal (SEP IV.B.16); the requirement that for children in out-of-home placement, at least three additional FTMs after the initial FTM be held within the first 12 months of placement (SEP IV.B.17); and the requirement that children in care after 12 months with the goal of reunification have at least three FTMs each year (SEP IV.B.18). DCF has not yet met the two remaining targets in this area: FTMs held after 12 months in placement for children with a goal other than reunification (SEP IV.B.19); and Quality of Teaming (SEP IV.B.20).

### Initial FTMs Held within 45 Days of Entry

<b>Quantitative or Qualitative Measure</b>	16. <u>Initial Family Team Meetings</u> : For children newly entering placement, the number/percent who have a family team meeting within 45 days of entry.
<b>Performance Target</b>	80% of children newly entering placement shall have a family team meeting before or within 45 days of placement.

### *Performance as of December 31, 2016:*

Based on data from NJ SPIRIT, in December 2016, 199 (84%) out of 237 possible FTMs occurred within 45 days of a child's removal from his or her home. Performance from July to December 2016 ranged from a low of 82 percent to a high of 90 percent.<sup>101</sup> DCF's performance exceeded the SEP standard in each month of the monitoring period.

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<sup>100</sup> The Monitor validated data to document the appropriate use of exceptions for Measure 17 as discussed herein. The reported data accounts for those validated exceptions that met policy.

<sup>101</sup> Monthly performance for this measure is as follows: July, 85%; August, 82%; September, 90%; October, 83%; November, 82%; December, 84%.

## FTMs Held within the First 12 Months

<b>Quantitative or Qualitative Measure</b>	17. <u>Subsequent Family Team Meetings Within 12 Months</u> : For all other children in placement, the number/percent who have three additional FTMs within the first 12 months of the child coming into placement.
<b>Performance Target</b>	80% of children will have three additional FTMs within the first 12 months of the child coming to placement.

### *Performance as of December 31, 2016:*<sup>102</sup>

Based on data from NJ SPIRIT, in December 2016, 109 (74%) of 147 applicable children had an additional three or more FTMs within the first 12 months of entering placement. Performance from July to December 2016 ranged from a low of 74 percent to a high of 90 percent. For this measure, the Monitor verified monthly data from NJ SPIRIT for 190 applicable cases to determine whether exceptions to FTM policy were appropriately applied and documented.<sup>103</sup> Based on the verified data, DCF met the performance standard in four of six months in the monitoring period. In the Monitor’s judgment DCF has maintained this SEP performance measure for the period of July through December 2016.

## FTMs Held After 12 Months in Placement with a Goal of Reunification

<b>Quantitative or Qualitative Measure</b>	18. <u>Subsequent Family Team Meetings After 12 Months</u> : For all children in placement with a goal of reunification, the number/percent who have at least three FTMs each year after the first 12 months of placement.
<b>Performance Target</b>	After the first 12 months of a child being in care, 90% of those with a goal of reunification will have at least three FTMs each year.

### *Performance as of December 31, 2016:*<sup>104</sup>

Based on data from NJ SPIRIT, in December 2016, out of 25 applicable children with a permanency goal of reunification, 20 (80%) had three or more FTMs in the 12 months following their first year in out-of-home placement.<sup>105</sup> Performance from July to December 2016 ranged from a low of 69 percent to a high of 88 percent.<sup>106</sup> DCF did not meet this SEP performance measure in any of the six months for the period of July through December 2016. As a result, DCF has developed a corrective action plan to strengthen performance. Under the plan, LOMs and Area Directors will review records of FTMs that did not occur and identify barriers to

<sup>102</sup> Measure 17 applies to all children who have been in out-of-home placement for 12 months who entered care in the specified month. For example, performance for December 2016 is based upon the 147 children who entered care in December 2015. Compliance is based on whether at least three FTMs were held for these children during the 12 month period they were in care.

<sup>103</sup> Based on the Monitor’s verified data, monthly performance is as follows: July, 90%; August, 84%; September, 76%; October, 87%; November, 90%; December, 74%.

<sup>104</sup> Measure 18 applies to all children who have been in care *for at least 24 months* who entered care in the specified month each year and have a goal of reunification. For example, in July 2016, a combined total of 42 children who entered care in July 2015, July 2014, July 2013, etc. and are still in placement with a goal of reunification. Compliance is based on whether at least three FTMs were held for these children during the most recent 12 months in care.

<sup>105</sup> Reported performance may understate actual performance because data do not exclude instances where an FTM is not required.

<sup>106</sup> Monthly performance for this measure is as follows: July, 88%; August, 81%; September, 82%; October, 77%; November, 69%; December, 80%.

improved performance. In addition, LOMs will identify FTM coordinators in each Local Office to more closely monitor performance and to assist staff in addressing barriers. A statewide FTM Coordinators Convening is planned for Fall 2017 so that workers will have an opportunity to share effective strategies, ensure consistency and develop additional strategies to improve practice. Finally, DCF’s Central Office will partner with the Office of Training and Professional Development to move the Case Practice Model module relating to FTMs into new worker training to ensure that new workers are developed as FTM facilitators as early as possible. This modification to the training curricula will also reinforce the importance of FTMs as a core component of the Case Practice Model.

### FTMs Held After 12 Months in Placement with a Goal Other than Reunification

<b>Quantitative or Qualitative Measure</b>	19. <u>Subsequent Family Team Meetings After 12 Months</u> : For all children in placement with a goal other than reunification, the number/percent who have at least two FTMs each year.
<b>Performance Target</b>	After the first 12 months of a child being in care, for those children with a goal other than reunification, 90% shall have at least two FTMs each year.

#### *Performance as of December 31, 2016:<sup>107</sup>*

Based upon data from NJ SPIRIT, in December 2016, out of 158 children with a permanency goal other than reunification, 134 (85%) had two or more FTMs after 12 months in out-of-home placement. Performance from July to December 2016 ranged from a low of 74 percent to a high of 87 percent.<sup>108, 109</sup> Table 2 and Figure 1 show DCF’s performance from July to December 2016 on holding FTMs after the first 12 months in placement for children with a goal other than reunification. DCF has shown improvement on this performance measure but has not yet met the SEP standard.

<sup>107</sup> Children eligible for Measure 19 are all children who have been in care *for at least 24 months* who entered care in the month specified each year and have a goal other than reunification. For example, in July 2016, a combined total of 215 children entered care in July 2015, July 2014, July 2013, etc. and are still in placement with a goal other than reunification. Compliance is based on whether at least two FTMs were held for these children during the most recent 12 months in care.

<sup>108</sup> Reported performance may understate actual performance because data do not exclude all instances in which an FTM is not required.

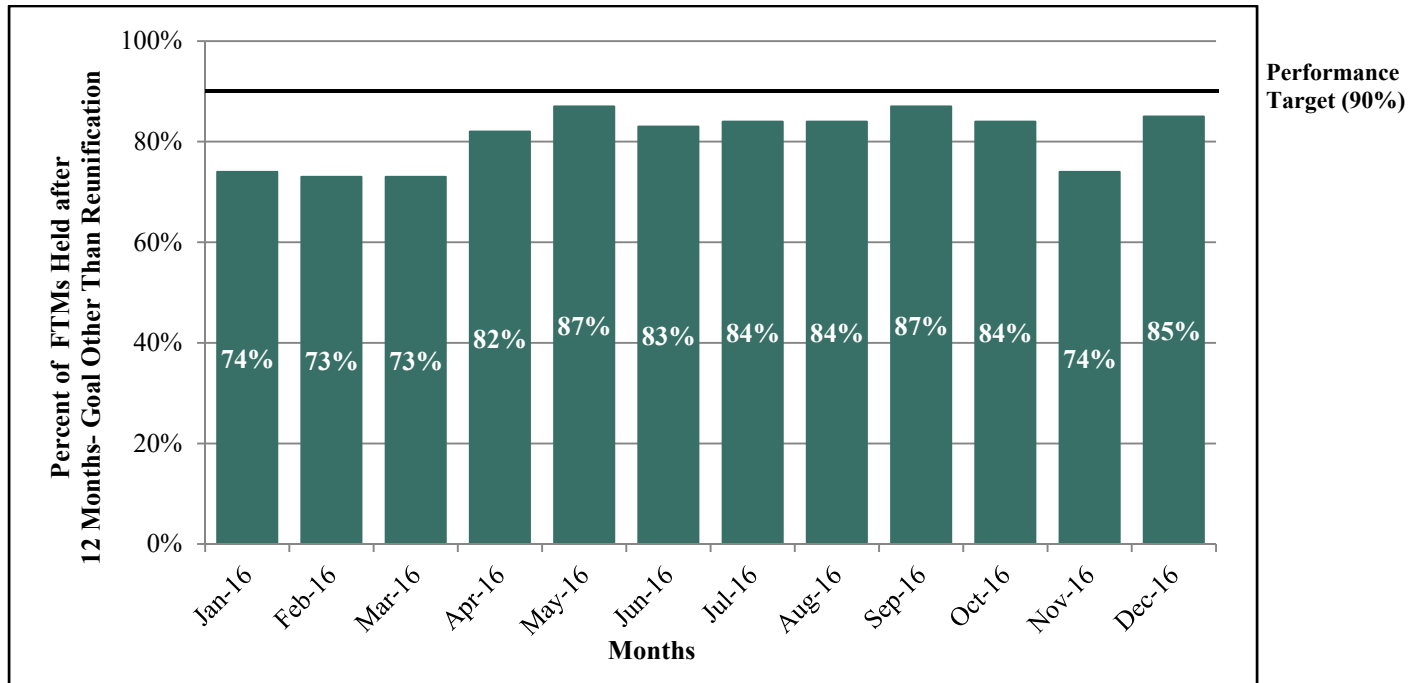
<sup>109</sup> Monthly performance is as follows: July, 84%; August, 84%; September, 87%; October, 84%; November, 74%; December, 85%.

**Table 2: At Least Two Family Team Meetings Held After 12 Months in Placement with a Goal other than Reunification (July – December 2016)**  
**Performance Target 90%**

Month	Total Number of Applicable Children	Number of 2 or More FTMs Held After 12 Months in Placement with a Goal Other than Reunification	Percent
JULY	215	180	84%
AUGUST	177	149	84%
SEPTEMBER	202	175	87%
OCTOBER	203	171	84%
NOVEMBER	150	111	74%
DECEMBER	158	134	85%

Source: DCF data

**Figure 1: At Least Two Family Team Meetings Held After 12 Months in Placement with a Goal other than Reunification (January – December 2016)**



Source: DCF data

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## Quality of Teaming

<b>Quantitative or Qualitative Measure</b>	20. Cases involving out-of-home placement show evidence of family teamwork.
<b>Performance Target</b>	75% of cases involving out-of-home placements that were assessed as part of the Quality Review (QR) process will show evidence of both acceptable team formation and acceptable functioning. The Monitor, in consultation with the parties, shall determine the standards for quality team formation and functioning.

Results from the *teamwork and coordination* indicator in the QR are used to assess the quality of collaborative teamwork with children, youth and families. In assessing case ratings, the reviewer considers a range of questions for this indicator, including whether the family’s team is composed of the appropriate constellation of providers and informal supports needed to meet the child and family’s needs and the extent to which team members, family members included, work together to meet identified goals.

Information about the QR process and protocol are detailed in section V.N of this report.

***Performance as of December 31, 2016:***

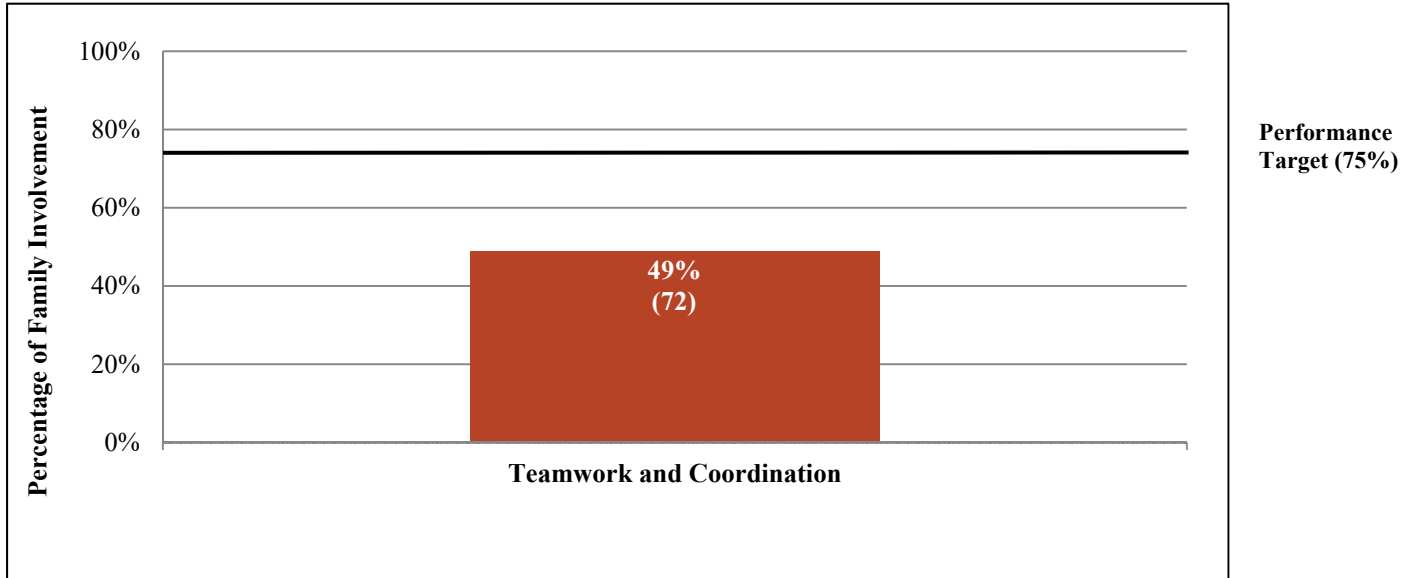
Results from the 195 cases reviewed from January through December 2016 using the QR protocol showed that 49 percent (72 of 146) rated acceptable for the *teamwork and coordination* indicator.<sup>110, 111</sup> Figure 2 below reflects these findings. DCF has not met the SEP performance standard. Based on these findings, the Monitor believes that additional strategies may be needed to improve the quality of teaming with families when their children are in placement.

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<sup>110</sup> All in-home cases are excluded from this measure.

<sup>111</sup> Under the new QR protocol developed in CY 2015, the *team formation* and *team functioning* indicators are measured under one indicator, *teamwork and coordination*.

**Figure 2: Qualitative Review (QR) Cases Rates Acceptable on Teamwork and Coordination  
(January – December 2016)  
(n=146)**



Source: DCF data

**C. QUALITY OF CASE AND SERVICE PLANNING**

In the previous reporting period DCF met the SEP requirement that 95 percent of case plans be developed with families within 30 days (SEP IV.D.22) and, together with the SEP requirement that case plans be reviewed and modified every six months (SEP III.C.6), this measure is now designated as an Outcome *To Be Maintained*. The SEP measure regarding the quality of case planning (SEP Section IV.D.23) is designated as an Outcome *To Be Achieved*. DCF reports publically on case planning in its Commissioner’s Monthly Reports that are posted on the DCF website.

**Timeliness of Case Planning – Initial Case Plans**

<b>Quantitative or Qualitative Measure</b>	22. <u>Timeliness of Initial Plans</u> : For children entering care, number/percent of case plans developed within 30 days.
<b>Performance Target</b>	95% of case plans for children and families are completed within 30 days.

***Performance as of December 31, 2016:***

In December 2016, 246 (96%) out of a total of 255 initial case plans were completed within 30 days of a child entering placement. Between July and December 2016 the timely development of initial case plans ranged from a low of 93 percent to a high of 96 percent.<sup>112</sup> While DCF met this

<sup>112</sup> Monthly performance for this measure is as follows: July, 93%; August, 96%; September, 94%, October, 94%; November, 94%; December, 96%.

measure in only two of the six months, performance was within one or two percentage points of meeting the standard in the remaining four months. As this measure was designated as *To Be Maintained* in the previous monitoring period, the Monitor will continue to carefully track this data to determine if this decline in performance is temporary and/or insubstantial.

### Timeliness of Case Planning-Every Six Months

<b>Quantitative or Qualitative Measure</b>	6. <u>Case Plans</u> : Case plans for children and families will be reviewed and modified no less frequently than every six months.
<b>Performance Target</b>	95% of case plans for children and families will be reviewed and modified no less frequently than every six months.

#### *Performance as of December 31, 2016:*

In December 2016, 95 percent of case plans had been modified as required by the SEP. Performance from July to December 2016 ranged from a low of 95 percent to a high of 96 percent.<sup>113</sup> DCF met or exceeded performance on this measure for each month between July and December 2016 this monitoring period.

### Quality of Case Plans

<b>Quantitative or Qualitative Measure</b>	23. <u>Quality of Case Plans</u> : The child’s/family’s case plan shall be developed with the family and shall be individualized and appropriately address the child’s needs for safety, permanency and well-being. The case plan shall provide for the services and interventions needed by the child and family to meet identified goals, including services necessary for children and families to promote children’s development and meet their educational, physical and mental health needs. The case plan and services shall be modified to respond to the changing needs of the child and family and the results of prior service efforts.
<b>Performance Target</b>	80% of case plans rated acceptable as measured by the Quality Review (QR).

DCF policy and the SEP require that families be involved in case planning, that plans are appropriate and individualized to the circumstances of the child/youth and family and that there is oversight of plan implementation to ensure case goals are being met and that plans are modified when necessary. Results from two QR indicators, *child and family planning process* and *tracking and adjusting*, are used to assess performance on this measure. Cases rated as acceptable demonstrate that child/youth and family needs are addressed in the case plan that appropriate family members were included in the development of the plan and that interventions are being tracked and adjusted when necessary.

Information about the QR process and protocol are detailed in section V.N of this report.

<sup>113</sup> Monthly performance on this measure is as follows: July, 96%; August, 96%; September, 95%; October, 95%; November, 95%; December, 95%.

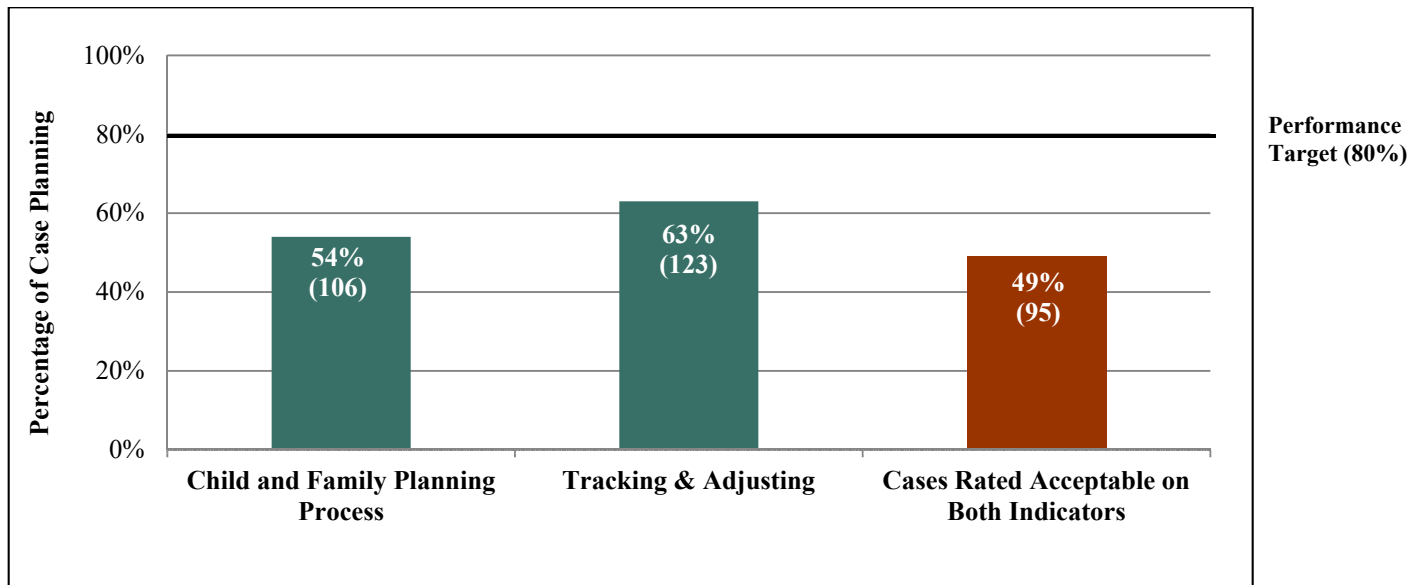


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**Performance as of December 31, 2016:**

Results from the 195 cases reviewed from January to December 2016 indicate that 49 percent (95 of 195) were rated acceptable for *both* the *child and family planning process* and *tracking and adjusting* indicators.<sup>114</sup> Figure 3 below reflects the findings from January through December 2016. Performance in CY 2016 (49%) reflects a slight decline from CY 2015 (53%). DCF did not meet the SEP performance standard for the period of January through December 2016. This is another area for which the level of performance suggests the need for an assessment of improvement strategies.

**Figure 3: Qualitative Review (QR) Cases Rated Acceptable on Quality of Case Plans and Components of Planning (January – December 2016) (n=195)**



Source: DCF data

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<sup>114</sup> From January to December 2016, 49% (95 of 195) were rated acceptable for *both* the *child and family planning process* and *tracking and adjusting* indicators; 54% (106 of 195) of cases were rated acceptable for *child and family planning process*; 63% (123 of 195) of cases were rated acceptable for *tracking and adjusting*.

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## D. EDUCATION

SEP Section III.G.11 requires that “children will be enrolled in school and DCF will have taken appropriate actions to ensure that their educational needs are being met.” The SEP requires that 80 percent of cases be rated acceptable on *stability in school* and *learning and development* indicators as measured by the QR.<sup>115</sup> This performance measure has been previously designated as *To Be Maintained*.

The QR process and protocol are discussed in detail in Section V.N of this report.

<b>Quantitative or Qualitative Measure</b>	11. <u>Educational Needs</u> : Children will be enrolled in school and DCF will have taken appropriate actions to ensure that their educational needs are being met.
<b>Performance Target</b>	80% of cases will be rated acceptable as measured by the Quality Review (QR) in stability (school) and learning and development. The Monitor, in consultation with the parties, shall determine the standards for school stability and quality learning and development.

### *Performance as of December 31, 2016:*

From January to December 2016, 87 percent (78 of 90) of cases reviewed were rated acceptable for both *stability in school* and *learning and development*.<sup>116</sup> DCF continues to meet this SEP performance standard.

## E. VISITATION

Visitation between children in foster care and their workers, parents and siblings is critical to protecting children’s safety, strengthening family connections and improving prospects for permanency in accordance with DCF’s CPM. The SEP includes six measures related to visitation. In June 2016, four measures were designated as Outcomes *To Be Maintained*: caseworker contacts with children newly placed or after a placement change (SEP III.F.9); caseworker contacts with children in ongoing placement (III.F.10); and parent-child weekly (SEP IV.F.29) and bi-weekly visits (SEP IV.F.30). The remaining two measures – caseworker contacts with parents when the goal is reunification (SEP IV.F.28) and sibling visits (SEP IV.F.31) – are designated as Outcomes *To Be Achieved*.

### **Caseworker Visits with Children in State Custody**

As stated above, both performance measures pertaining to caseworker visits with children in placement are designated as Outcomes *To Be Maintained*. Caseworker visits with children in new placements (which are expected to be more frequent) fell again slightly during some months

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<sup>115</sup> This measure applies to school-aged children in out-of-home placement.

<sup>116</sup> Seventy-eight of the 90 cases reviewed rated acceptable on both the *stability in school* and *learning and development* indicators; 59% (61 of 102) were rated acceptable for *school stability* and 94% (87 of 93) were rated acceptable for *learning and development*.

this monitoring period. Performance on caseworker visits to children in ongoing placements, however, continued to exceed the standard.

<b>Quantitative or Qualitative Measure</b>	9. <u>Caseworker Contacts with Children – New Placement/Placement Change</u> : The caseworker shall have at least twice-per-month face to face contact with the children within the first two months of placement, with at least one contact in the placement.
<b>Performance Target</b>	93% of children shall have at least twice-per-month face to face contact with their caseworker during the first two months of placement, with at least one contact in the placement.

***Performance as of December 31, 2016:***

In December 2016, the visitation standard was met for 322 (93%) of 346 children in a new placement. Between July and December 2016, monthly performance ranged from 89 to 94 percent.<sup>117</sup> While performance was close to the standard in all months, the SEP standard was achieved in only two of the six months. This is the second period in which performance has not been fully maintained within the SEP standard for all months. The Monitor considers this to be a temporary decline in performance that is still within an acceptable range.

<b>Quantitative or Qualitative Measure</b>	10. <u>Caseworker Contacts with Children in Placement</u> : During the remainder of placement, children will have at least one caseworker visit per month, in placement.
<b>Performance Target</b>	93% of children will have at least one caseworker visit per month in placement, for the remainder of placement.

***Performance as of December 31, 2016:***

In December 2016, the SEP standard for caseworker visits with children in ongoing placements was met for 5,759 (98%) of 5,897 children. Between July and December 2016, monthly performance ranged from 96 and 98 percent.<sup>118</sup> DCF’s performance continues to exceed the SEP standard.

<sup>117</sup> Monthly performance is as follows: July, 89%; August 92%; September, 92%; October, 94%; November, 90%; December 93%.

<sup>118</sup> Monthly performance is as follows: July, 96%; August, 97%; September, 98%; October, 97%; November, 97%; December, 98%.

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## Caseworker Visits with Parents/Family Members

<b>Quantitative or Qualitative Measure</b>	28. <u>Caseworker Visits with Parents/Family Members with Goal of Reunification:</u> The caseworker shall have at least two face-to-face visits per month with the parent(s) or other legally responsible family member of children in custody with a goal of reunification.
<b>Final Target</b>	90% of families will have at least twice-per-month face-to-face contact with their caseworker when the permanency goal is reunification.

### *Performance as of December 31, 2016:*

Between July and December 2016, twice monthly caseworker visits with parents occurred for 81 to 86 percent of children with a reunification goal (see Figure 4 below).<sup>119</sup> In assessing performance for this measure, the Monitor applied its findings from a review of a statistically significant sample of cases from September, October and November 2016 requiring parent visits with their caseworker in which documentation indicated that the parent was unavailable or the visit was not required.<sup>120</sup> Based on the findings, the Monitor excluded cases in which it was appropriately determined that a visit was not required.<sup>121</sup> DCF has not yet met the SEP standard for this measure.

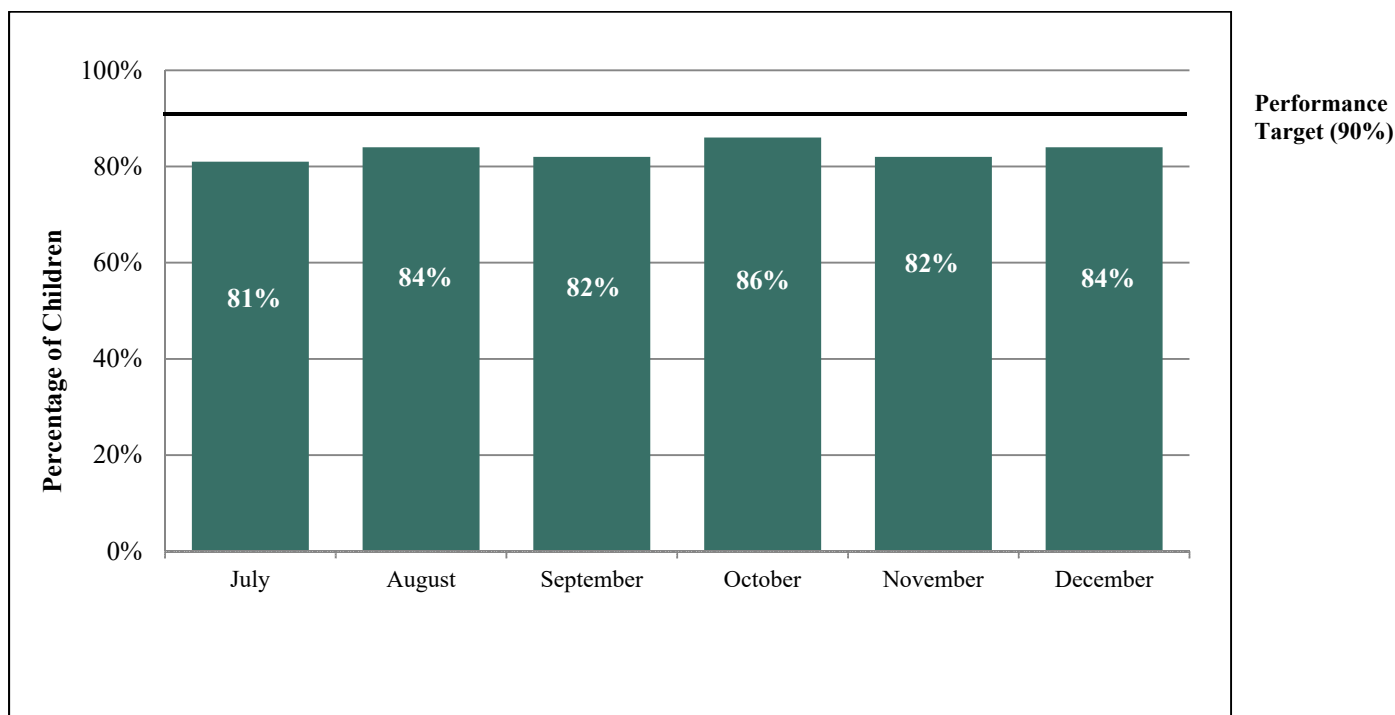
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<sup>119</sup> Monthly performance is as follows: July, 81%; August, 84%; September, 82%; October, 86%; November, 82%; December, 84%.

<sup>120</sup> The results of the data validation had  $\pm 5\%$  margin of error with 95% confidence.

<sup>121</sup> The Monitor reviewed 330 cases from a universe of cases from September, October and November 2016 in which no parent visits were held and determined that 244 (74%) had utilized valid SEP exception. The Monitor excluded 74% of the cases with exceptions in each month from the universe. For example, in December 2016 there were 3,081 children with a goal of reunification. Data from NJ SPIRIT indicated that there were 590 children for whom the worker had determined that the parent was unavailable for the visits or the visit was not required. Based on these findings, the Monitor excluded from the universe 74% of the 590 cases, making the universe of applicable children 2,644 (3,081-437).

**Figure 4: Percentage of Families who have at least Twice per month Face-to-Face Contact with Caseworker when the Goal is Reunification (July – December 2016)**



Source: DCF data

### Visits between Children in Custody and their Parents

<b>Quantitative or Qualitative Measure</b>	29. <u>Weekly Visitation between Children in Custody and Their Parents:</u> Number/percent of children who have weekly visits with their parents when the permanency goal is reunification unless a court order prohibits or regulates visits or there is a supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.
<b>Final Target</b>	60% of children in custody with a return home goal will have an in-person visit with their parent(s) or other legally responsible family member at least weekly, excluding those situations where a court order prohibits or regulates visits or there is a supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.

#### *Performance as of December 31, 2016:*

DCF maintained the required level of performance for this measure during this reporting period. Between July and December 2016, a monthly range of 82 to 87 percent of children had a weekly visit with their parents when their permanency goal was reunification.<sup>122, 123</sup> DCF’s performance again exceeds the SEP performance standard.

<sup>122</sup> Monthly performance is as follows: July, 84%; August, 86%; September, 86%; October, 87%; November, 82%; December, 85%.

<sup>123</sup> Given the results of validation activities from the prior monitoring period, the Monitor excluded from the universe all cases in which DCF documented an exception to the parent-child visit requirement. For example, for December 2016, there was an

<b>Quantitative or Qualitative Measure</b>	30. <u>Bi-Weekly Visitation between Children in Custody and Their Parents:</u> Number/percent of children who have weekly visits with their parents when the permanency goal is reunification unless a court order prohibits or regulates visits or there is a supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.
<b>Final Target</b>	85% of children in custody with a return home goal will have an in-person visit with their parent(s) or other legally responsible family member at least every other week, excluding those situations where a court order prohibits or regulates visits or there is a supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.

***Performance as of December 31, 2016:***

Between July and December 2016, a monthly range of 94 to 96 percent of children with a goal of reunification had visits at least twice a month with their parents.<sup>124</sup> For example, during December 2016, 2,333 (96%) children had at least two visits during the month.<sup>125</sup> DCF's performance continues to exceed the SEP standard.

**Visits between Children in Custody and Sibling Placed Apart**

<b>Quantitative or Qualitative Measure</b>	31. <u>Visitation Between Children in Custody and Siblings Placed Apart:</u> Number/percent of children in custody, who have siblings with whom they are not residing shall visit with their siblings as appropriate.
<b>Final Target</b>	85% of children in custody who have siblings with whom they are not residing shall visit with those siblings at least monthly, excluding those situations where a court order prohibits or regulates visits or there is a supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.

***Performance as of December 31, 2016:***

Between July and December 2016, a range of 74 to 76 percent<sup>126</sup> of children had at least monthly visits with one of their siblings with whom they were not placed.<sup>127</sup> For example, in December 2016 there were 2,086 children in placement who had at least one sibling who did not reside in the same household; 1,579 (76%) children had at least one visit with one of their siblings during

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average of 3,243 children with a goal of reunification. Data from NJ SPIRIT indicated that in an average of 831 cases, the worker had determined that the parent was unavailable for the visits or the visit was not required. Based on these data, the Monitor excluded those cases from the universe, making the universe of applicable children 2,412 (3,243-831).

<sup>124</sup> Monthly performance is as follows: July, 95%; August, 96%; September, 96%; October, 96%; November, 94%; December, 96%.

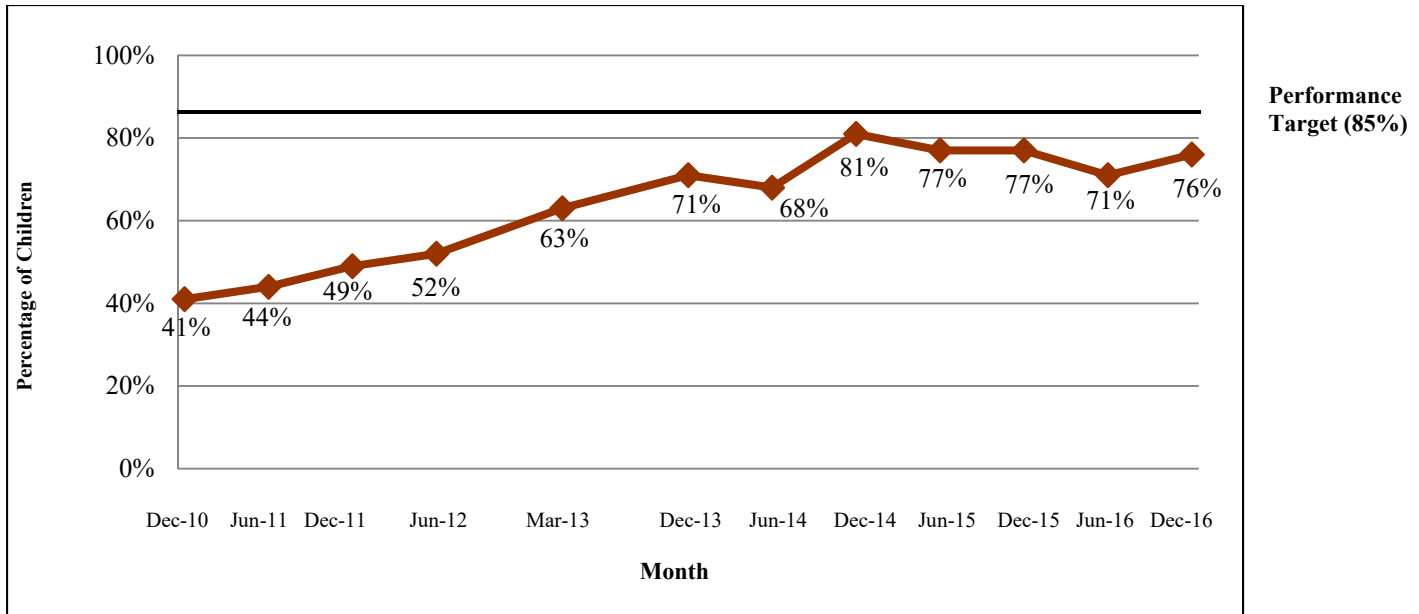
<sup>125</sup> Given the results of validation activities from the prior monitoring period, the Monitor excluded from the universe all cases in which DCF documented an exception to the parent-child visit requirement. For example, for December 2016, there were 3,081 children with a goal of reunification. Data from NJ SPIRIT indicated that in 642 cases, the worker had determined that the parent was unavailable for the visits or the visit was not required. Based on these data, the Monitor excluded those cases from the universe, making the universe of applicable children 2,439 (3,081-642).

<sup>126</sup> Reported performance likely understates actual performance because data do not exclude instances in which a visit was not required.

<sup>127</sup> Monthly performance is as follows: July, 75%; August, 75%; September, 75%; October, 76%; November, 74%; December, 76%.

the month. DCF performance does not yet meet the SEP standard for visits between children in custody and siblings with whom they are not placed.

**Figure 5: Percentage of Children Who Had at Least Twice Monthly Visits with Siblings, for Children not Placed with Siblings (December 2010 – December 2016)**



Source: DCF data

## F. PLACEMENT

Appropriate, stable placement for children in foster care is critical to safety and well-being, and maintenance of family bonds. DCF policy requires siblings to be placed together whenever possible, and that children experience as few placement changes as possible while in out-of-home placement. There are five measures included in this section. As of June 2016, four measures were designated as *To Be Maintained*: sibling placements of two to three children (SEP IV.G.32); sibling placements and recruitment of placements for four or more children (SEP IV.G.33), and placement stability for those children in care between 13 and 24 months (SEP IV.G.36) and one was designated as *To Be Achieved*: placement stability for those children in care 12 months or less (SEP IV.G.35).

With the exception of the measure requiring recruitment of resource homes to accommodate sibling groups of four or more children, the other placement measures discussed in this section are longitudinal measures and require data that looks at the experiences of cohorts of children and youth over time. The most recent performance data available are discussed below. For the first time this reporting period, DCF has met or substantially maintained every one of the SEP placement measures.

### Placing Siblings Together

<b>Quantitative or Qualitative Measure</b>	32. <u>Placing Siblings Together</u> : The percentage of sibling groups of two or three siblings entering custody be placed together.
<b>Performance Target</b>	At least 80% of siblings groups of two or three children entering placement will be placed together.

***Performance as of CY 2016:***

In CY 2016, there were 644 sibling groups that came into custody at the same time or within 30 days of one another that were comprised of two or three children. Of the 644 children, 78 percent (501) were placed together. In CY 2015, 79 percent (503) of sibling groups of two or three were placed together. In the Monitor’s judgment, DCF has continued to meet the SEP standard.

### Placing Large Sibling Groups Together

<b>Quantitative or Qualitative Measure</b>	33. <u>Placing Siblings Together</u> : The percentage of sibling groups of four or more placed together.
<b>Performance Target</b>	For sibling groups of four or more 80% will be placed with at least one other sibling.

***Performance as of CY 2016:***

In CY 2016, there were 393 children who were part of a sibling group of four or more children in placement. Of those 393 children, 332 (84%) were placed with at least one other sibling. DCF has met or exceeded this SEP performance standard for each of the previous six years.

### Recruitment of Sibling Groups of Four or More

<b>Quantitative or Qualitative Measure</b>	34. <u>Recruitment of Sibling Groups of Four or More</u>
<b>Performance Target</b>	DCF will continue to recruit for resource homes capable of serving sibling groups of four or more.

***Performance as of December 31, 2016:***

During this monitoring period, DCF continued to refine its approach to more accurately forecast the need for new non-kinship resource family homes to accommodate sibling groups in each county. The process has involved a monthly cross-walk of NJ SPIRIT and Office of Licensing (OOL) data on the resource homes available by county and sibling group size of children in or entering care.

DCF’s ongoing effort to recruit and retain homes that can accommodate large sibling groups has had the added benefit of requiring that resource workers be in more regular communication with resource families regarding current capacity, and has provided staff with naturally occurring



opportunities for resource family engagement and retention efforts. Examples of recruitment efforts for large sibling groups from July to December 2016 include a recruitment and retention event held at the Cineplex movie theater in Newark where resource parents were expected to bring friends interested in becoming a foster/adoptive parent; 100 families attended. Also in Hunterdon/Warren County the resource home recruiter partnered with Foster and Adoptive Family Services (FAFS) to host an event for resource families that included 54 adults and 75 children. DCF is currently working with the Children’s Bureau Child Welfare Capacity Building Collaborative to produce digital stories of five licensed resource families who have cared for sibling groups as a means of recruiting new homes that can accommodate large sibling groups.

As of December 2016, DCF had a total of 85 large capacity SIBs homes; 27 homes that could accommodate five or more children, and 58 homes that could accommodate four children. While substantial, this total is nine fewer homes than the previous monitoring period.

Between July and December 2016, DCF recruited a total of 34 SIBs homes; 10 of the 34 could accommodate five or more children. During the same period, 12 homes accommodating five or more children either were downgraded or closed: three homes closed for reasons related to adoption finalizations; one home closed because the family moved out of state; one home closed because the family was interested only in a select home adoption placement; four relative homes downgraded their capacity once their relative children were reunified; and three homes downgraded their capacity by choice.

Twenty-four of the 34 newly recruited SIBs homes could accommodate four children. During the same period, 33 homes accommodating four children closed for similar reasons to the homes accommodating five children: ten homes closed due to adoption finalizations; another 10 homes downgraded or closed their homes upon reunification of children; two homes upgraded their capacity and accepted placement of five children; nine homes were removed from the program upon their request to have the children removed; and two homes were downgraded upon request. DCF’s performance met the SEP standard for this measure between July and December 2016.

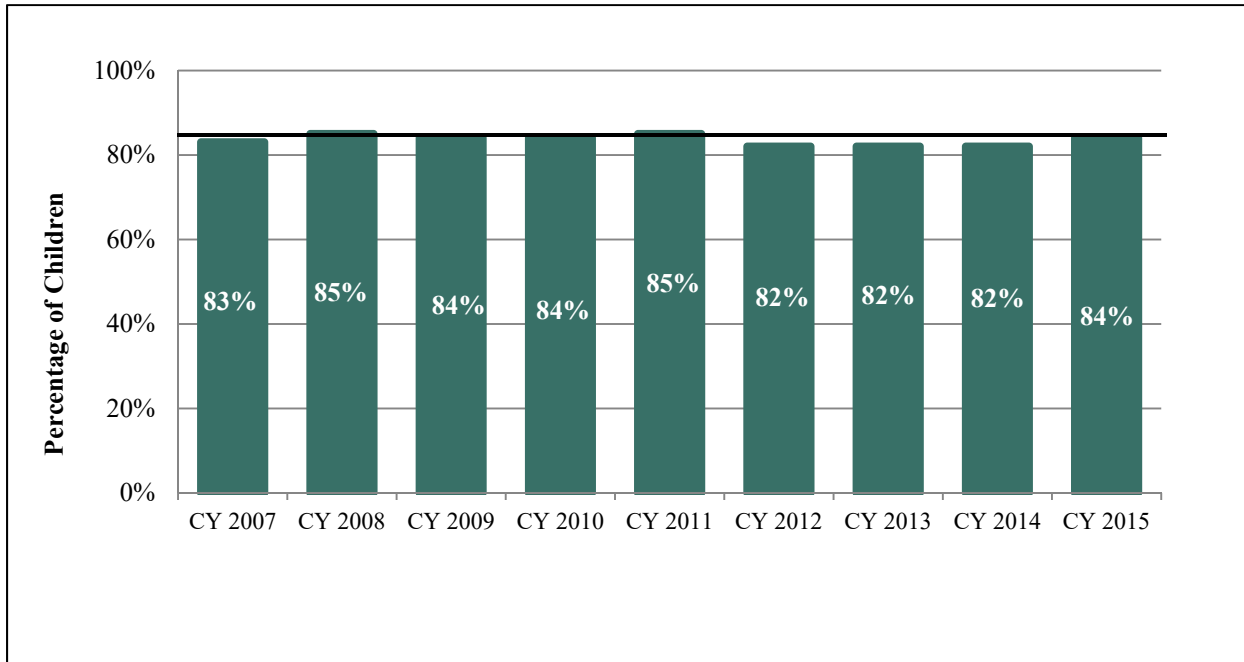
### Stability of Placement

<b>Quantitative or Qualitative Measure</b>	35. <u>Stability of Placement</u> : The percentage of children entering out-of-home placement for the first time in a calendar year who have no more than one placement change during the 12 months following their date of entry.
<b>Performance Target</b>	At least 84% of children entering care for the first time in a calendar year will have no more than one placement change during the 12 months following their date of entry.

#### ***Performance as of CY 2015 (Most Recent Calendar Year Available):***

The most recent performance data assesses the 3,718 applicable children who entered care for the first time in CY 2015 and aggregates the number of placements each child experienced within one year of entry. For children entering care in CY 2015, 3,120 (84%) had no more than one placement change during the 12 months from their date of entry. DCF met the SEP performance standard for this measure for the first time this monitoring period.

**Figure 6: Percentage of Children Entering Care who have No More Than One Placement Change during the 12 Months following their Date of Entry (CY 2007 – CY 2015)<sup>128</sup>**



Source: DCF data analyzed by Hornby Zeller Associates.

<b>Quantitative or Qualitative Measure</b>	36. <u>Stability of Placement</u> : The percentage of children in out-of-home placement who have no more than one placement change during the 13 to 24 months following their date of entry.
<b>Performance Target</b>	At least 88% of children in out-of-home placement will have no more than one placement change during the 13 to 24 months following their date of entry.

***Performance as of CY 2014 (Most Recent Calendar Year Available):***

The most recent performance data assesses the 1,907 applicable children who entered care for the first time in CY 2014 and aggregates the number of placements each child remaining in care experienced in the second year of their removal. For children entering care in CY 2014, 1,810 (95%) children had no more than one placement change during the 13 to 24 months following their date of entry. DCF performance exceeded the SEP performance standard in CY 2014, the most recent data available.

<sup>128</sup> The previous MSA standard of 88 percent applies to CY 2007 through CY 2013 data.

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## G. MALTREATMENT

The state is responsible for ensuring the safety of children who are receiving or have received services from CP&P. This responsibility includes ensuring the safety of children who are placed in resource family homes and congregate facilities, and preventing future maltreatment. There are four performance measures included in this section. As of June 2016, two were designated as *To Be Maintained*: abuse and neglect of children in foster care (SEP III.H.12); and repeat maltreatment for children remaining in home (SEP IV.H.37). The remaining two measures were designated as *To Be Achieved*: maltreatment post-reunification (SEP IV.H.38); and re-entry to placement (SEP IV.H.39). All of the measures discussed in this section are assessed using longitudinal cohort data and the most current performance data available are discussed below.

### Abuse and Neglect of Children in Foster Care

<b>Quantitative or Qualitative Measure</b>	12. <u>Abuse and Neglect of Children in Foster Care</u> : Of all children in foster care, the percentage who are victims of substantiated abuse or neglect by a resource parent or facility staff member.
<b>Final Target</b>	No more than 0.49% of children will be victims of substantiated abuse or neglect by a resource parent or facility staff member.

#### *Performance as of CY 2016:*

In CY 2016, 12 out of 11,119 children (0.11%) were victims of a substantiated allegation of abuse and/or neglect by a resource parent or facility staff member. Performance on this measure is slightly improved since CY 2015, and DCF continues to exceed the SEP performance standard.

### Repeat Maltreatment

<b>Quantitative or Qualitative Measure</b>	37. <u>Repeat Maltreatment (In-Home)</u> : Of all children who remain in home after substantiation of abuse or neglect, the percentage who have another substantiation within the next 12 months.
<b>Final Target</b>	No more than 7.2% of children who remain at home after a substantiation of abuse or neglect will have another substantiation within the next 12 months.

#### *Performance as of CY 2015 (Most Recent Calendar Year Available):*

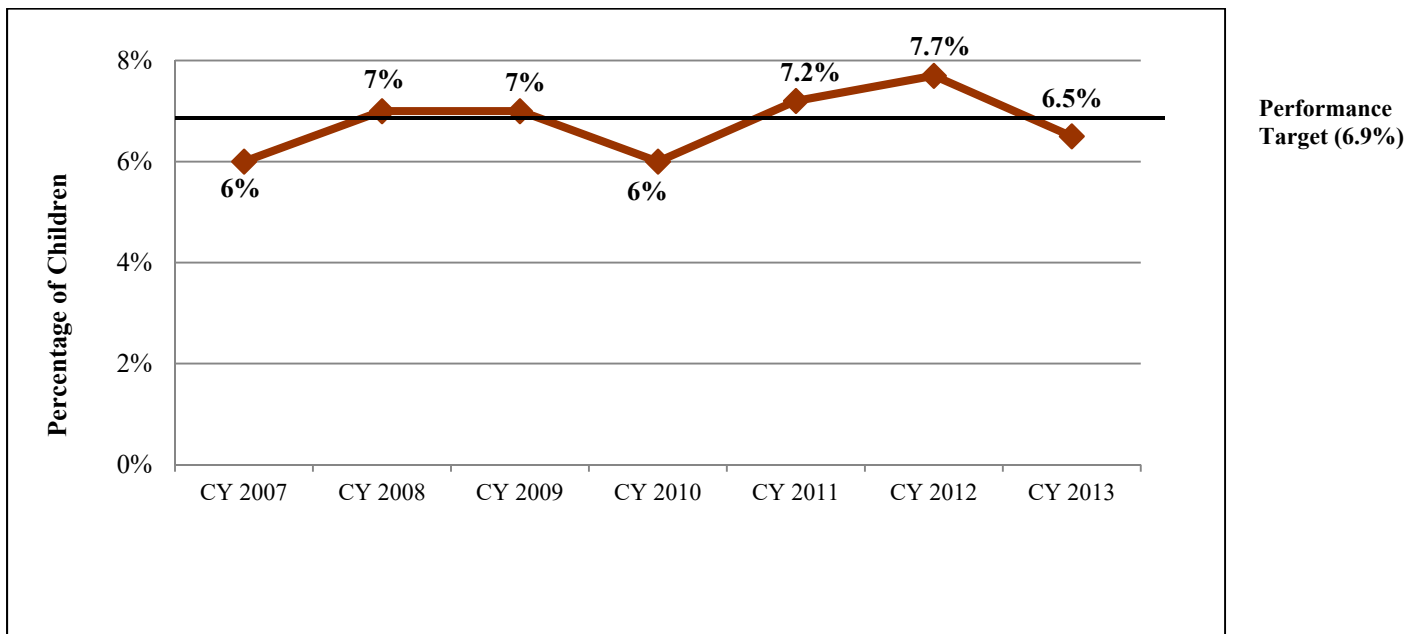
In CY 2015, there were 5,630 children who were victims of a substantiated allegation of abuse and/or neglect who were not placed in out-of-home care; 365 (6.5%) of these children were the victims of a substantiated allegation of child abuse and/or neglect within 12 months of the initial substantiation. In-home repeat maltreatment rates continued to meet the SEP performance standard.

<b>Quantitative or Qualitative Measure</b>	38. <u>Maltreatment Post-Reunification</u> : Of all children who are reunified during a period, the percentage who are victims of substantiated abuse or neglect within one year after the date of reunification.
<b>Final Target</b>	Of all children who enter foster care in a 12-month period for the first time who are discharged within 24 months to reunification or living with relative(s), no more than 6.9% will be the victims of substantiated abuse or neglect within 12 months after reunification.

**Performance as of CY 2013 (Most Recent Calendar Year Available):**

In CY 2013, there were 2,153 children in foster care who exited to reunification or living with relatives. One-hundred and thirty-nine (6.5%) of these children were victims of a substantiated allegation of abuse and/or neglect within 12 months of their return home. This is an improvement in performance from CY 2012. DCF met the SEP performance standard for the first time this monitoring period.

**Figure 7: Percentage of Children who were Victims of Substantiated abuse of Neglect within One Year after the Date of Reunification (CY 2007 – CY 2013)<sup>129</sup>**



Source: DCF data analyzed by Hornby Zeller Associates.

<sup>129</sup> The previous MSA standard of no more than 4.8% applies to CY 2007 through CY 2011 data.

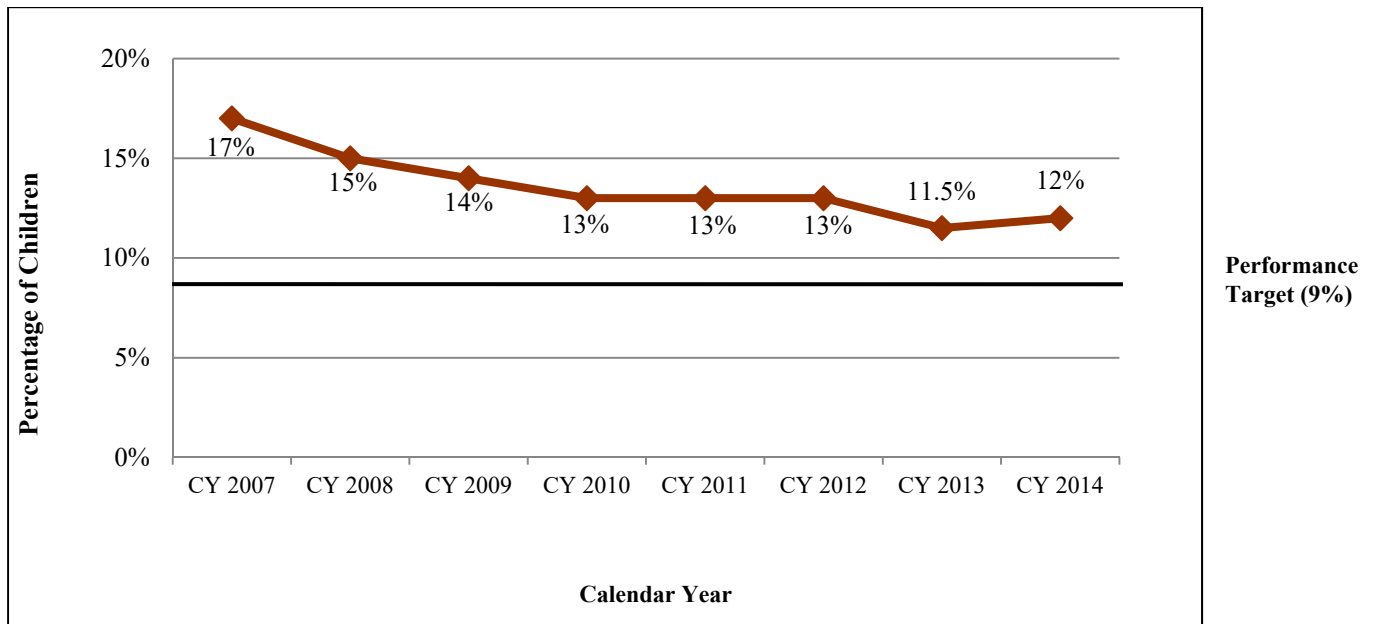
## Re-entry to Placement

<b>Quantitative or Qualitative Measure</b>	39. <u>Re-entry to Placement</u> : Of all children who leave custody during a period, except those whose reason for discharge is that they ran away from their placement, the percentage that re-enter custody within one year of the date of exit.
<b>Final Target</b>	Of all children who enter foster care in a 12 month period for the first time who are discharged within 12 months to reunification, living with relative(s), or guardianship, no more than 9% will re-enter foster care within 12 months of their discharge.

***Performance as of CY 2014 (Most Recent Calendar Year Available):***

In CY 2014, there were 1,433 children to whom this measure applied; 172 (12%) children re-entered placement within 12 months of their discharge. Figure 8 below shows performance from CY 2007 to CY 2014. DCF performance has not yet met the SEP performance standard.

**Figure 8: Percentage of Children who Re-Entered Custody within One Year of Date of Exit (CY 2007 – CY 2014)**



Source: DCF data analyzed by Hornby Zeller Associates.

## H. TIMELY PERMANENCY

Regardless of age, gender, race or ethnicity, all children need and deserve a safe, nurturing family to protect and guide them. Though safe family reunification is always preferred, permanency for children can be achieved through a number of different avenues, including kinship/guardianship and adoption. There are four SEP measures included in this section, all related to the achievement of permanency for children in DCF care. As of the end of June 2016, one measure was designated as *To Be Maintained* – achieving permanency within 12 months (SEP IV.I.40) – and three measures were *To Be Achieved* – achieving permanency within 24 months (SEP IV.I.41), 36 months (SEP IV.I.42) and 48 months (SEP IV.I.43) respectively. All of the measures discussed in this section are assessed with longitudinal cohort data and the most current performance data available are discussed below.

### Timely Permanency through Reunification, Adoption or Guardianship

<b>Quantitative or Qualitative Measure</b>	40. <u>Permanency Within 12 months</u> : Of all children who entered foster care in a 12 month period, what percentage were discharged from foster care to permanency (reunification, living with relatives, guardianship or adoption) within 12 months of entering foster care.
<b>Final Target</b>	Of all children who enter foster care in a 12 month period, at least 42% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 12 months of entering foster care.

#### *Performance as of CY 2015 (Most Recent Calendar Year Available):*

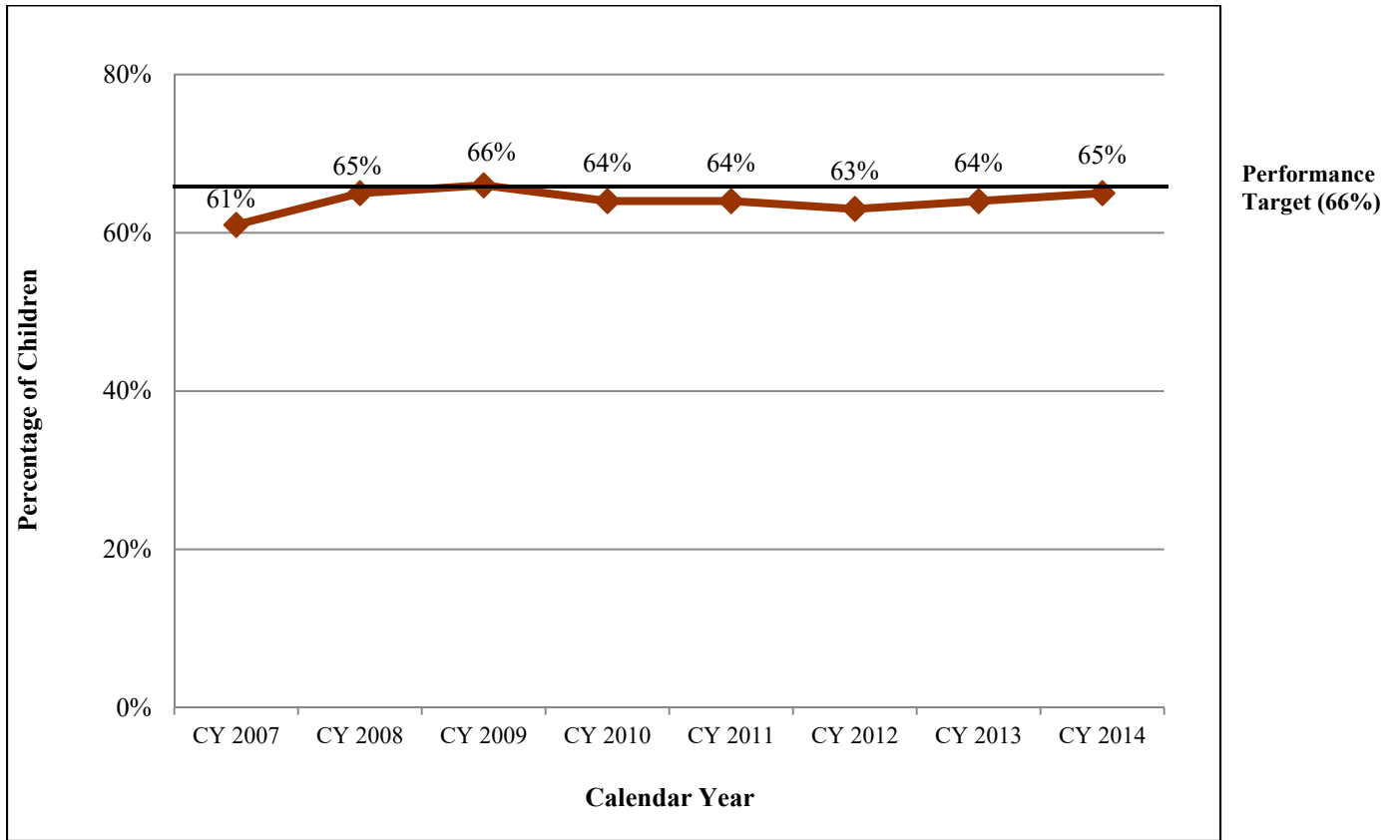
The most recent data available for this measure are for children who entered foster care in CY 2015. Of the 4,034 children who entered foster care in CY 2015, 1,686 (42%) were discharged to permanency within 12 months from their removal from their home. Current performance represents a slight improvement over CY 2014 (41%), and meets the SEP performance standard.

<b>Quantitative or Qualitative Measure</b>	41. <u>Permanency Within 24 months</u> : Of all children who enter foster care in a 12 month period, what percentage were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 24 months of entering care.
<b>Final Target</b>	Of all children who enter foster care in a 12 month period, at least 66% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 24 months of entering care.

#### *Performance as of CY 2014 (Most Recent Calendar Year Available):*

The most recent data available for this measure are for children who entered foster care in CY 2014. Of the 4,378 children who entered foster care in CY 2014, 2,829 (65%) were discharged to permanency within 24 months from their removal from their home. DCF performance has improved and is just shy of meeting the SEP standard.

**Figure 9: Percentage of Children Who Enter Foster Care in a 12 Month Period Who Discharge to Permanency within 24 Months of Entering Foster Care (CY 2007 – CY 2014)**



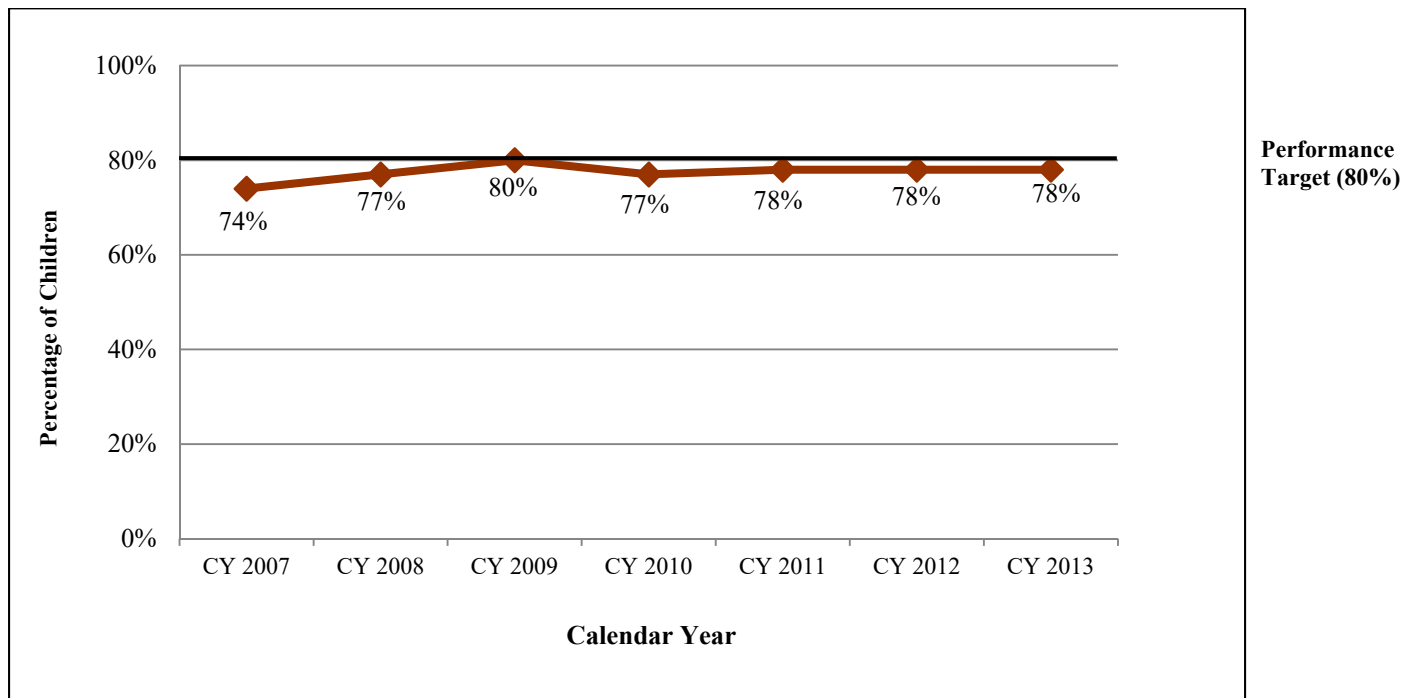
Source: DCF data analyzed by Hornby Zeller Associates.

<b>Quantitative or Qualitative Measure</b>	42. <u>Permanency Within 36 months</u> : Of all children who enter foster care in a 12 month period, what percentage were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 36 months of entering care.
<b>Final Target</b>	Of all children who enter foster care in a 12 month period, at least 80% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 36 months of entering care.

***Performance as of CY 2013 (Most Recent Calendar Year Available):***

The most recent data available for this measure are for children who entered foster care in CY 2013. Of the 4,611 children who entered foster care in CY 2013, 3,591 (78%) were discharged to permanency within 36 months from their removal from their home. Current performance comes close to, but does not yet meet, the SEP performance standard.

**Figure 10: Percentage of Children Who Enter Foster Care in a 12 Month Period Who Discharge to Permanency within 36 Months of Entering Foster Care (CY 2007 – CY 2013)**



Source: DCF data analyzed by Hornby Zeller Associates.

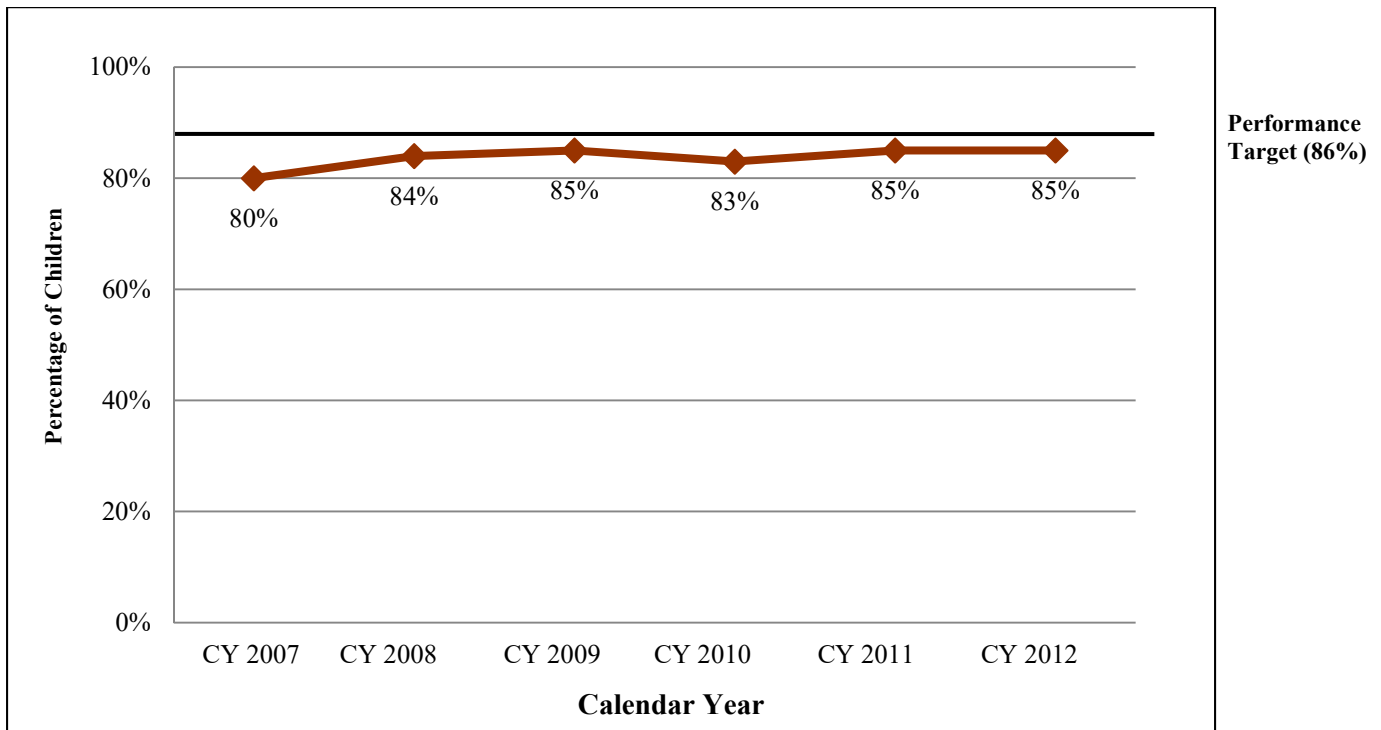


<b>Quantitative or Qualitative Measure</b>	43. <u>Permanency within 48 months</u> : Of all children who enter foster care in a 12 month period, what percentage were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 48 months of entering care.
<b>Final Target</b>	Of all children who enter foster care in a 12 month period, at least 86% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 48 months of entering care.

***Performance as of CY 2012 (Most Recent Calendar Year Available):***

The most recent data available for this measure are for children who entered foster care in CY 2012. Of the 4,701 children who entered foster care in CY 2012, 4,010 (85%) were discharged to permanency within 48 months from their removal from their home. Current performance is close to, but does not yet meet the SEP performance standard for this measure.

**Figure 11: Percentage of Children Who Enter Foster Care in a 12 Month Period Who Discharge to Permanency within 48 Months of Entering Foster Care (CY 2007 – CY 2012)**



Source: DCF data analyzed by Hornby Zeller Associates.

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## I. CHILD HEALTH UNITS

Early in New Jersey’s child welfare reform efforts, DCF built Child Health Units (CHUs) to facilitate and ensure the timely provision of health care to children in CP&P custody. These units are operational in each CP&P Local Office and are staffed with Regional Nurse Administrators, Nurse Health Care Case Managers (HCCMs) and staff assistants based on the projected number of children in out-of-home placement.

Section III.E of the SEP requires the state to “maintain its network of child health units, adequately staffed by nurses in each local office.” This standard is designated as *To Be Maintained*. Each child in a resource home continues to have a nurse assigned for health care case management. Since the development of the CHUs, the Monitor has reviewed data to assess the staffing adequacy and has found the CHUs to be fully staffed according to a standard of one nurse for every 50 children in foster care placement.

<b>Quantitative or Qualitative Measure</b>	8. <u>Child Health Units</u> : The State will continue to maintain its network of child health units, adequately staffed by nurses in each Local Office.
<b>Performance Target</b>	DCF will maintain adequate staffing levels in Local Offices.

### ***Performance as of December 31, 2016:***

As of December 2016, DCF had 180 HCCMs and 84 staff assistants. Of the 180 HCCMs, 177 were available for coverage for a ratio of one HCCM to every 38 children in out-of-home care. A ratio of one HCCM to 50 children in out-of-home care or less is considered adequately staffed. DCF continues to meet the SEP performance standard.

## J. OLDER YOUTH

The SEP includes four measures related to older youth. As of June 2016, two were designated as Outcomes *To Be Maintained* – completion of Independent Living Assessments (SEP IV.K.45) and quality of case planning and services (SEP IV.K.46) – and two were Outcomes *To Be Achieved* – housing for youth who exit care without achieving permanency (SEP IV.K.47) and education/employment for youth who exit care without achieving permanency (SEP IV.K.48).

For the first time this monitoring period, DCF met both the housing measure and the education/employment measure for youth exiting care without achieving permanency. This is a substantial accomplishment and a reflection of the multi-year work that DCF has led to improve services and outcomes for older youth. Performance for all four measures during the current monitoring period are discussed below.

## Independent Living Assessments

<b>Quantitative or Qualitative Measure</b>	45. <u>Independent Living Assessments</u> : Percentage of youth aged 14 and 18 with a completed Independent Living Assessment.
<b>Performance Target</b>	90% of youth ages 14 to 18 will have an Independent Living Assessment.

### *Performance as of December 31, 2016:*

In December 2016, there were 823 youth aged 14 to 18 in out-of-home placement for at least six months; 721 (88%) had an Independent Living Assessment (ILA) completed. Monthly performance between July and December 2016 ranged from 87 to 93 percent.<sup>130</sup> DCF sustained performance at or above the level required by the SEP in two of the six months in the reporting period; performance fell slightly below the standard in the other months. The monitor considers this a temporary decline in performance. In the Monitor’s discretion, DCF has met the performance standard.

## Quality of Case Planning and Services for Older Youth

<b>Quantitative or Qualitative Measure</b>	46. <u>Quality of Case Planning and Services</u> : DCF shall provide case management and services to youth between the ages 18 and 21 who have not achieved legal permanency.
<b>Performance Target</b>	75% of youth aged 18 to 21 who have not achieved legal permanency shall receive acceptable quality case management and service planning.

### *Performance as of December 31, 2016:*

Performance data for this measure were collected through QRs conducted from January to December 2016 of 32 cases of youth ages 18 to 21. In rating these cases, reviewers use both the standard QR protocol and a list of additional considerations relevant to this population, such as DCF’s efforts to plan and support youth who identify as LGBTQ, are victims of domestic violence, are expectant or parenting and/or are developmentally disabled. From January to December 2016, 63 percent (20 of 32) cases were rated acceptable for *both* the *child (youth)/family status* and *practice performance* indicators.<sup>131</sup> The Monitor considers this a temporary decline in performance given that the universe of cases to which this measure applies is small and therefore more susceptible to fluctuations. In the Monitor’s discretion, DCF has met the performance standard.

<sup>130</sup> Monthly performance is as follows: July, 93%; August, 92%; September, 89%; October, 89%; November, 87%; December 88%.

<sup>131</sup> From January to December 2016, 81% (26 of 32) of cases rated acceptable for the *child (youth)/family status* indicator and 69% (22 of 32) of cases rated acceptable for the *practice performance* indicator.

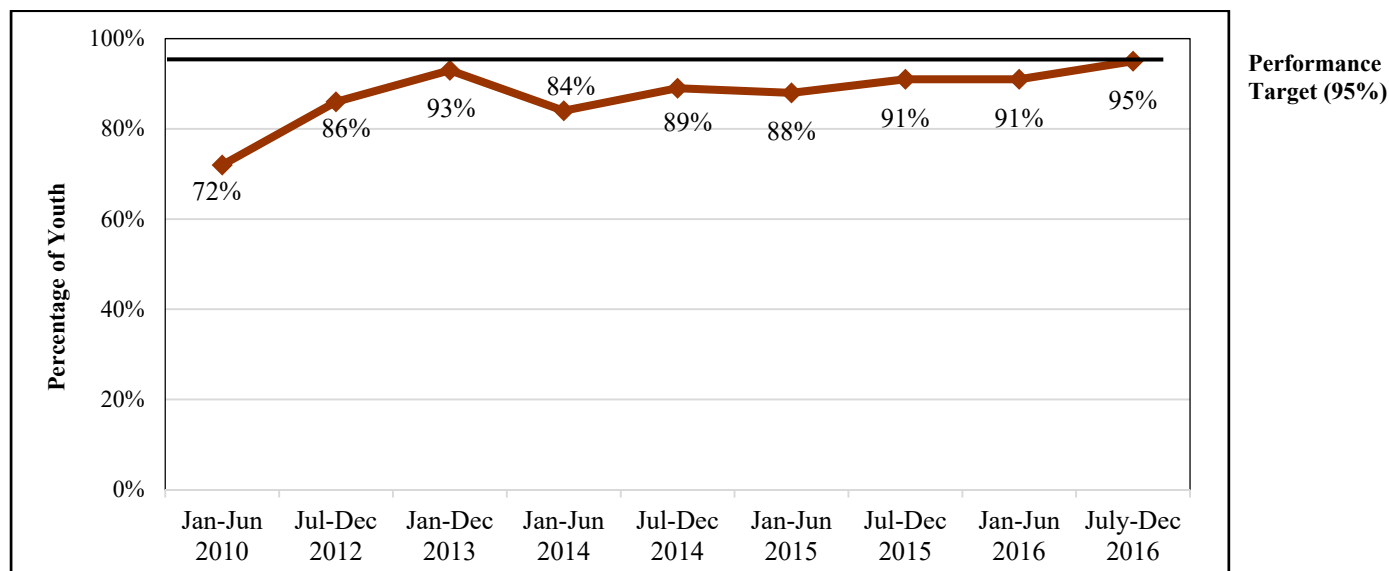
## Housing

<b>Quantitative or Qualitative Measure</b>	47. <u>Housing</u> : Youth exiting care without achieving permanency shall have housing.
<b>Performance Target</b>	95% of youth exiting care without achieving permanency shall have housing.

### *Performance as of December 31, 2016:*

The Monitor and DCF conducted a case record review of the 66 youth who exited care without achieving permanency between July and December 2016; this measure was applicable to 59 youth.<sup>132</sup> Forty-nine youth had documentation of a housing plan upon exiting CP&P care, and in an additional seven cases, there was documentation of consistent efforts by the caseworker to help the youth secure housing. Overall, there was compliance with this measure in 56 (95%) of cases. DCF has met the performance level required by the SEP for the first time this monitoring period.

**Figure 12: Youth Exiting Care without Permanency with Housing  
(January 2010 – June 2016)**



Source: Data from DCF and CSSP Case Record Reviews

<sup>132</sup> Seven youth were excluded from consideration either because the youth declined to provide this information or, despite efforts by CP&P, the youth was unable to be located to confirm a housing plan.

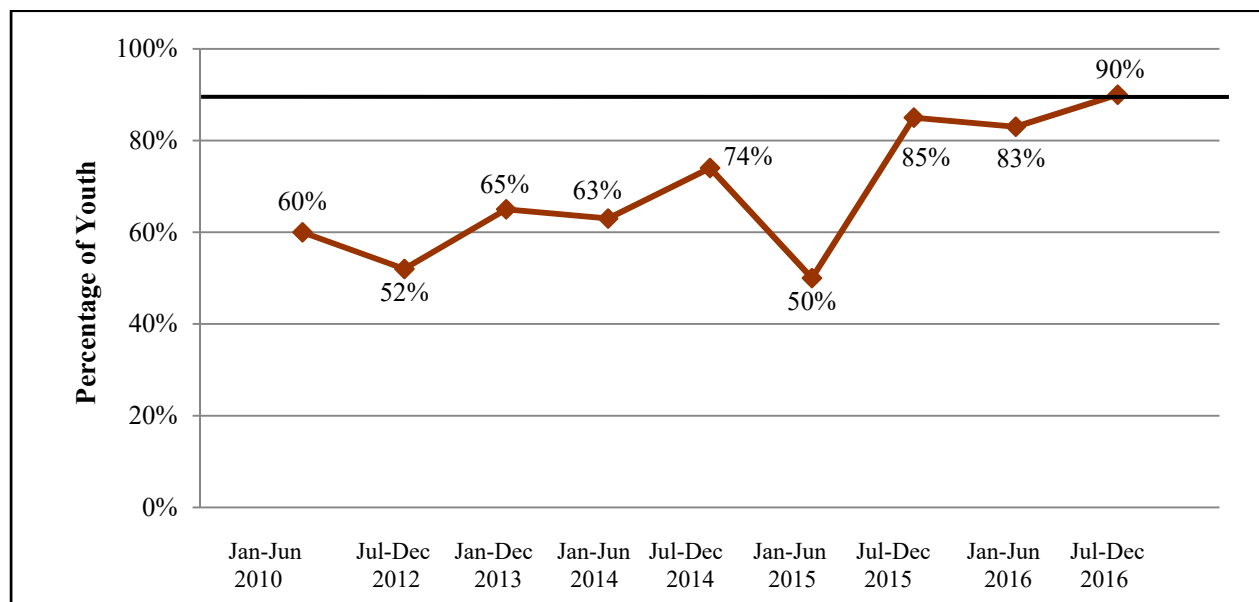
## Employment/Education

<b>Quantitative or Qualitative Measure</b>	48. <u>Employment/Education</u> : Youth exiting care without achieving permanency shall be employed, enrolled in or have recently completed a training or an educational program or there is documented evidence of consistent efforts to help the youth secure employment or training.
<b>Performance Target</b>	90% of youth exiting care without achieving permanency shall be employed, enrolled in or have recently completed a training or an educational program or there is documented evidence of consistent efforts to help the youth secure employment or training.

### *Performance as of December 31, 2016:*

The Monitor and DCF conducted a case record review of the 66 youth who exited care without achieving permanency between July and December 2016; this measure was applicable in 59 cases.<sup>133</sup> Forty-nine youth were either employed or enrolled in education or vocational training programs, and there was documentation of consistent efforts by the caseworker to help the youth secure education or employment in an additional seven cases. Overall, there was compliance with this measure in 53 (90%) cases. DCF has now met the SEP performance standard.

**Figure 13: Youth Exiting Care without Permanency Who are Employed or Enrolled in Educational or Vocational Training Program (January 2010 – December 2016)**



**Performance Target (90%)**

Source: Data from DCF and CSSP Case Record Reviews

<sup>133</sup> Seven youth were not applicable for one of the following reasons: youth was incarcerated, youth was missing and the worker made attempts to locate the youth, youth declined or not interested in employment or educational/vocational program, youth in the process of enrolling or youth had mental impairment which prevented employment or enrolled in an educational/vocational program.

## K. SERVICES TO SUPPORT TRANSITION

### Services to Support Transition

<b>Quantitative or Qualitative Measure</b>	44. <u>Services to Support Transition</u> : DCF will provide services and supports to families to support and preserve successful transitions.
<b>Performance Target</b>	80% of cases will be plans rated acceptable for supporting transitions as measured by the Quality Review (QR).

#### *Performance as of December 31, 2016:*

While involved with DCF, families and children may face several transitions, including changes in family relationships, living arrangements, service providers or schools. Some transitions are more critical than others but all require recognition and planning in order to be smooth and successful. DCF uses the QR process to measure case practice that supports families to make successful transitions.

Section IV.J of the SEP requires that 80 percent of cases be rated acceptable for the *successful transitions* indicator. Results from 133 cases reviewed from January to December 2016 indicate that 66 percent (88 of 133) of cases were rated acceptable. DCF did not meet the SEP performance standard for this monitoring period.

**Figure 14: Qualitative Review (QR) Cases Rated Acceptable for Successful Transitions (January – December 2016) (N=133)**



Source: DCF data

## L. CASELOADS

Caseload compliance is measured by assessing caseloads for individual caseworkers in each of the functional areas (Intake, Permanency, Adoption and IAIU) as well as office standards for CP&P Local Offices. Table 3 summarizes the caseload standards for individual workers.

The SEP includes eight measures related to caseloads and all are designated as *To Be Maintained*. These eight measures include Intake office caseloads (SEP IV.E.24); Intake individual worker caseloads (SEP IV.E.25); Adoption office caseloads (SEP IV.E.26); Adoption individual worker caseloads (SEP IV.E.27); Permanency office caseloads (SEP III.B.4); Permanency individual worker caseloads (SEP III.B.5); IAIU investigators individual caseloads (SEP III.B.3); and supervisory/worker ratio (SEP III.B.2).

**Table 3: CP&P Individual Caseload Standards**

Caseworker Function	Responsibility	Individual Caseload Standard (SEP Sections IV.E and III.B)
Intake	Respond to community concerns regarding child safety and well-being. Specifically, receive referrals from the State Central Registry (SCR) and depending on the nature of the referral, respond between two hours and five days with a visit to the home and begin investigation or assessment. Complete investigation or assessment within 60 days.	Intake workers are to have no more than <b>12 open cases</b> at any one time <b>and</b> no more than <b>eight new referrals</b> assigned in a month. No Intake worker with 12 or more open cases can be given more than <b>two secondary assignments</b> <sup>134</sup> per month.
Institutional Abuse Investigations Unit (IAIU)	Respond to allegations of child abuse and neglect in settings including correctional facilities, detention facilities, treatment facilities, schools (public or private), residential schools, shelters, hospitals, camps or child care centers that are required to be licensed, resource family homes and registered family day care homes.	IAIU staff workers are to have no more than <b>12 open cases</b> at any one time <b>and</b> no more than <b>eight new referrals</b> assigned in a month.
Permanency	Provide services to families whose children remain at home under the protective supervision of CP&P and those families whose children are removed from home due to safety concerns.	Permanency workers are to serve no more than <b>15 families and 10 children in out-of-home care at any one time</b> .
Adoption	Find permanent homes for children who cannot safely return to their parents by preparing children for adoption, developing adoptive resources and performing the work needed to finalize adoptions.	Adoption workers are to serve no more than <b>15 children</b> at any one time.

Source: DCF

<sup>134</sup> Secondary assignments refer to shared cases between Intake and Permanency workers for families who have a case open with a Permanency worker where there are new allegations of abuse or neglect that require investigation.

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## Verifying Worker Caseloads

DCF caseload data are collected and analyzed through NJ SPIRIT. As in previous monitoring periods, the Monitor verified caseload data supplied by DCF by conducting telephone interviews with randomly selected workers across the state. The caseload verification process included workers in all areas in which the SEP establishes caseload standards: Intake, Permanency and Adoption. A sample of 170 workers were selected from all active workers in December 2016. All of the 46 CP&P Local Offices were represented in the sample. For the past several years, CSSP has weighted the sample with Intake workers to examine in more depth the impact of shared cases between Intake and Permanency workers. The interviews were conducted in the months of January and February 2017. All 170 workers were called and information was collected from 131 workers (80% of the eligible sample).<sup>135</sup> Among the 131 workers who participated in the caseload verification interviews, 77 were Intake workers, 23 were Permanency workers, 20 were Adoption workers and 11 were trainees.

During the interviews, Monitor staff asked each caseworker whether their caseload met caseload standards between July and December 2016; responses were compared to the caseload information from NJ SPIRIT on identified workers for the same period. Workers were also asked to report their specific caseload size for the month of December 2016, and their reports were compared with NJ SPIRIT data for that month.

### **Intake**

In November and December 2016, DCF piloted a caseload verification review with Intake workers as part of its newly implemented internal caseload verification process and continuous quality improvement efforts. The caseload verification review serves as a quality assurance method where workers' reported caseloads are compared to their caseloads as reported in SafeMeasures. In addition, the review is intended to identify practice issues and training needs. DCF's caseload verification process began statewide in February 2017.

The SEP intake caseload standard is no more than eight new case assignments per month, no more than 12 open cases at any one time and no Intake worker with 12 or more open cases can be assigned more than two secondary assignments per month. In January 2017, DCF implemented a new methodology for tracking and reporting the SEP Intake caseload standard to more clearly communicate the standards to staff and to streamline monitoring and reporting. DCF's new methodology will capture secondary case assignments on the Intake worker's monthly caseload report, which will track and report intake caseloads as follows: no more than eight new assignments per month; no more than 12 cases assigned as primary case assignments at any one time; and no more than 14 cases at any one time, including both primary and secondary case assignments. The methodology for the standard of no more than eight new case assignments per month remains unchanged.

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<sup>135</sup> Five workers were on extended leave during the period the calls were made and were removed from the sample. One additional worker refused to participate and one worker newly assigned to the position for less than half of the monitoring period was also removed from the sample. The Monitor made at least three attempts to contact each caseworker in the sample.



<b>Quantitative or Qualitative Measure</b>	24. <u>Intake Local Office Caseloads</u> : Local Offices will have an average caseloads for Intake workers of (a) no more than 12 families, and (b) no more than eight new assignments per month. No Intake worker with 12 or more open cases can be given more than two secondary assignments per month.
<b>Performance Target</b>	95% of Local Offices will have an average caseload of (a) no more than 12 families, and (b) no more than eight new assignments per month. No Intake worker with 12 or more open cases can be given more than two secondary assignments per month.

***Performance as of December 31, 2016:***

Performance data for July through December 2016 shows that 100 percent of Local Offices met the intake caseload standards.

<b>Quantitative or Qualitative Measure</b>	25. <u>Individual Intake Caseloads</u> : individual Intake workers shall have (a) no more than 12 open cases, and (b) no more than eight new assignments per month. No Intake worker with 12 or more open cases can be given more than two secondary assignments per month.
<b>Performance Target</b>	90% of individual Intake workers shall have (a) no more than 12 open cases, and (b) no more than eight new assignments per month. No Intake worker with 12 or more open cases can be given more than two secondary assignments per month.

***Performance of December 31, 2016:***

DCF met the individual Intake worker caseload standard this monitoring period. The state reported an average of 977 active Intake workers between July and December 2016. Among those active Intake workers, an average of 95 percent (927 of 977) of workers had caseloads that met the caseload standard. Specifically, in December 2016 individual worker caseload compliance for Intake workers was 92 percent (902 of 977 total workers). For the 75 Intake workers who did not meet caseload requirements in December 2016, the highest number of new intakes during the month for any worker was nine and the highest number of open cases for any worker in the month was 21 families.

Data by Local Office show that during December 2016, performance ranged between 27 and 100 percent, with 37 of 46 Local Offices (80%) having all Intake workers in compliance with caseload standards.

Among the 131 workers who participated in the Monitor’s telephone interviews for caseload verification, 77 were Intake workers. Four (5%) of the 77 Intake workers reported exceeding the caseload limits for new assignments at some point between July and December 2016. Twenty (26%) Intake workers reported having more than 12 total families on their caseload at some point during the same period.

DCF deploys Impact Teams (consisting of a supervisor and three workers) to a unit or a Local Office in different areas of the state when intakes are unusually high in order to assist in

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maintaining caseload standards by conducting any overflow of investigations. There are nine Impact Teams, one per Area Office.

### ***“Shared” Cases between Intake and Permanency Workers***

As described in previous monitoring reports, Intake and Permanency workers sometimes share responsibility for families with open permanency cases where there are new allegations of abuse or neglect. Thus caseload numbers for almost a third of Intake workers in any month understate their workload. According to DCF procedure, all CPS family reports and CWS family referrals are assigned to Intake workers to investigate and are reflected in caseload reporting as one of the Intake workers’ eight new referrals in the month and as one of their 12 open families for that month. However, when circumstances indicate that a family with an already open permanency case is the subject of a new CPS family report, the work with the family becomes the shared responsibility of both Intake and Permanency workers until the investigation is completed.

Intake workers are assigned a secondary worker designation in NJ SPIRIT on a shared case for a family who is also currently assigned to a Permanency worker. According to DCF, this arrangement emphasizes the primary role of the Permanency worker in securing placement, facilitating visits, supporting the family to implement the case plan and coordinating services. It also reflects the Permanency workers' responsibility to provide information to the Intake worker and to link the family to appropriate services and supports identified during the course of the new investigation, thus relieving the Intake worker of the overall case management responsibility for the case. Intake workers continue to be responsible for the work required to complete investigative tasks and to reach and document an investigative finding. The designation as a secondary worker is not reflected as an open family for the Intake worker’s caseload and is not categorized as an open family in monthly caseload reports. Thus, these secondary assignments are counted as one of the Intake worker’s eight new referrals assigned in a month, but are not counted as part of their 12 open families in a month.

DCF reports that Intake supervisors in CP&P Local Offices are expected to appropriately manage the workload of staff in their units and consider an Intake worker’s primary and secondary responsibilities when assigning new referrals. Table 4 provides the reported number of secondary assignments to Intake workers by month for this monitoring period.

**Table 4: Number of CP&P Investigations and Secondary Intake Assignments by Month (July – December 2016)<sup>136</sup>**

Month	Total Investigations Assigned to Intake Workers for the Month	Secondary Intake Worker Assignments of CPS and CWS Investigations*	
July	4,264	415	10%
August	4,905	536	11%
September	5,600	529	9%
October	5,814	515	9%
November	5,554	483	9%
December	5,634	532	9%

Source: DCF data

The Monitor reviewed monthly Local Office data on secondary assignments and found that on average, each Intake worker was assigned one secondary case at any given time. The Monitor also found that an average of 26 percent of Intake workers received two or more secondary case assignments and an average of nine percent of Intake workers received three or more secondary assignments each month during the monitoring period. Specifically, in the month of December 2016, 277 (28%) Intake workers received two or more secondary intake assignments and 93 (10%) Intake workers received three or more secondary intake assignments.

During phone interviews with caseworkers, Monitor staff inquired about the prevalence of secondary assignments and their impact on workload. Intake workers were asked about the frequency of secondary assignments, the effect these assignments have on workload and how they are measured. Of the 77 Intake workers interviewed, 69 (90%) reported receiving an assignment to investigate a new report on an open permanency case as a secondary worker at least once in the six month period between July and December 2016. Of those 69 workers, 39 workers (57%) reported receiving at least one secondary assignment per month. Forty-two of the 69 (61%) Intake workers interviewed responded that in their opinion, the workload for an investigation on an open permanency case in which they are designated as secondary worker is equivalent to, or sometimes more than, the workload for an initial investigation. Workers explained that although Permanency workers may have completed collateral contacts or are able to provide information about the family’s circumstances, every investigation must be approached in the same manner regardless of primary or secondary status.

To ensure that Intake workload is properly managed regardless of the combination of primary and secondary assignments, DCF continues to examine the processes used in Local Offices to make secondary assignments, as well as Local Office workflow management practices.

<sup>136</sup> Total excludes intakes assigned to Impact, Permanency, Adoption and Advocacy Center workers and includes intakes assigned to workers on leave.

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### *Assignment of Investigations to Non-Caseload Carrying Staff*

On occasion, in order to handle the flow of referrals for investigations, trained non-caseload carrying staff as well as caseload-carrying staff who are not part of Intake units (non-Intake caseload carrying staff) in Local Offices are assigned to an investigation. DCF reports that policy requires all staff to complete First Responder training prior to being assigned an investigation, and non-caseload carrying staff have to have been similarly trained and receive supervision by the Intake supervisor. The Monitor's review of DCF's data for the months of July through December 2016, found that approximately one percent of investigations were assigned each month to non-caseload carrying staff and that five percent were assigned to non-Intake caseload-carrying staff. DCF produces a Caseload Report Exception List that documents all instances of intakes identified as assigned to non-caseload carrying workers and closely monitors this on an ongoing basis. Table 5 below shows the number and percentage of investigations assigned to non-caseload carrying staff, and Table 6 shows the number and percentage of investigations assigned to non-Intake caseload-carrying staff.

As part of the phone interviews previously discussed, Intake workers were asked if there were scenarios in their offices in which non-caseload carrying staff could be assigned an investigation. Eighteen of the 77 workers (23%) reported that they were aware of instances in which this has happened in their office. Respondents stated that non-caseload carrying staff with prior investigative experience can be assigned cases when all Intake workers in a Local Office reach their assignment limit for the month. The most frequently identified job titles for the non-caseload carrying staff who are assigned investigations are Administrative Assistant and Resource Development Specialist.

**Table 5: Percentage of CP&P Investigations Assigned to Non-Caseload Carrying Staff by Month (July – December 2016)<sup>137</sup>**

Month	Total Investigations Received for the Month	Number and Percentage of Investigations Assigned to Non-Case Carrying Staff	
July	4,522	40	1%
August	5,174	41	1%
September	6,003	130	2%
October	6,232	73	1%
November	5,925	80	1%
December	6,035	70	1%

Source: DCF NJ SPIRIT Data

**Table 6: Percentage of CP&P Investigations Assigned to Non-Intake Caseload Carrying<sup>138</sup> Staff by Month (July – December 2016)**

Month	Total Investigations Received for the Month	Number and Percentage of Investigations Assigned to Non- Intake Caseload Carrying Staff	
July	4,522	218	5%
August	5,174	228	4%
September	6,003	273	5%
October	6,232	345	6%
November	5,925	291	5%
December	6,035	331	5%

Source: DCF NJ SPIRIT Data

<sup>137</sup> Data are provided for investigations assigned within five days of intake receipt date and does not reflect additional assignments to an investigation after those first five days. DCF conducted a review of assignments to non-caseload carrying staff in NJ SPIRIT and found that some investigations had been re-assigned to caseload carrying workers after the initial five days. As a result, there is potential for the percentage of investigations assigned to non-caseload carrying staff to be lower than two percent.

<sup>138</sup> This includes Permanency, Adoption, Impact and Advocacy Center caseload carrying workers.

## Adoption

<b>Quantitative or Qualitative Measure</b>	26. <u>Adoption Local Office Caseloads</u> : Local offices will have an average caseloads for Adoption workers of no more than 15 children per worker.
<b>Performance Target</b>	95% of Local Offices will have an average caseload of no more than 15 children per Adoption worker.

### *Performance as of December 31, 2016:*

Performance data for July through December 2016 show that 100 percent of Local Offices met the adoption caseload standard.

<b>Quantitative or Qualitative Measure</b>	27. <u>Individual Worker Adoption Caseloads</u> : Individual Adoption worker caseloads shall be no more than 15 children per worker.
<b>Performance Target</b>	95% of individual Adoption workers shall have a caseload of no more than 15 children per month.

### *Performance as of December 31, 2016:*

DCF reported an average of 241 active Adoption workers between July and December 2016. Of the active Adoption workers, an average of 232 (97%) workers had caseloads that met the requirement throughout the monitoring period.

Among the 131 workers who participated in the phone interviews conducted by Monitor staff for caseload verification, 20 were Adoption workers. Two of the 20 (10%) workers interviewed reported exceeding caseload standards at some point during the period of July through December 2016.

## Permanency

<b>Quantitative or Qualitative Measure</b>	4. <u>Permanency Local Office Caseloads</u> : Local offices will have an average caseloads for Permanency workers of (a) no more than 15 families, and (b) no more than 10 children in out-of-home placement per worker.
<b>Performance Target</b>	95% of Local Offices will have an average caseload of (a) no more than 15 families, and (b) no more than 10 children in out-of-home placement per worker.

<b>Quantitative or Qualitative Measure</b>	5. <u>Individual Worker Permanency Caseloads</u> : Individual Permanency worker caseloads shall be (a) no more than 15 families, and (b) no more than 10 children in out-of-home placement per worker.
<b>Performance Target</b>	95% of individual Permanency workers shall have a caseload of (a) no more than 15 families, and (b) no more than 10 children in out-of-home placement per worker.

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***Performance as of December 31, 2016:***

Performance data for July through December 2016 shows that 100 percent of Local Offices and 100 percent of individual workers<sup>139</sup> continued to maintain the permanency caseload standard during this period.

Among the 131 workers who participated in telephone interviews conducted by Monitor staff for caseload verification, 23 were Permanency workers. One (4%) of the 23 Permanency workers interviewed who had a caseload of 16 families reported exceeding the caseload standard of no more than 15 families and no more than 10 children in out-of-home placement for the monitoring period July through December 2016.

**Institutional Abuse Investigation Unit (IAIU)**

<b>Quantitative or Qualitative Measure</b>	3. <u>Individual Worker IAIU Caseloads</u> : individual IAIU worker caseloads shall be (a) no more than 12 open cases, and (b) no more than eight new case assignments per month.
<b>Performance Target</b>	95% of individual IAIU workers shall have a caseload (a) no more than 12 open cases, and (b) no more than eight new case assignments per month.

***Performance as of December 31, 2016:***

DCF data show 100 percent of individual workers maintained the IAIU caseload standard for the period of July through December 2016.

**Supervisory Ratio**

<b>Quantitative or Qualitative Measure</b>	2. <u>Supervisor/Worker Ratio</u> : Local Offices shall have sufficient supervisory staff to maintain a five worker to one supervisor ration.
<b>Performance Target</b>	95% of Local Offices shall have sufficient supervisory staff to maintain a five worker to one supervisor ration.

***Performance as of December 31, 2016:***

Performance data for July through December 2016 show that 100 percent of CP&P Local Offices had sufficient supervisors to maintain ratios of five workers to one supervisor.

The Monitor verified the state's reported information about supervisor/worker ratios by asking all 131 workers who participated in the telephone interviews about the size of their units for the month of December 2016; 124 (95%) workers reported being in units of five or fewer workers with a supervisor.

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<sup>139</sup> Reported performance is the average of DCF's performance in meeting individual caseload standards during this six month monitoring period.

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## M. DAsG STAFFING

<b>Quantitative or Qualitative Measure</b>	7. <u>DAsG Staffing</u> : The State will maintain adequate DAsG staff positions and keep positions filled.
<b>Performance Target</b>	DCF will maintain adequate staffing levels at the DAsG office.

### *Performance as of December 31, 2016:*

As of December 31, 2016, 133 DAsG staff positions assigned to work with DCF were filled. Of those, five DAsG were on full time leave. Thus, there are a total of 128 (96%) available DAsG. DCF reports that in addition to these positions, DAsG outside of the DCF Practice Group have dedicated some of their time to DCF matters. DCF continues to meet this SEP standard for this measure.

## N. ACCOUNTABILITY THROUGH QUALITATIVE REVIEW AND THE PRODUCTION AND USE OF ACCURATE DATA

### QUALITATIVE REVIEW

New Jersey's Qualitative Review (QR) is an assessment of the status of children, the status of practice and the functioning of systems in each of the counties. The protocol and process used for the QR are aligned with DCF's CPM. Select QR results related to both Child (Youth)/Family Status and Practice Performance are also used to report on several SEP requirements included in this report.

When conducting a QR involving children under age 18, the child's legal guardian is asked to give informed consent for participation in the QR. Trained review teams of two persons including DCF staff, community stakeholders and staff from the Monitor's office review CP&P case records and interview as many people as possible who are involved with the child and family. The results from reviews provide critical qualitative data on child and family status and system performance. A rigorous quality review process is in place and is an important part of each review. Immediately following the review in each county, areas of accomplishment and challenges for the system are identified and discussed to inform continued case practice improvement. Findings from the QRs are also incorporated into existing training and supervisory tools.

During CY 2016, DCF reviewed 195 cases from 10 counties.<sup>140</sup> Table 7 provides the gender, age and racial and ethnic demographics of the 195 children. Fifty of the children were living with a parent at the time of the review and 145 of the children lived with a relative or non-relative resource parent.

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<sup>140</sup> Qualitative Reviews were conducted in Burlington, Essex, Gloucester, Hudson, Hunterdon, Mercer, Monmouth, Passaic, Salem and Union.



**Table 7: Qualitative Review: Gender, Age and Race/Ethnicity Demographics  
(January – December 2016)  
(N=195)**

<b>Gender</b>	<b>Number of Cases</b>	<b>Percentage of Cases</b>
Male	93	48%
Female	102	52%
<b>Total</b>	195	100%
<b>Age</b>	<b>#</b>	<b>%</b>
4 years or less	68	35%
5-9 years	39	20%
10-13 years	32	16%
14 -17 years	24	12%
18-21 years	32	16%
<b>Total</b>	195	
<b>Race/Ethnicity</b>	<b>#</b>	<b>%</b>
White/Caucasian	110	56%
African American	95	49%
Hispanic	53	27%
Native Hawaiian	0	0%
American Indian	2	>1%
Asian	3	>1%
Unable to Determine/Unknown	2	>1%

Source: DCF data

DCF reports that 1,890 individuals were interviewed across the state to inform the QR data for this reporting period. The informants for the QR include CP&P and Child Health Unit staff, biological parents, others who the youth or parent identified as supportive, relative and non-relative resource parents, education providers, mental health and legal professionals, substance abuse treatment providers and children/youth.<sup>141</sup>

Reviewers evaluate the child and family’s status on a range of indicators and rate whether the status was acceptable or unacceptable. See Table 8 for the results on each child and family status indicator and overall child and family status ratings for all cases for January through December 2016. Child and family status indicators cover key areas of safety, stability in school, living arrangement, learning and development and physical health of the child. As shown in Table 8, the *overall child and family status* was rated acceptable in 181 (93%) of cases reviewed, with separate ratings on specific child and family status indicators ranging from 71 percent (*family functioning and resourcefulness*) to 99 percent (*learning and development, under age 5*).

<sup>141</sup> Interviews are usually conducted individually with participants, either by phone or in person. All efforts are made to see children/youth in the setting in which they reside.

**Table 8: Qualitative Review: Child and Family Status Results  
(January – December 2016)**

<b>Child &amp; Family Status Indicators</b>	<b>Number of Applicable Cases</b>	<b>Number of Acceptable Cases</b>	<b>Percentage of Acceptable Cases</b>
Safety at Home	195	191	98%
Safety in other Settings	195	189	97%
Stability at Home	195	164	84%
Stability in School	135	123	91%
Living Arrangement	195	187	96%
Family Functioning & Resourcefulness	190	135	71%
Progress towards Permanency	195	142	73%
Physical Health of the Child	195	192	98%
Emotional Well-Being	195	181	93%
Learning & Development, Under Age 5	69	68	99%
Learning & Development, Age 5 & older	119	111	93%
<b>OVERALL Child &amp; Family Status</b>	195	181	93%

Source: DCF data

Table 9 shows the results of the QR ratings for system and practice performance indicators from reviews conducted January through December 2016. As with the status indicators, reviewers evaluated whether performance was acceptable or unacceptable. This is the first annual report measuring indicators under DCF’s new QR process and protocol.<sup>142</sup>

The Overall Practice/System Performance was rated acceptable in 57 percent (112 of 195) of cases, with separate ratings on specific indicators ranging from 22 percent (*engagement with fathers*) to 98 percent (*provision of health care services*). Ratings for the *family teamwork and coordination* (49%), *successful transitions* (66%) and *case planning* (54%) indicators remain below acceptable standards. QR performance in CY 2016 cannot be compared to results from the CY 2015 QR due to changes in the protocol. The Monitor, however, remains concerned about the considerably low Practice/System Performance ratings in many key areas.

<sup>142</sup> In CY 2015 DCF updated key portions of the state’s QR process and protocol, as described in the previous monitoring report. Changes to the QR protocol include: (1) combination of *team functioning* and *team formation* indicators into one indicator, *teamwork and coordination* (2) exclusion of the *overall* indicator for all practice performance indicators (3) rating mothers and fathers separately in the practice performance indicators (4) removal of the *family supports* indicators for the practice performance indicators and (5) replacement of the *transitions and life adjustment* indicator with *successful transitions* indicator.

**Table 9: Qualitative Review: Practice/System Performance Results  
(January – December 2016)**

Practice Performance Indicators		# Cases Applicable	# Cases Acceptable	% Acceptable
Engagement	Child/Youth	118	99	84%
	Mother	134	80	60%
	Father	115	40	35%
	Resource Family	117	103	88%
Family Teamwork	Teamwork & Coordination	146	72	49%
Assessment & Understanding	Child/Youth	195	150	77%
	Mother	136	52	38%
	Father	115	25	22%
	Resource Family	117	108	92%
Case Planning Process		195	106	54%
Plan Implementation		195	116	59%
Tracking & Adjusting		195	123	63%
Provision of Health Care Services		195	191	98%
Resource Availability		195	166	85%
Family & Community Connections	Mother	85	66	78%
	Father	69	34	49%
	Siblings	35	31	89%
Successful Transitions		133	88	66%
Long Term View		195	100	51%
<b>OVERALL Practice/System Performance</b>		<b>195</b>	<b>112</b>	<b>57%</b>

Source: DCF data

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## O. NEEDS ASSESSMENT

<b>Quantitative or Qualitative Measure</b>	21. <u>Needs Assessment</u> : The State shall regularly evaluate the needs for additional placements and services to meet the needs of children in custody and their families, and to support intact families and prevent the needs for out-of-home care. Such needs assessments shall be conducted on an annual, staggered basis that assures that every county is assessed at least once every three years.
<b>Final Target</b>	The State shall develop placements and services consistent with the findings of these needs assessments.

DCF, in partnership with the Institute for Families at Rutgers University School of Social Work, has been engaged in a multi-year needs assessment process to identify the strengths and needs of families with children at risk of entering out-of-home placement and those already in care.

Phase I of the DCF's Needs Assessment process involved a review of DCF internal reports and assessments completed by the Department and its partners from CY 2008 to CY 2014 to identify common needs across practice areas, including child maltreatment reporting as well as the provision of services for families with children in the home and in out-of-home placement. DCF published a detailed description of its Phase I activities in its *Needs Assessment: Interim Report* completed in December 2014 and available on DCF's website (See Table 1B).<sup>143</sup>

DCF published its Phase II activities and findings in its *DCF Needs Assessment 2015: Interim Report* on its website in March 2016.<sup>144</sup> The seven categories the state identified as areas of need are: caregiver mental health, caregiver substance abuse, child mental health, child substance abuse, poverty, housing and domestic violence.<sup>145</sup>

In Phase III of the Needs Assessment process, in order to further understand the needs of children and families involved or at risk of involvement with DCF, researchers at the Rutgers School of Social Work conducted interviews and focus groups with family members, staff and contracted service providers – involving a total of 170 participants – to elicit information about the strengths, needs, gaps and barriers related to DCF's provision of services. Between July and December 2016, Rutgers reviewed transcripts from the focus groups and interviews, and analyzed and coded themes that emerged from this qualitative data. DCF also examined the particular needs and issues facing families with multiple needs and/or frequent contact with the child welfare system. DCF released a report on Phase III of the process was released in May 2017.<sup>146</sup> In that report, DCF synthesized findings from its Phase III qualitative data into a set of general themes, each of which relate to the previously identified ten domains.

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<sup>143</sup> DCF's Needs Assessment: Interim Report 2015 can be found here:

[http://www.state.nj.us/dcf/childdata/continuous/DCF\\_Needs\\_Assessment\\_Interim-Report.pdf](http://www.state.nj.us/dcf/childdata/continuous/DCF_Needs_Assessment_Interim-Report.pdf)

<sup>144</sup> DCF's Needs Assessment: Interim Report 2016 can be found here:

[http://nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Interim.Report\\_3.16.pdf](http://nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Interim.Report_3.16.pdf)

<sup>145</sup> Since Phase II of the Needs Assessment Process, DCF has added three new domains: justice system-involved children and caregivers, challenging populations (defined as populations especially challenging to serve across several need domains, including low-income and undocumented families) and multi-need, frequent contact families.

<sup>146</sup> DCF's Needs Assessment 2016 Report #2: Qualitative Findings can be found here:

[http://www.nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Quality.Report\\_4.17.pdf](http://www.nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Quality.Report_4.17.pdf)

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General themes include:

- Caregivers need services that help them maintain their recovery over time;
- Caregivers need mental health services that address co-occurring issues;
- Families impacted by domestic violence need a comprehensive service array;
- Children need consistent, individualized mental health services;
- Children need trauma-informed mental health services;
- Caregivers need stable housing when children are in out-of-home placement;
- Dually-involved children need coordination between the juvenile justice and child welfare systems;
- Multi-need, frequently-encountered caregivers need help coping with complex life situations;
- DCF staff and contracted service providers need help knitting together fragmented services to address complex family needs.

Between July and December 2016, based on findings from the interviews, focus groups and administrative data from Phases I through III, DCF and the Rutgers research team began to develop a survey to administer to families of a randomly selected statewide sample of approximately 300 target children. Parents and caseworkers of the sample of children will serve as the main informants of this portion of Phase IV of the Needs Assessment process. The final report, synthesizing data and information from all four phases of the Needs Assessment process and focusing on regional and statewide system issues and recommendations is anticipated to be completed by December 2017.

## **P. FISCAL YEAR BUDGET**

The Governor's proposed FY 2018 budget, effective July 1, 2017, is \$1.190 billion in state funds, an increase of .6% over the FY 2017 adjusted appropriation of \$1.183 billion. The budget includes \$32 million for Intensive In-Home Behavioral Assistance and \$5.7 million for Care Management Organizations. Increases to these services reflect DCF's success in treating children earlier and in communities and homes, resulting in a \$15.1 million savings in Out-of-Home Treatment Services.

DCF leadership has indicated that the proposed FY 2018 budget provides sufficient funds to carry out the state's responsibilities for child protection; children's mental health; services to support children in their own homes and in out-of-home placement; and to achieve the SEP outcomes related to children's safety, permanency and well-being.

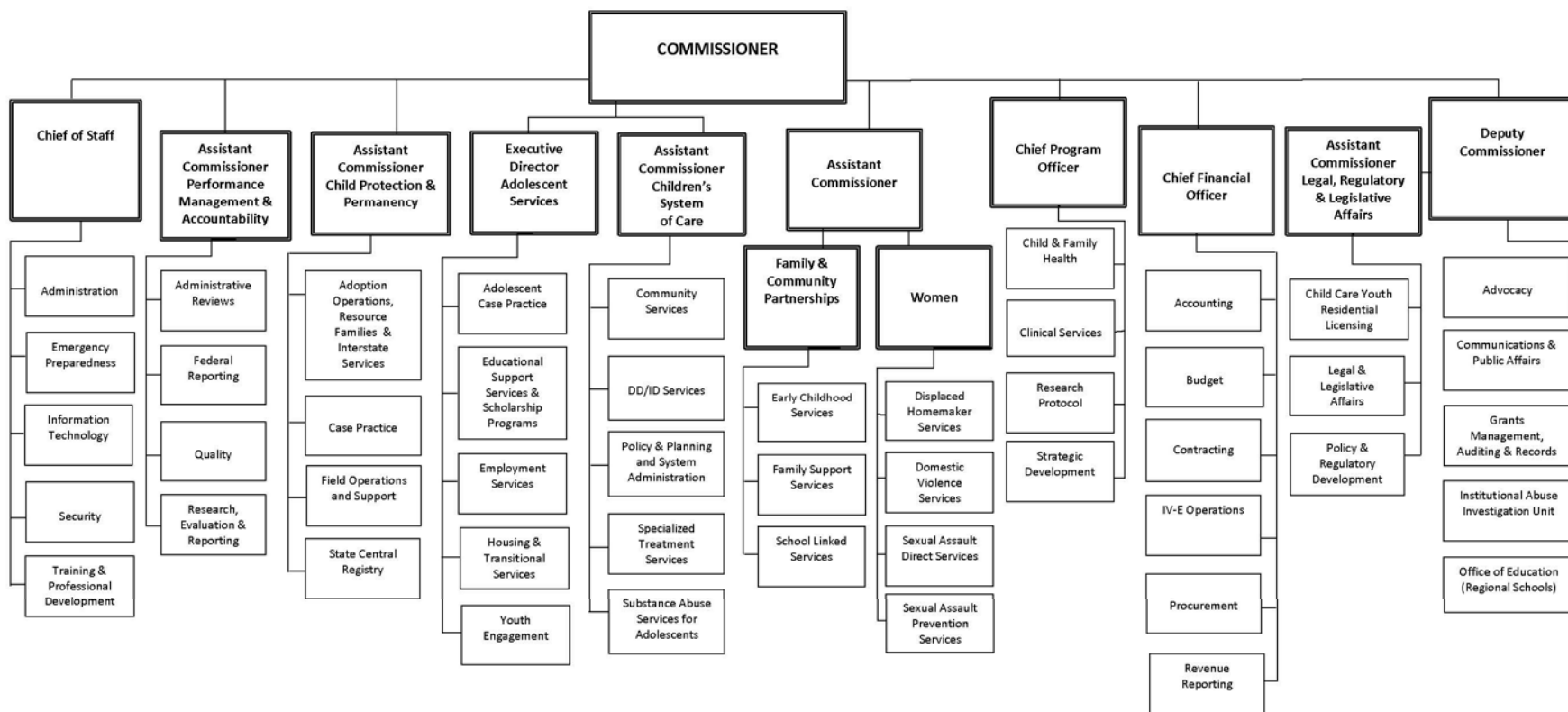
## APPENDIX: A-1

### Glossary of Acronyms Used in the Monitoring Report

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<b>ABC:</b>	A Better Childhood	<b>FTM:</b>	Family Team Meeting
<b>ACF:</b>	Administration for Children and Families	<b>FXB:</b>	Francois-Xavier Bagnoud Center
<b>AFCARS:</b>	Adoption and Foster Care Analysis and Reporting System	<b>HCCM:</b>	Health Care Case Management
<b>AIP:</b>	AFCARS Improvement Plan	<b>HMIS:</b>	Homeless Management Information System
<b>AQCs:</b>	Area Quality Coordinators	<b>IAIU:</b>	Institutional Abuse Investigative Unit
<b>BCWEP:</b>	Baccalaureate Child Welfare Education Program	<b>ILA:</b>	Independent Living Arrangement
<b>CAP:</b>	Corrective Action Plan	<b>KLG:</b>	Kinship Legal Guardian
<b>CCL:</b>	Child Care Licensing	<b>LGBTQI:</b>	Lesbian, Gay, Bisexual, Transgender, Questioning or Intersex
<b>CFSR:</b>	Child and Family Service Review	<b>LO:</b>	Local Office
<b>CHEC:</b>	Comprehensive Health Evaluation for Children	<b>LOM:</b>	Local Office Manager
<b>CHU:</b>	Child Health Unit	<b>MEYA:</b>	Medicaid Extension for Youth Adults
<b>CIC:</b>	Children in Court	<b>MH:</b>	Mental Health
<b>CIACC:</b>	Children's Interagency Coordinating Council	<b>MSA:</b>	Modified Settlement Agreement
<b>CLSA:</b>	Casey Life Skills Assessment	<b>MST:</b>	Multi-systemic Therapy
<b>CME:</b>	Comprehensive Medical Examination	<b>NCANDS:</b>	National Data Archive on Child Abuse and Neglect
<b>CMO:</b>	Case Management Organizations	<b>NJCAN:</b>	New Jersey Career Assistance Navigator
<b>CMS:</b>	Centers for Medicare and Medicaid Services	<b>NJS:</b>	New Jersey Spirit
<b>CBT:</b>	Cognitive Behavioral Therapy	<b>NRCRRFAP:</b>	National Resource Center for Recruitment and Retention of Foster and Adoptive Parents
<b>CPM:</b>	Case Practice Model	<b>NYTD:</b>	National Youth in Transition Database
<b>CPS:</b>	Child Protective Services	<b>OAS:</b>	Office of Adolescent Services
<b>CQI:</b>	Continuous Quality Improvement	<b>OCHS:</b>	Office of Child Health Services
<b>CSA:</b>	Contracted System Administrator	<b>OCQI:</b>	Office of Continuous Quality Improvement
<b>CSOC:</b>	Children's System of Care	<b>OESP:</b>	Office of Educational Support and Programs
<b>CSSP:</b>	Center for the Study of Social Policy	<b>OIT:</b>	New Jersey Office of Information Technology
<b>CWPPG:</b>	Child Welfare Policy and Practice Group	<b>OOE:</b>	Office of Education
<b>CWS:</b>	Child Welfare Services	<b>OOL:</b>	Office of Licensing
<b>CWTA:</b>	Child Welfare Training Academy	<b>ORF:</b>	Office of Resource Families
<b>CYBER:</b>	Child Youth Behavioral Electronic Health Record	<b>OTARY:</b>	Outreach to At-Risk Youth
<b>DAG:</b>	Deputy Attorney General	<b>PALS:</b>	<i>Peace: A Learned Solution</i> , program for victims of domestic violence
<b>DCA:</b>	Department of Community Affairs	<b>PIP:</b>	Performance Improvement Plan
<b>DCF:</b>	Department of Children and Families	<b>PMA:</b>	Office of Performance Management and Accountability
<b>CP&amp;P:</b>	Division of Child Protection and Permanency	<b>PPA:</b>	Pre-placement Assessment
<b>DD:</b>	Developmental Disability	<b>QA:</b>	Quality Assurance
<b>DDD:</b>	Division of Developmental Disabilities	<b>QR:</b>	Qualitative Review
<b>DDHH:</b>	Division of the Deaf and Hard of Hearing	<b>RDTC:</b>	Regional Diagnostic and Treatment Center
<b>DD/MI:</b>	Developmental Disability/Mental Illness	<b>RFL:</b>	Resource Family Licensing
<b>DFCP:</b>	Division of Family and Community Partnerships	<b>RFP:</b>	Request for Proposal
<b>DHS:</b>	Department of Human Services	<b>RL:</b>	Residential Licensing
<b>DPCP:</b>	Division of Prevention and Community Partnerships	<b>SAFE:</b>	Structured Analysis Family Evaluation
<b>DR:</b>	Differential Response	<b>SCR:</b>	State Central Registry
<b>DYFS:</b>	Division of Youth and Family Services	<b>SDM:</b>	Structured Decision Making
<b>EDW:</b>	Electronic Data Warehouse	<b>SEP:</b>	Sustainability and Exit Plan
<b>EPSDT:</b>	Early and Periodic Screening, Diagnosis and Treatment	<b>SETC:</b>	State Employment and Training Commission
<b>ETV:</b>	Education and Training Voucher	<b>SIBS:</b>	Siblings in Best Settings
<b>FAFS:</b>	Foster and Adoptive Family Services	<b>SPRU:</b>	Special Response Unit
<b>FAFSA:</b>	Free Application for Federal Student Aid	<b>TF-CBT:</b>	Trauma Focused Cognitive Behavioral Therapy
<b>FDC:</b>	Family Development Credential	<b>TPR:</b>	Termination of Parental Rights
<b>FEMA:</b>	Federal Emergency Management Agency	<b>USDA:</b>	United States Department of Agriculture
<b>FFT:</b>	Functional Family Therapy	<b>YAB:</b>	Youth Advisory Board
<b>FQHC:</b>	Federally Qualified Health Center	<b>YEC:</b>	Youth Employment Coordinator
<b>FSC:</b>	Family Success Centers		
<b>FSO:</b>	Family Support Organizations		
<b>FSS:</b>	Family Service Specialist		
<b>FTE:</b>	Full-Time Equivalent		

## Appendix: B-1 DCF Organizational Chart Department of Children and Families



As of May 19, 2016