

February 5, 2019

CHARLIE AND NADINE H. V. MURPHY

PROGRESS OF THE NEW JERSEY  
DEPARTMENT OF CHILDREN AND FAMILIES

MONITORING PERIOD XXII  
(JANUARY 1 – JUNE 30, 2018)



**Center for the  
Study of  
Social Policy**  
Ideas into Action

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

**Monitoring Period XXII Report for  
*Charlie and Nadine H. v. Murphy*  
January 1 – June 30, 2018**

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## I. INTRODUCTION

The Center for the Study of Social Policy (CSSP) was appointed in 2006 by the Honorable Stanley R. Chesler of the United States District Court for the District of New Jersey as Federal Monitor of the class action lawsuit *Charlie and Nadine H. v. Murphy*, aimed at improving outcomes for children, youth and families served through New Jersey's child welfare system. As the 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 sixth monitoring report measuring progress under the SEP and includes performance data for the period January 1 through June 30, 2018.<sup>1</sup>

### Monitoring Methodology

The Monitor's public reports cover six-month periods.<sup>2</sup> The primary sources of information on New Jersey's progress are quantitative and qualitative data supplied by the Department of Children and Families (DCF) and independently validated by the Monitor. DCF provides access to staff at all levels to enable the Monitor to verify performance.

DCF's capacity to accurately collect and analyze data and make it regularly available to the public has significantly grown over the past several years. The Monitor first looks to the state's data for analysis and validates its accuracy. The Monitor also retains the authority to engage in independent data collection and analysis where needed. Reflecting its increased capacity, DCF's intent is to continue to expand the data that it publishes on its public website.<sup>3</sup> DCF also now publishes data regularly on the publicly accessible New Jersey Child Welfare Data Hub, which was developed in collaboration with Rutgers University.<sup>4</sup> The Data Portal, launched in November 2016, allows users to create customized charts and graphs using New Jersey's child welfare data, and incorporates information from the formerly produced quarterly DCF Demographics Report.

DCF currently publishes on its website, including:

- 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.
- 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.

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<sup>1</sup> Copies of all Monitoring Reports can be found at: <https://cssp.org/publications-resources/>

<sup>2</sup> The exceptions to this time frame were Monitoring Period XIII, which covered July 1, 2012 through March 31, 2013; Monitoring Period XIV, which covered April 1 through December 31, 2013; and Monitoring Period XVII, which covered January 1 through December 31, 2015.

<sup>3</sup> To see DCF's public website, go to: <http://www.state.nj.us/dcf/about/>

<sup>4</sup> To see the New Jersey Child Welfare Data Hub, go to: <https://njchilddata.rutgers.edu/#home>

<sup>5</sup> To see all Commissioner's Monthly Reports, go to: <http://www.nj.gov/dcf/childdata/continuous/>

<sup>6</sup> To see all Screening and Investigations Reports, go to: <http://www.nj.gov/dcf/childdata/protection/screening/>

- Workforce Report<sup>7</sup> – *To be produced annually; last report dated January 2018.* This report provides information regarding the demographics and characteristics of current workers, as well as a variety of indicators of workforce planning and development, using fiscal year (FY) (July 1 – June 30) data.
- Children’s Interagency Coordinating Council Report<sup>8</sup> – *Current and produced monthly.* This report details referral and service activity for CSOC. It also includes demographics, referral sources, reasons, resolutions and services provided.
- New Jersey Youth Resource Spot<sup>9</sup> – *Ongoing and updated as relevant.* This website offers the latest resources, opportunities, news and events for young people. This site includes a list of current Youth Advisory Boards (YAB), as well as additional resources available in each county and statewide.
- DCF Needs Assessment – *Previously produced annually. Last report dated March 2018.* During its multi-year needs assessment process, DCF produced annual reports on its website and reported twice annually to the Monitor.<sup>10</sup> The most recent report, entitled *DCF Needs Assessment 2018 Report #3: Survey Findings and Synthesis*, updates interim findings to identify the resources needed to serve families with children at risk for entering out-of-home placement and those already in placement.<sup>11</sup> The SEP requires reports to evaluate the need for additional placements and services to meet the needs of children, youth and their families involved with DCF, with each county assessed at least once every three years. Going forward, DCF is designing a new Needs Assessment process and the Monitor will report on the new process in the next monitoring report.

DCF previously produced a series of public reports on selected components of its work as part of its accountability and data transparency efforts.<sup>12</sup> DCF leaders are planning to modify this public reporting process with a goal of consolidating individual reports. The changes will likely be developed and reported on in the next monitoring period.

The Monitor engaged in the following verification activities for data collected from January – June 2018.

- **Caseload Data Verification**

The Monitor conducted a telephone survey in May and June 2018 of 49 randomly selected workers to verify their individual caseloads during the monitoring period. Findings from this review are discussed in Section V.L – Caseloads – of this report.

<sup>7</sup> To see DCF’s Workforce Report: 2016-2017 Updates, go to <http://www.nj.gov/dcf/childdata/exitplan/NJ.DCF.Workforce.Report-FY17.pdf>. To see DCF’s 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 all Children’s InterAgency Coordinating Council Reports, go to: <http://www.nj.gov/dcf/childdata/interagency/>

<sup>9</sup> To see New Jersey’s Youth Resource Spot, go to: <http://www.njyrs.org/>

<sup>10</sup> To see the prior CP&P Needs Assessment reports, go to: <http://www.nj.gov/dcf/childdata/protection/>

<sup>11</sup> To see New Jersey’s CP&P Final Needs Assessment 2018 Report #3: Survey Findings and Synthesis, go to:

<http://www.nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Phase.IV.Report-March2018.pdf>

<sup>12</sup> To see New Jersey’s Adoptions Report, go to: <http://www.nj.gov/dcf/childdata/exitplan/AdoptionReport2016.pdf>. To see New Jersey’s Child Welfare Outcomes Report go to: <http://www.nj.gov/dcf/childdata/exitplan/Outcomes.Report.and.Executive.Summary-2017.pdf>. To see New Jersey’s Healthcare of Children in Out-of-Home Placement 2017 report, go to:

[http://www.nj.gov/dcf/news/reportsnewsletters/dcfreportsnewsletters/2017\\_Child.Health.Report.pdf](http://www.nj.gov/dcf/news/reportsnewsletters/dcfreportsnewsletters/2017_Child.Health.Report.pdf). To see DCF’s Our Work with Children, Youth and Families 2017 Report, go to: <http://www.nj.gov/dcf/childdata/exitplan/Our.Work.with.Children.Young.Adults.and.Families-2017.pdf>

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

The Monitor collaborated with DCF to review case records of 50 youth age 18 to 21 who exited care between January 1 and June 30, 2018 without achieving permanency. The review focused on the housing, education and employment status of these youth. Findings from the review are discussed in Section V.J – Older Youth – of this report.

- **Family Team Meeting Data Review**

The Monitor collaborated with DCF to review experiences of 180 children and families to verify instances in which workers determined that Family Team Meetings (FTMs) were not required when parents were unavailable, missing or declined the meeting. DCF and the Monitor reviewed all cases of documented exceptions to the FTM requirement in each month of the monitoring period. Further discussion of current performance on these measures is included in Section V.B – Family Team Meetings – of this report.

- **Visits Data Review**

The Monitor collaborated with DCF to review case records of 251 children from March and April 2018 in which workers documented that caseworker contacts with parents with a reunification goal (SEP IV.F.28) were not required because a parent was unavailable or there were other circumstances outside of their control that prevented visits from occurring. The Monitor also collaborated with DCF to review records of 234 children from April, May and June 2018 in which workers documented that sibling visits (SEP IV.F.31) were not required because a child declined, a sibling was unavailable or there were other circumstances outside of their control that prevented a visit. Findings are discussed in Section V.E – Visits – 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 attended DCF's ChildStat meetings and adolescent practice forums. The Monitor participates as reviewers in almost every scheduled statewide Qualitative Review (QR) 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 provides an overview of the state's accomplishments and challenges during this monitoring period. 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. Murphy* Child and Family Outcome and Case Practice Performance Measures. Section IV provides information related to the SEP Foundational Elements.<sup>13</sup> Section V provides more detailed data and discussion of performance on SEP Outcomes *To Be Maintained* and Outcomes *To Be Achieved* in the following areas:

- Investigations of alleged child maltreatment (Section V.A);
- Implementation of DCF's Case Practice Model; including Family Team Meetings, case planning and visits (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 (Section V.F);
- 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, youth and families (Section V.I);
- Services to older youth (Section V.J);
- Caseloads (Section V.L);
- Deputy Attorneys General 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 2019 budget (Section V.P).

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<sup>13</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).

## II. SUMMARY OF PERFORMANCE DURING JANUARY THROUGH JUNE 2018

This monitoring period has been one of transition, change and growth for the Department of Children and Families (DCF). After her confirmation, Commissioner Christine Norbut Beyer undertook a broad assessment of the Department, reviewing performance data, speaking with staff across all offices and levels, and conducting an analysis of departmental function, programs and budget.

The Commissioner also assembled a new leadership team, including Doris N. Windle, Chief of Staff; Katherine Stoehr, Deputy Commissioner of Operations; Bonny Fraser, Deputy Commissioner for Legal, Regulatory and Legislative Affairs; Carmen Diaz-Petti, Assistant Commissioner for the Division of Child Protection; Suzanne Alvino, Administrator of the Office of Training and Professional Development; and Vilma Ramos, Deputy Director of Case Practice. The team has identified key strategies and goals, primary among them ensuring that the children and families of New Jersey are safe, healthy and connected. The areas identified as necessary to advance this agenda include: attention to intra-departmental integration; reinforcement of New Jersey's Case Practice Model (CPM); increased use of kinship care; expanding prevention opportunities; and focusing on staff well-being.

Commissioner Beyer's overarching focus on quality practice is centered on renewed attention to the values, principles and practices embedded in New Jersey's CPM. The CPM, developed in 2007 as a foundational part of New Jersey's reform effort, is a strength-based and family-centered approach to quality case practice that requires intensive engagement with children, youth and families through teamwork and crafting of individualized case plans.

The work of the Case Practice Liaisons (CPLs) and the Area Quality Coordinators (AQC)s – which are part of the Division of Child Protection and Permanency (CP&P) – have supported the focused work on quality practice. During the monitoring period, CPLs continued efforts to develop Local Office leadership as Family Team Meeting (FTM) coaches and master coaches capable of embodying DCF's CPM in daily work. They have focused in particular on the quality of FTMs, visits and case plans, and on engaging parents in the teaming and planning process. CPLs and FTM coordinators meet on an ongoing basis to discuss each area's trends, strengths and areas needing improvement.

The Commissioner's focus on keeping families safe, healthy and connected also involves a renewed emphasis on placing children with family and a dedication to providing services in the community to reduce the need for foster care placement. As part of its commitment to prevention, DCF, in collaboration with Advocates for Children of New Jersey (ACNJ), has been convening critical stakeholders regarding New Jersey's prevention and family preservation strategy, including opportunities now available through new federal legislation – *The Family First Prevention Services Act*.<sup>14</sup> The legislation establishes a new federal funding structure that allows states to be reimbursed for prevention services for up to 12 months to help “candidates for foster care” safely remain with their parents or relatives. The new law also provides financial incentives for reducing congregate care placements and requires child welfare group homes and congregate care facilities to meet new licensing and accreditation standards.

While implementing its new focus on quality practice, DCF maintained performance on each of the SEP Foundational Elements in such important areas as manageable caseloads for workers, training, and the provision of health care for children in out-of-home placement. DCF began and ended the current monitoring period

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<sup>14</sup> H.R.253 - Family First Prevention Services Act of 2017

having met 41 of 48 SEP performance measures.<sup>15,16</sup> Of the seven remaining Outcomes *To Be Achieved*, five are not assessed in this report because they are based on data that are collected and reported annually.<sup>17</sup> Two of the remaining Outcomes *To Be Achieved* are assessed in this report: visitation between workers and parents when a child's goal is reunification; and visits between children and siblings when they are placed apart.<sup>18</sup> DCF's work to improve the consistency of quality case practice through a renewed commitment to the state's CPM and authentic engagement with children, youth and families is expected to directly influence the remaining outcomes *To Be Achieved*, all of which are core elements of child welfare case practice.

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

FTMs are an integral component of DCF's case practice, as described above. FTMs are used to bring families, providers, formal and informal supports together to exchange information, participate in case planning, coordinate and follow up on services and examine and track progress toward accomplishing case plan goals. As discussed in Section V.B, the SEP includes five performance measures pertaining to FTMs, four of which have been previously met and designated as Outcomes *To Be Maintained*. DCF maintained satisfactory performance for these four measures, exceeding requirements for FTMs held within 45 days of a child's removal (SEP IV.B.16); for three additional FTMs after the initial meeting held within the first 12 months of placement (SEP IV.B.17); for at least three FTMs each year for children in care after 12 months with the goal of reunification (SEP IV.B.18); and for at least two FTMs each year for children in care after 12 months with a goal other than reunification (SEP IV.B.19). The remaining Outcome *To Be Achieved* is quality of teaming (SEP IV.B.20), which is measured through a qualitative review process and reported on an annual basis.

### ***Case Planning***

A key element of DCF's overall focus on improved quality practice is centered in improvements in case planning. During this monitoring period, staff conducted record reviews to assess the quality of case plans, Family Agreements and contact notes to better understand barriers or challenges to quality case and service planning. Going forward, the Department intends to orient case planning towards addressing a family's underlying needs rather than focusing on a list of services. This strategy is described in further detail in Section V.C.

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<sup>15</sup> These measures include: Institutional Abuse Investigations Unit (IAIU) (III.A.1); Timeliness of Investigation Completion (60 days) (SEP IV.A.13); Timeliness of Investigation Completion (90 days) (SEP IV.A.14); Quality of Investigations (SEP IV.A.15); Initial Family Team Meeting (SEP IV.B.16); Subsequent FTMs within 12 months (SEP IV.B.17); Subsequent FTMs after 12 months – Reunification Goal (SEP IV.B.18); Subsequent FTMs after 12 months – Other than Reunification Goal (SEP IV.B.19); Needs Assessment (SEP IV.C.21); Initial Case Plans (SEP IV.D.22); Supervisor/Worker Ratio (III.B.2); IAIU Investigators Caseload (III.B.3); Permanency Workers (Local Offices) Caseload (III.B.4); Permanency Workers Caseload (III.B.5); Intake Workers (Local Offices) (SEP IV.E.24); Intake Workers (SEP IV.E.25); Adoption Local Office Caseload (SEP IV.E.26); Adoption Workers (SEP IV.E.27); Timeliness of Current Plans (III.C.6); Adequacy of DAsG Staffing (III.D.7); Child Health Units (III.E.8); Parent-Child Visits – weekly (SEP IV.F.29); Parent-Child Visits – bi-weekly (SEP IV.F.30); Caseworker Contacts with Children – New Placement/Placement Changes (III.F.9); Caseworker Contact with Children in Placement (III.F.10); Placing Siblings Together (SEP IV.G.32); Placing Siblings Together for Four or More Children (SEP IV.G.33); Recruitment of Placements for Sibling Groups of Four or More (SEP IV.G.34); Placement Stability for first 12 months in care (SEP IV.G.35); Placement Stability 13-24 Months in Care (SEP IV.G.36); Educational Needs (III.G.11); Abuse and Neglect of Children in Foster Care (III.H.12); Repeat Maltreatment (In-home) (SEP IV.H.37); Maltreatment Post-Reunification (SEP IV.H.38); Permanency within 12 Months (SEP IV.I.40); Permanency within 36 months (SEP IV.I.42); Permanency within 48 months (SEP IV.I.43); Independent Living Assessments (SEP IV.K.45); Quality of Case Planning and Services (SEP IV.K.46); Housing for Older Youth Exiting to Non-Permanency (SEP IV.K.47); and Employment/Education for Older Youth Exiting to Non-Permanency (SEP IV.K.48).

<sup>16</sup> Housing for Older Youth Exiting to Non-Permanency (SEP IV.K.47) and Employment/Education for Older Youth Exiting to Non-Permanency (SEP IV.K.48) were not met this monitoring period, though the Monitor will wait to review data from the period July 1 through December 31, 2018 before recommending a change in categorization for these measures.

<sup>17</sup> These measures are: Quality of Teaming (SEP IV.B.20); Quality of Case Plans (SEP IV.D.23); Services to Support Transition (SEP IV.J.44); Re-Entry to Placement (SEP IV.H.39); Permanency within 24 Months (SEP IV.I.41). The Monitor will report on updated data for these measures in the next monitoring report.

<sup>18</sup> These measures are: Caseworker Contacts with Family when Goal is Reunification (SEP IV.F.28); and Sibling Visits (SEP IV.F.31).

The SEP requires the development of timely case plans within 30 days of placement. This measure had previously been designated as an Outcome *To Be Maintained*, but then performance dropped below the SEP standard for three consecutive monitoring periods. As a result, the Monitor had asked for a corrective action plan in the previous monitoring period. Between January and June 2018, performance improved and DCF met the standard in five of six months. This is a significant improvement and an indication that the corrective actions put in place were successful in diagnosing and improving practice.

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

DCF continues to maintain a solid pool of placement resource homes and group settings to meet the needs of children in out-of-home care. As of June 30, 2018, 6,054 children were in out-of-home placement, of which 5,707 were children between the ages of zero and 17, and 347 were between the ages of 18 and 21. Of the 6,054 children, 5,472 (90%) were placed in family-like settings: 3,250 children (54%) in non-kinship resource family homes, and 2,222 children (37%) in kinship homes. For those in non-family settings, 481 children (8%) were placed in group and residential settings facilities and 101 children (2%) were in independent living programs.

Between January and June 2018, DCF recruited and licensed 583 new kinship and non-kinship resource family homes; of these newly licensed resource family homes, 343 (59%) were kinship homes and 246 (42%) were non-kinship homes. As of June 30, 2018 there were a total of 4,343 licensed resource family homes in the state, with a total bed capacity for 9,216 children. Recruitment targeting and planning, with a particular focus on identifying and recruiting more kinship homes are described further in Section V.F.

### ***Visits with Children, Parents and Siblings***

Visits between children in foster care and their workers, parents and siblings are an essential element of successful child welfare practice. As discussed in Section V.E, there are six performance measures in the SEP related to visits, four of which have been previously met and designated as Outcomes *To Be Maintained*. DCF maintained satisfactory performance this monitoring period with respect to these four SEP measures, exceeding requirements for caseworker visits with children in both new and ongoing placements (SEP III.F.9 and III.F.10, respectively) and both weekly and biweekly visits between children and their parents (SEP IV.F.29 and IV.F.30, respectively). The two Outcomes *To Be Achieved*, caseworker contacts with families with a reunification goal (SEP IV.F.28) and sibling visits (SEP IV.F.31) do not yet meet the SEP performance standard.

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

DCF has continued its work to improve the experiences of older youth in its care through the Office of Adolescent Services (OAS). As discussed in Section V.J, the SEP includes four performance measures related to DCF's work with older youth, all of which were previously met and designated as Outcomes *To Be Maintained*. Between January and June 2018, DCF maintained satisfactory performance with respect to the quality of case planning and services for older youth (SEP IV.K.46), and in ensuring youth age 14 to 18 engage in Independent Living Assessments (SEP IV.K.45). Performance with respect to housing (SEP IV.K.47) and education and employment for youth exiting care without achieving permanency (SEP IV.K.48) declined and did not meet the SEP standard this monitoring period. Although the universe of cases to which this measure applies is small and susceptible to fluctuations, this decline in performance is of concern to the Monitor. The Monitor has asked DCF to evaluate its practice in this area so that any barriers can be identified and addressed. DCF has agreed to review the results from the case record reviews of older youth exiting care without achieving permanency in order to better understand these youth's needs in relation to available services, and to strategize improved practices to support older youth.

### *Continuous Quality Improvement*

DCF's new leadership team is planning to make significant changes to multiple facets of its continuous quality improvement (CQI) efforts. The two major quality review processes New Jersey has used have been the Qualitative Review (QR) and ChildStat. The QRs involve reviews of children's and family's experiences with DCF and include an assessment of the status of children, youth and families as well as the system's performance in a selected county. QRs take place during a single week and over the course of two years, occur in 21 counties and involve the review of a total of almost 400 children, youth and families. On a separate schedule, DCF was conducting monthly ChildStat meetings – a case conferencing forum in which one case is used as an opportunity to critically analyze practice, policy and procedure. Going forward, New Jersey plans to merge these processes toward creating a more focused county-level review. The Monitor will report in more detail on the plans for this change in the next monitoring report.

### 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<sup>19</sup> and SafeMeasures,<sup>20</sup> and, in some areas, these data are independently validated by the Monitor. Data are also provided through DCF's work with Rutgers University,<sup>21</sup> which assists with data analysis. With few exceptions, performance data provided in this report are as of June 2018.

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<sup>19</sup> NJ SPIRIT is New Jersey's Statewide Automated Child Welfare Information System (SACWIS), a case management and financial system designed to support the daily work of caseworkers and supervisors within DCF.

<sup>20</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.

<sup>21</sup> DCF transferred this function from Hornby Zeller Associates, Inc. to Rutgers in July 2017.

**Table 1: Charlie and Nadine H. Child and Family Outcome and Case Practice Performance Measures  
(Summary of Performance as of June 30, 2018)**

Table 1A: To Be Achieved					
SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>22</sup>	Requirement Fulfilled (Yes/No/Partially) <sup>23</sup>
<i>Family Teaming</i>					
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.	59% of cases rated acceptable on QR indicator <i>teamwork and coordination</i> (CY 2017). <sup>24</sup>	CY 2018 data not yet available. <sup>25</sup>	Not reported in this period.

<sup>22</sup> In some instances where the Monitor does not have June 2018 data, the most recent data available are included.

<sup>23</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. “No” indicates that, in the Monitor’s judgment, DCF has not fulfilled its obligation regarding the SEP requirement.

<sup>24</sup> CY 2017 data (most recent available) showed that 86 of the 145 (59%) applicable cases reviewed for Quality of Teaming were rated acceptable on the *teamwork and coordination* indicator. In-home cases were excluded from this measure.

<sup>25</sup> Qualitative Review data are reported by the Monitor on an annual basis and will be included in the next monitoring report.

**Table 1A: To Be Achieved**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>22</sup>	Requirement Fulfilled (Yes/No/Partially) <sup>23</sup>
<i>Case and Service Planning</i>					
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.	53% of cases rated acceptable on both QR indicators <i>child and family planning process</i> and <i>tracking and adjusting</i> (CY 2017). <sup>26</sup>	CY 2018 data not yet available. <sup>27</sup>	Not reported in this period.
<i>Visits</i>					
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 December 2017, 75% 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 2017 monitoring period: 72 to 77%.	In June 2018, 77% 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 2018 monitoring period: 76 to 80%. <sup>28,29</sup>	No

<sup>26</sup> CY 2017 data (most recent available) showed that 102 of the 193 (53%) in and out-of-home cases reviewed rated acceptable on both the *child and family planning process* and the *tracking and adjusting* indicators; 110 cases (57%) were rated acceptable on *child and family planning process* and 131 (68%) of cases were rated acceptable on *tracking and adjusting*.

<sup>27</sup> Qualitative Review data are reported by the Monitor on an annual basis and will be included in the next monitoring report.

<sup>28</sup> Monthly performance is as follows: January, 79%; February, 76%; March, 77%; April, 80%; May, 80%; June, 77%. Reported performance accounts for valid exceptions to the visits requirement.

<sup>29</sup> The Monitor and DCF completed a joint validation of a sample of two months in the monitoring period and found that exceptions were appropriately applied in 54% of cases. Therefore, these data reflect exclusions from the universe of cases of instances in which exceptions to the requirement for worker visits with parents were appropriately applied and documented.

**Table 1A: To Be Achieved**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>22</sup>	Requirement Fulfilled (Yes/No/Partially) <sup>23</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 December 2017, 80% of children in custody who have siblings with whom they are not residing visited their siblings within the month. Monthly range during July – December 2017 monitoring period: 74 to 80%.	In June 2018, 75% of children in custody who have siblings with whom they are not residing visited with their siblings within the month. Monthly range during January – June 2018 monitoring period: 74 to 80%. <sup>30,31</sup>	No
<b><i>Maltreatment</i></b>					
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 relative(s), or guardianship, no more than 9% will re-enter foster care within 12 months of their discharge.	For CY 2015, 11.2% of 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.	CY 2016 data not yet available.	Not reported in this period.

<sup>30</sup> Monthly performance is as follows: January, 77%; February, 74%; March, 75%; April, 80%; May, 77%; June, 75%. Reported performance accounts for valid exceptions to the visits requirement.  
<sup>31</sup> The Monitor and DCF completed a joint validation of a sample of three months and found that exceptions were appropriately applied and documented in 63% of cases. Therefore, these data reflect the exclusions of instances in which exceptions to the requirement for sibling visits were appropriately applied and documented. DCF has reported that current and past data for this measure may understate actual performance because the data do not account for some instances in which private providers facilitate sibling visits. The Monitor will work with DCF to validate the process and these additional data for inclusion in the next monitoring report.

**Table 1A: To Be Achieved**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>22</sup>	Requirement Fulfilled (Yes/No/Partially) <sup>23</sup>
<b><i>Timely Permanency</i></b>					
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.	For CY 2015, 64% 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.	CY 2016 data not yet available.	Not reported in this period.
<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.	59% of cases rated acceptable on QR indicator <i>successful transitions</i> (CY 2017). <sup>32</sup>	CY 2018 data not yet available. <sup>33</sup>	Not reported in this period.

<sup>32</sup> CY 2017 data (most recent available) showed that 75 of the 128 (59%) applicable cases reviewed were rated acceptable on the *successful transitions* indicator.

<sup>33</sup> Qualitative Review data are reported by the Monitor on an annual basis and will be included in the next monitoring report.

**Table 1B: To Be Maintained**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>34</sup>	Requirement Maintained (Yes/No) <sup>35</sup>
<i>Investigations</i>					
III.A.1	<u>Institutional Abuse Investigations Unit (IAIU)</u>	80% of IAIU investigations will be completed within 60 days.	In December 2017, 82% of IAIU investigations were completed within 60 days.	In June 2018, 87% of IAIU investigations 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 November 2017, 84% of all investigations were completed within 60 days. Monthly range during June 2017 – November 2017 monitoring period: 83 to 87%.	In May 2018, 85% of all investigations were completed within 60 days. Monthly range during December – May 2018 monitoring period: 85 to 86%. <sup>36</sup>	Yes
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 November 2017, 95% of all investigations were completed within 90 days. Monthly range during June – November 2017 monitoring period: 94 to 96%.	In May 2018, 95% of all investigations were completed within 90 days. Monthly range during December – May 2018 monitoring period remained consistent at 95%. <sup>37</sup>	Yes

<sup>34</sup> In some instances where the Monitor does not have June 2018 data, the most recent data available are included.

<sup>35</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.

<sup>36</sup> Due to the time lag of this measure, the Monitor and DCF decided to alter the period of review, so December 2017 data are included for this period and June 2018 data will be included in the next monitoring report. Monthly performance for this measure is as follows: December, 86%; January, 85%; February, 86%; March, 85%; April, 85%; May, 85%.

<sup>37</sup> Due to the time lag of this measure, the Monitor and DCF decided to alter the period of review, so December 2017 data are included for this period and June 2018 data will be included in the next monitoring report. Monthly performance for this measure remained consistent each month at 95%.

**Table 1B: To Be Maintained**

<b>SEP Reference</b>	<b>Quantitative or Qualitative Measure</b>	<b>Sustainability and Exit Plan Standard</b>	<b>December 2017 Performance</b>	<b>June 2018 Performance<sup>34</sup></b>	<b>Requirement Maintained (Yes/No)<sup>35</sup></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 of investigations completed in October 2017 found that 91% of investigations met quality standards. <sup>38</sup>	NA: quality measured through an Investigative Case Record Review, last conducted in March 2018. <sup>39</sup>	Not reported in this period.
<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 December 2017, 84% of children newly entering placement had a FTM within 45 days of entering placement. Monthly range during July – December 2017 monitoring period: 86% to 91%.	In June 2018, 85% of children newly entering placement had a FTM within 45 days of entering placement. Monthly range during January – June 2018 monitoring period: 85 to 90%. <sup>40</sup>	Yes

<sup>38</sup> The Monitor and DCF reviewed 331 investigations. Reviewers could select one of four possible responses to describe the quality of the investigation: completely, substantially, marginally and not at all. Completely and substantially responses are considered to have met quality standards. Results have a +/- 5% margin of error with 95% confidence.

<sup>39</sup> The Investigation Case Record Review is typically conducted every two years.

<sup>40</sup> Monthly performance for this measure is as follows: January, 86%; February, 87%; March, 87%; April, 85%; May, 90%; June, 85%. Reported performance accounts for valid exceptions to the FTM requirement. The Monitor and DCF jointly reviewed all 81 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 they determined that an exception was appropriately used.

**Table 1B: To Be Maintained**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>34</sup>	Requirement Maintained (Yes/No) <sup>35</sup>
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 December 2017, 83% of children had three or more additional FTMs within the first 12 months of placement. Monthly range during July – December 2017 monitoring period: 72 to 84%.	In June 2018, 78% of children had three or more additional FTMs within the first 12 months of placement. Monthly range during January – June 2018 monitoring period: 77 to 91%. <sup>41</sup>	Yes
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 December 2017, 85% of children with a goal of reunification had three or more FTMs after 12 months of placement. Monthly range during July – December 2017 monitoring period: 85 to 100%.	In June 2018, 95% of children with a goal of reunification had three or more FTMs after 12 months of placement. Monthly range during January – June 2018 monitoring period: 93 to 100%. <sup>42</sup>	Yes
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 December 2017, 100% of children with a goal other than reunification had two or more FTMs after 12 months of placement. Monthly range during July – December 2017 monitoring period: 88 to 100%.	In June 2018, 96% of children with a goal other than reunification had two or more FTMs after 12 months of placement. Monthly range during January – June 2018 monitoring period: 91 to 98%. <sup>43</sup>	Yes

<sup>41</sup> Monthly performance is as follows: January, 77%; February, 85%; March, 88%; April 91%; May, 86%; June, 78%. Reported performance accounts for valid exceptions to the FTM requirement. The Monitor and DCF jointly reviewed all 80 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 they determined that an exception was appropriately used.

<sup>42</sup> Monthly performance for this measure is as follows: January, 100%; February, 93%; March, 93%; April, 94%; May, 95%; June, 95%. Reported performance accounts for valid exceptions to the FTM requirement. The Monitor and DCF jointly reviewed all six 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 they determined that an exception was appropriately used.

<sup>43</sup> Monthly performance is as follows: January, 98%; February, 96%; March, 96%; April, 91%; May, 91%; June, 96%. Reported performance accounts for valid exceptions to the FTM requirements. The Monitor and DCF jointly reviewed all 21 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 they determined that an exception was appropriately used.

**Table 1B: To Be Maintained**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>34</sup>	Requirement Maintained (Yes/No) <sup>35</sup>
<i>Needs Assessment</i>					
IV.C.21	<u>Needs Assessment</u>	<p>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.</p>	<p>Between July and December 2017, DCF completed the final piece of the state’s multi-year Needs Assessment process. In order to further understand the needs and potential gaps in services for children, youth and families involved or at risk of involvement with DCF, researchers at the Child Well-Being Unit at Rutgers School of Social Work conducted almost 2,000 surveys with CP&amp;P intake and permanency unit staff, resource parents and families of origin.</p>	<p>In March 2018, DCF published the most recent report, <i>DCF Needs Assessment 2018 Report #3: Survey Findings and Synthesis</i>, that evaluated the information collected through surveys conducted by Rutgers School of Social Work. DCF leadership is determining how to utilize the findings to refine and improve its service array. Going forward, DCF has announced plans to redesign the Needs Assessment process.</p>	Yes

**Table 1B: To Be Maintained**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>34</sup>	Requirement Maintained (Yes/No) <sup>35</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.	In December 2017, 94% of children entering care had case plans developed within 30 days. Monthly range during July – December 2017 monitoring period: 89 to 95%.	In June 2018, 95% of children entering care had case plans developed within 30 days. Monthly range during January – June 2018 monitoring period: 94 to 99%. <sup>44</sup>	Yes
<b><i>Caseloads</i></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

<sup>44</sup> Monthly performance for this measure is as follow: January, 99%; February, 95%; March, 94%; April, 95%; May, 96%; June, 95%.

**Table 1B: To Be Maintained**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>34</sup>	Requirement Maintained (Yes/No) <sup>35</sup>
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>45</sup>	Yes
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.	97% of Local Offices met intake caseload standards.	96% of Local Offices met intake caseload standards.	Yes
IV.E.25	<u>Intake Workers Caseload</u>	90% of individual Intake workers 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.	96% of Intake workers met caseload standards.	95% of Intake workers met caseload standards. <sup>46</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.	97% of Local Offices met adoption standards.	98% of Local Offices met adoption standards.	Yes

<sup>45</sup> Reported performance is the average of DCF’s performance in meeting individual caseload standards during this six-month monitoring period.

<sup>46</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**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>34</sup>	Requirement Maintained (Yes/No) <sup>35</sup>
IV.E.27	<u>Adoption Workers Caseload</u>	95% of individual Adoption worker caseloads shall be no more than 15 children per worker.	98% of Adoption workers met caseload standards.	98% of Adoption workers met caseload standards. <sup>47</sup>	Yes
<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.	In December 2017, 97% of case plans were reviewed and modified as necessary at least every six months. Monthly range during July – December 2017 monitoring period: 92 to 97%.	In June 2018, 98% of case plans were reviewed and modified as necessary at least every six months. Monthly range during January – June 2018 monitoring period: 94 to 98%. <sup>48</sup>	Yes
<b>Deputy Attorneys General</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.	135 (100%) of 135 staff positions filled with nine staff on leave; 126 (93%) available DAsG. <sup>49</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 December 31, 2017, DCF had 170 Health Care Case Managers and 82 staff assistants.	As of June 30, 2018, DCF had 172 Health Care Case Managers and 85 staff assistants.	Yes

<sup>47</sup> Reported performance is the average of DCF’s performance in meeting individual caseload standards during this six-month monitoring period.

<sup>48</sup> Monthly performance on this measure is as follows: January, 98%; February, 95%; March, 94%; April, 97%; May, 96%; June, 98%.

<sup>49</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.

**Table 1B: To Be Maintained**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>34</sup>	Requirement Maintained (Yes/No) <sup>35</sup>
<i>Visits</i>					
IV.F.29	<u>Parent-Child Visits – Weekly</u>	60% of children in custody with a reunification 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 December 2017, 80% of applicable children had weekly visits with their parents. Monthly range during July – December 2017 monitoring period: 78 to 82%.	In June 2018, 79% of applicable children had weekly visits with their parents. Monthly range during January – June 2018 monitoring period: 78 to 82%. <sup>50,51</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 December 2017, 93% of applicable children had bi-weekly visits with their parents. Monthly range during the July – December 2017 monitoring period: 90 to 93%.	In June 2018, 92% of applicable children had bi-weekly visits with their parents. Monthly range during January – June 2018 monitoring period: 91 to 94%. <sup>52,53</sup>	Yes

<sup>50</sup> Monthly performance is as follows: January, 78%; February, 80%; March, 79%; April, 82%; May, 81%; June, 79%. Reported performance accounts for valid exceptions to this visits requirement.

<sup>51</sup> Based on the Monitor’s review of a statistically significant sample of cases in a prior monitoring period, the Monitor determined NJ SPIRIT documentation of exceptions with respect to this measure to be reliable. As a result, these data exclude all instances in which documentation indicated that a visit was not required.

<sup>52</sup> Monthly performance is as follows: January, 94%; February, 92%; March, 94%; April, 93%; May, 91%; June, 92%. Reported performance accounts for valid exceptions to this visits requirement.

<sup>53</sup> Based on the Monitor’s review of a statistically significant sample of cases in a prior monitoring period, the Monitor determined NJ SPIRIT documentation of exceptions with respect to this measure to be reliable. As a result, these data exclude all instances in which documentation indicated that a visit was not required.

**Table 1B: To Be Maintained**

<b>SEP Reference</b>	<b>Quantitative or Qualitative Measure</b>	<b>Sustainability and Exit Plan Standard</b>	<b>December 2017 Performance</b>	<b>June 2018 Performance<sup>34</sup></b>	<b>Requirement Maintained (Yes/No)<sup>35</sup></b>
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 December 2017, 94% 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 2017 monitoring period: 93 to 97%.	In June 2018, 90% 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 2018 monitoring period: 90 to 96%. <sup>54</sup>	Yes
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 December 2017, 96% of children had at least one caseworker visit per month in his/her placement. Monthly range during July – December 2017 monitoring period: 95 to 96%.	In June 2018, 95% of children had at least one caseworker visit per month in his/her placement. Monthly range during January – June 2018 monitoring period: 95 to 97%. <sup>55</sup>	Yes
<b><i>Placement</i></b>					
IV.G.32	<u>Placing Siblings Together</u>	At least 80% of siblings groups of two or three children entering custody will be placed together.	For CY 2017, 76% of sibling groups of two or three children entering custody were placed together.	CY 2018 data not yet available.	Not reported in this period.

<sup>54</sup> Monthly performance is as follows: January, 93%; February, 96%; March, 94%; April, 95%; May, 96%; June, 90%.

<sup>55</sup> Monthly performance is as follows: January, 97%; February, 95%; March, 96%; April, 96%; May, 95%; June, 95%.

**Table 1B: To Be Maintained**

<b>SEP Reference</b>	<b>Quantitative or Qualitative Measure</b>	<b>Sustainability and Exit Plan Standard</b>	<b>December 2017 Performance</b>	<b>June 2018 Performance<sup>34</sup></b>	<b>Requirement Maintained (Yes/No)<sup>35</sup></b>
IV.G.33	<u>Placing Siblings Together for Four or More Children</u>	All children will be placed with at least one other sibling 80% of the time.	For CY 2017, children were placed with at least one other sibling 83% of the time.	CY 2018 data not yet available.	Not reported in this period.
IV.G.34	<u>Recruitment of Placements 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 July and December 2017, DCF recruited a total of 32 new SIBS homes. As of December 2017, DCF had a total of 92 large capacity SIBS homes; 21 homes that can accommodate five or more children, and 71 homes that can accommodate four children.	Between January and June 2018, DCF recruited a total of 23 new SIBS homes. As of June 2018, DCF had a total of 84 large capacity SIBS homes; 20 homes that can accommodate five or more children, and 64 homes that can accommodate four children.	Yes
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.	For CY 2016, 85% 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.	CY 2017 data not yet available.	Not reported in this period.

**Table 1B: To Be Maintained**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>34</sup>	Requirement Maintained (Yes/No) <sup>35</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.	For CY 2015, 94% of applicable children had no more than one placement change during the 13-24 months following their date of entry.	CY 2016 data not yet available.	Not reported in this period.
<b><i>Education</i></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.	86% of cases rated acceptable for both QR indicators <i>stability in school and learning and development</i> . <sup>56</sup>	CY 2018 data not yet available. <sup>57</sup>	Not reported in this period.
<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.	For CY 2017, 0.24% of children were victims of substantiated abuse or neglect by a resource parent or facility staff member.	CY 2018 data not yet available.	Not reported in this period.

<sup>56</sup> CY 2017 data (most recent available) showed that 76 of the 88 applicable cases reviewed rated acceptable on both the *stability in school* and *learning and development* indicators; 93% (95 of 102) were rated acceptable for *school stability* and 92% (83 of 90) were rated acceptable for *learning and development*. All in-home cases are excluded from this measure.

<sup>57</sup> Qualitative Review data are reported by the Monitor on an annual basis and will be included in the next monitoring report.

**Table 1B: To Be Maintained**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>34</sup>	Requirement Maintained (Yes/No) <sup>35</sup>
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.	For CY 2016, 6.5% of children who remained at home after a substantiation of abuse or neglect had another substantiation within the next 12 months.	CY 2017 data not yet available.	Not reported in this period.
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.	For CY 2014, 6.4% 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.	CY 2015 data not yet available.	Not reported in this period.
<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.	For CY 2016, 42% of applicable children were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 12 months of entering foster care.	CY 2017 data not yet available.	Not reported in this period.

**Table 1B: To Be Maintained**

<b>SEP Reference</b>	<b>Quantitative or Qualitative Measure</b>	<b>Sustainability and Exit Plan Standard</b>	<b>December 2017 Performance</b>	<b>June 2018 Performance<sup>34</sup></b>	<b>Requirement Maintained (Yes/No)<sup>35</sup></b>
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.	For CY 2014, 80% 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.	CY 2015 data not yet available.	Not reported in this period.
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.	For CY 2013, 86% 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.	CY 2014 data not yet available.	Not reported in this period.
<b>Older Youth</b>					
IV.K.45	<u>Independent Living Assessments</u>	90% of youth age 14 to18 have an Independent Living Assessment.	In December 2017, 93% of applicable children had completed an Independent Living Assessment. Monthly range during January – June 2017 monitoring period: 92 to 94%.	In June 2018, 91% of applicable children had completed an Independent Living Assessment. Monthly range during January – June 2018 monitoring period: 91 to 94%. <sup>58</sup>	Yes

<sup>58</sup> Monthly performance is as follows: January, 94%; February, 93%; March, 91%; April, 92%; May, 91%; June, 91%.

**Table 1B: To Be Maintained**

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	December 2017 Performance	June 2018 Performance <sup>34</sup>	Requirement Maintained (Yes/No) <sup>35</sup>
IV.K.46	<u>Quality of Case Planning and Services</u>	75% of youth age 18 to 21 who have not achieved legal permanency shall receive acceptable quality case management and service planning.	74% of youth cases reviewed rated acceptable (CY 2017). <sup>59</sup>	CY 2018 data not yet available. <sup>60</sup>	Not reported in this period.
IV.K.47	<u>Housing</u>	95% of youth exiting care without achieving permanency shall have housing.	92% of youth exiting care between July and December 2017 without achieving permanency had documentation of a housing plan upon exiting care.	88% of youth exiting care between January and June 2018 without achieving permanency had documentation of a housing plan upon exiting care. <sup>61</sup>	No
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.	95% of youth exiting care between July and December 2017 without achieving permanency were either employed or enrolled in education or vocational training programs or there was documented evidence of consistent efforts to help the youth secure employment or training.	80% of youth exiting care between January and June 2018 without achieving permanency were either employed or enrolled in education or vocational training programs or there was documented evidence of consistent efforts to help the youth secure employment or training. <sup>62</sup>	No

<sup>59</sup> CY 2017 data (most recent available) showed that 31 of the 42 (74%) cases reviewed rated acceptable for both the *child(youth)/family status* and *practice performance* indicators; 88% (37 of 42) of cases rated acceptable on the *child(youth)/family status* indicator and 74% (31 of 42) of cases rated acceptable on the *practice performance* indicator. The universe of cases to which this measure applies is small, making fluctuations more likely.

<sup>60</sup> Qualitative Review data are reported by the Monitor on an annual basis and will be included in the next monitoring report.

<sup>61</sup> One youth out of the universe of 50 youth exiting care to non-permanency was excluded from consideration because the youth could not be located. The universe of cases to which this measure applies is small, making fluctuations more likely.

<sup>62</sup> Nine youth out of the universe of 50 youth exiting care to non-permanency were excluded from this measure because they could not be located, had relocated to a different state, were in the process of applying or enrolling, or had a significant medical or mental health impairment. Three additional youth were considered to have met the standard because there was documentation of consistent efforts by the caseworker to help secure education or employment. The universe of cases to which this measure applies is small, making fluctuations more likely.

**Table 1C: Foundational Elements**

SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	December 2017 Fulfilled (Yes/No)								
<b>A. Data Transparency</b>	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.	Data provided directly to the Monitor and published by DCF in reports and on its website. <sup>63</sup>  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.	Yes								
<b>B. Case Practice Model</b>	<table border="1"> <tr> <td data-bbox="457 683 1003 764">Implement and sustain a Case Practice Model</td> </tr> <tr> <td data-bbox="457 764 1003 846">Quality investigation and assessment</td> </tr> <tr> <td data-bbox="457 846 1003 927">Safety and risk assessment and risk reassessment</td> </tr> <tr> <td data-bbox="457 927 1003 1008">Engagement with youth and families</td> </tr> <tr> <td data-bbox="457 1008 1003 1089">Working with family teams</td> </tr> <tr> <td data-bbox="457 1089 1003 1170">Individualized planning and relevant services</td> </tr> <tr> <td data-bbox="457 1170 1003 1252">Safe and sustained transition from DCF</td> </tr> <tr> <td data-bbox="457 1252 1003 1360">Continuous review and adaptations</td> </tr> </table>	Implement and sustain a Case Practice Model	Quality investigation and assessment	Safety and risk assessment and risk reassessment	Engagement with youth and families	Working with family teams	Individualized planning and relevant services	Safe and sustained transition from DCF	Continuous review and adaptations	<p>QR Data</p> <p>Monitor site visits and attendance at QRs, ChildStat and other meetings</p> <p>Investigation case record review</p> <p>Data provided directly to the Monitor</p> <p>Our Work with Children, Youth and Families Report</p>	Yes
Implement and sustain a Case Practice Model											
Quality investigation and assessment											
Safety and risk assessment and risk reassessment											
Engagement with youth and families											
Working with family teams											
Individualized planning and relevant services											
Safe and sustained transition from DCF											
Continuous review and adaptations											

<sup>63</sup> Please see list of reports in Section I (Introduction: Monitoring Methodology) to review data sources for this Foundational Element.

**Table 1C: Foundational Elements**

SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	December 2017 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	Monitor site visit with SCR staff Screening and Investigations Monthly Report	
<b>D. Appropriate Placements</b>	Appropriate placements of children	QR data Monitor site visits and attendance at QRs, ChildStat and other meetings Data provided directly to the Monitor Our Work with Children, Youth and Families Report	Yes
	Resource family homes licensed and closed (kinship/non-kinship)	Commissioner’s Monthly Report Data provided directly to the Monitor	
	Number of children in home/out of home demographic data	NJ Rutgers Data Portal	
	Placed in a family setting	Commissioner’s Monthly Report	
	Placement proximity	Data provided directly to the Monitor Our Work with Children, Youth and Families Report	
	No children under 13 years old in shelters	Commissioner’s Monthly Report Data provided directly to the Monitor	
	Children over 13 in shelters no more than 30 days	Commissioner’s Monthly Report Data provided directly to the Monitor	
	No behavioral health placements out of state without approval	Commissioner’s Monthly Report	

**Table 1C: Foundational Elements**

SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	December 2017 Fulfilled (Yes/No)
	Adequate number of resource placements	CP&P Needs Assessment Data provided directly to the Monitor Our Work with Children, Youth and Families Report	
<b>E. Service Array</b>	Services for youth age 18-21, LGBTQI, mental health and domestic violence for birth parents with families involved with the child welfare system	New Jersey Youth Resource Spot <sup>64</sup> New Jersey DCF Adolescent Services Website <sup>65</sup> Data provided directly to the Monitor Attendance at Adolescent Practice Forums CP&P Needs Assessment	Yes
	Preventive home visit programs	Commissioner’s Monthly Report	
	Family Success Centers	Commissioner’s Monthly Report Monitor site visits and attendance at QRs, ChildStat and other meetings Data provided directly to the Monitor	

<sup>64</sup> New Jersey’s Youth Resource Spot can be found at [www.NJYRS.org](http://www.NJYRS.org).

<sup>65</sup> DCF’s Adolescent Services Website can be found at <http://www.nj.gov/dcf/adolescent/>.

**Table 1C: Foundational Elements**

SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	December 2017 Fulfilled (Yes/No)
<b>F. Medical and Behavioral Health Services</b>	Appropriate medical assessment and treatment	Healthcare of Children in Out-of-Home Placement Report  Data provided directly to the Monitor  Commissioner’s Monthly Report  CIACC Monthly Report	Yes
	Pre-placement and entry medical assessments		
	Dental examinations		
	Immunizations		
	Follow-up care and treatment		
	Mental health assessment and treatment		
	Behavioral health		
<b>G. Training</b>	Pre-service training	Data provided directly to the Monitor  Workforce Report	Yes
	Case practice model		
	Permanency planning		
	Concurrent planning		
	Adoption		
	Demonstration of competency		

**Table 1C: Foundational Elements**

SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	December 2017 Fulfilled (Yes/No)
<b>H. Flexible Funding</b>	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.	Data provided directly to the Monitor  DCF Online Policy Manual  Budget Report	Yes
<b>I. Resource Family Care Support Rates</b>	Family care support rates	DCF Online Policy Manual	Yes
	Independent Living Stipend	DCF Website <sup>66</sup>  New Jersey Youth Resource Spot	
<b>J. Permanency</b>	Permanency practices	Data provided directly to the Monitor  Our Work with Children, Youth and Families Report	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	Adoption Report	Yes
	Child specific recruitment	Monitor site visits and attendance at QRs, ChildStat and other meetings	

<sup>66</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.

## IV. FOUNDATIONAL ELEMENTS

The Sustainability and Exit Plan (SEP) identifies a series of core organizational and practice improvements known as the “Foundational Elements” that have provided the base upon which New Jersey’s reform has been built. They include a range of requirements from the 2006 Modified Settlement Agreement (MSA) that were previously met and were codified in the SEP as foundational for improved child welfare outcomes and future system improvements. These Foundational Elements remain enforceable in the SEP if performance is not sustained. The Department of Children and Families (DCF) collects and publishes data to support its continued maintenance of Foundational Elements.

In January 2018, DCF published the *Our Work with Children, Youth and Families* report covering calendar year (CY) 2016 and the *Workforce* report covering the state fiscal year (FY) 2017. In addition to producing these reports, DCF continued to provide data directly to the Monitor for the period January 1 to June 30, 2018 wherever necessary to assess the Foundational Elements. The Monitor also assesses maintenance of Foundational Elements through its participation in statewide Qualitative Reviews (QRs), site visits to Local Offices, attendance at monthly ChildStat presentations, telephone surveys with workers and meetings with stakeholders throughout the state.

As mentioned in the Summary of Performance (Section II of this monitoring report), in the Monitor’s judgment, *each of the SEP’s Foundational Elements has been maintained during this period.* The sections below provide information on new developments, significant new accomplishments or other information judged by the Monitor to be relevant for its assessment and understanding of the Foundational Elements.

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

Section II.B of the SEP requires that “DCF will continue to implement and sustain a Case Practice Model that...emphasizes quality investigation and assessment, including safety and risk assessment and reassessment, and engagement with youth and families; working with family teams; individualized planning and relevant services; continuous review and adaptation; and safe and sustained transition from DCF.”

Commissioner Beyer’s focus on quality practice is centered on renewed attention to the values, principles and practices embedded in New Jersey’s Case Practice Model (CPM). Between January and June 2018, Case Practice Liaisons (CPLs) and Area Quality Coordinators (AQC)s – who are part of the Division of Child Protection and Permanency (CP&P) – continued to work to develop Local Office leadership as Family Team Meeting (FTM) coaches and master coaches to ensure that leadership was encouraging engagement of parents in the teaming and planning process. CPLs and FTM coordinators met regularly to discuss each area’s trends, strengths and areas needing improvement.

In an effort to better understand the barriers to quality case practice and improving permanency outcomes, CPLs in Local Offices conducted case record reviews of children who were in placement after 12 months, with both reunification and non-reunification goals. As part of these

reviews, CPLs worked with staff to communicate needed improvements, including reinforcing that visitation plans need to be developed with the family during the initial teaming phase and updated with the family periodically. In Camden, Cumberland, Gloucester and Salem counties, CPLs conducted workshops with supervisors on visitation practices focusing on the quality of case plans, Family Agreements and caseworker visits with children who are not in placement.

During the monitoring period, DCF implemented a series of statewide Quality Counts seminars, training over 3,500 staff from the Area and Local Offices in 114 training sessions. Participants reviewed the SEP status and practice performance indicators and worked with the Qualitative Review (QR) protocol (discussed in Section V.N) to develop a more thorough understanding of the QR rating process. DCF also conducted four QR reviewer workshops attended by 128 reviewers, which covered key portions of the QR feedback and reporting process.

In addition, DCF enhanced their Structured Decision Making (SDM) tools in partnership with the Children’s Research Center (CRC) in order to increase the reliability, validity and equity of decisions at critical points in cases. The tools, which were first introduced to New Jersey over a decade ago, were updated to reflect recent advances in the field and were validated against New Jersey data. As of June 30, 2018, all tools were upgraded.

## **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.”

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

DCF continues to maintain a solid pool of placement resource homes and group settings to meet the needs of children in out-of-home settings. As of June 30, 2018, 6,054 children were in out-of-home placement: 5,472 (90%) of whom were in family-like settings: 3,250 children (54%) placed in non-kinship resource family homes and 2,222 children (37%) in kinship homes. For those in non-family settings, 481 children (8%) were placed in group and residential settings facilities and 101 children (2%) were in independent living programs.

Between January and June 2018, DCF recruited and licensed 583 new kinship and non-kinship resource family homes; of these newly licensed resource family homes, 343 (59%) were kinship homes and 246 (42%) were non-kinship homes. As of June 30, 2018 there were a total of 4,343 licensed resource family homes in the state, with a total bed capacity for 9,216 children.

As described in more detail in Section V.F, DCF continues its recruitment planning and targeting processes, with a particular focus on recruiting kinship homes and resource homes willing and able to accommodate large sibling groups. As of June 30, 2018, there were a total of 84 large capacity Siblings in Best Placement Settings (SIBS) homes: 20 homes with a capacity to accommodate five or more children and 64 homes that could accommodate four children.

### **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 (FSCs). These services are to include, but not be limited to, services for youth age 18 to 21, LGBTQI youth, birth parents who may need mental health or domestic violence supports and preventive home visiting programs.

During this monitoring period, DCF's division of Child Protection and Permanency (CP&P) partnered with the Children's System of Care (CSOC) and a private provider, Robins' Nest to plan for the implementation in July 2018 of Family Functional Therapy for Foster Care (FFT-FC) in Cumberland, Gloucester and Salem counties. FFT-FC is an evidence-based, trauma-informed model of care based on the core principles of Family Functional Therapy. The model is a comprehensive, systemic approach to helping youth and their families overcome individual and relational trauma to achieve stable foster care and long-term permanency either through reunification with families or through continued stay in out-of-home care. The FFT-FC model involves a four stage process aimed at: reduction in youth problem behavior, improvement in school behaviors and stabilization in school placement, improvement in family functioning and problem-solving, building family-based protective factors, reducing the necessity for out-of-home replacements and reducing trauma symptoms, individually and within the family. DCF developed this program in response to concerns about the resources available to meet the needs of children and youth who present with significant emotional and behavioral challenges. DCF began to explore the possibility of expanding these services to other areas of the state after initial implementation in these counties.

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

This section of the report provides information on the Sustainability and Exit Plan (SEP) requirements that the state is focusing on achieving – designated as Outcomes *To Be Achieved* – and those requirements for which the state has satisfied the specified performance targets for at least six months and must sustain – designated as Outcomes *To Be Maintained*.

**A. INVESTIGATIONS**

The SEP includes four performance measures related to investigative practice, all of which have been designated as Outcomes *To Be Maintained* as of January 2018. They are: quality of investigations (SEP IV.A.15), timeliness of Institutional Abuse Investigations Unit (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 May 31, 2018:***<sup>67</sup>

In May 2018, there were 5,417 investigations of alleged child abuse and neglect; 4,592 (85%) of which were completed within 60 days. Performance from December 2017 to May 2018 ranged from a low of 85 percent to a high of 86 percent.<sup>68</sup> DCF continued to meet the SEP performance standard for timeliness of investigation completion within 60 days for the period of December 2017 through May 2018.

<sup>67</sup> June 2018 data will be included in the next monitoring report. For certain data elements that have an extended time frame built into the measurement, the Monitor and DCF 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.

<sup>68</sup> Monthly performance for this measure is as follows: December, 86%; January, 85%; February, 86%; March, 85%; April, 85%; May, 85%.

<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 May 31, 2018:***<sup>69</sup>

In May 2018, 5,156 (95%) of the 5,417 investigations of child abuse and neglect were completed within 90 days. Performance from December 2017 to May 2018 remained consistent at 95 percent. DCF met the SEP performance standard for the timeliness of investigation completion within 90 days for the period of December 2017 through May 2018.

### 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.

As reported in the previous monitoring period, together with the Monitor, DCF conducted a case record review of the quality of CP&P’s investigative practice in March 2018. Reviewers examined the quality of practice of a statistically valid random sample of selected Child Protective Services (CPS) investigations assigned to DCF Local Offices between October 1 and October 14, 2017, involving 331 investigations and 518 alleged child victims.<sup>70</sup> Overall, reviewers found that 301 (91%) of the investigations were of acceptable quality,<sup>71</sup> meeting the SEP standard for the first time during the previous monitoring period.

The quality of investigations review is typically conducted every two years. The Monitor anticipates conducting another case record review in collaboration with DCF on the quality of investigations in 2020.

<sup>69</sup> June 2018 data will be included in the next monitoring report. For certain data elements that have an extended time frame built into the measurement, the Monitor and DCF 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.

<sup>70</sup> These results have a ± 5% margin of error with 95% confidence.

<sup>71</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.

## Institutional Abuse Investigations Unit

<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 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>72</sup>

### *Performance as of June 30, 2018:*

Performance data for January to June 2018 show that DCF continued to exceed the SEP performance standard for this measure. In June 2018, 87 percent of IAIU investigations were completed within 60 days.

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<sup>72</sup> CP&P Policy Manual (4-1-2013). Introduction to IAIU, I, A, 100.

## 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 in placement and/or when there is a need to adjust a case plan to achieve permanency or meet a child’s needs.

As mentioned in Section IV.A, as part of DCF’s general focus on improving the quality of practice, this monitoring period Office of Quality staff conducted case record reviews of children who were in placement after 12 months, with both reunification and non-reunification goals, to transfer lessons learned to Local Office Managers (LOMs).

The SEP includes five performance measures pertaining to FTMs, three of which had been met and designated as *Outcomes To Be Maintained*: the requirements that FTMs be held within 45 days of a child’s removal (SEP IV.B.16); 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 that children in care with the goal of reunification have at least three FTMs each year after the first 12 months of placement (SEP IV.B.18). Performance for all five measures during the current monitoring period are discussed below.

### 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 June 30, 2018:*

In June 2018, 151 (85%) out of 177 possible FTMs occurred within 45 days of a child’s removal from home. Performance from January 1 to June 30, 2018 ranged from a low of 85 percent to a high of 90 percent.<sup>73</sup> For this measure, the Monitor and DCF jointly verified monthly data from NJ SPIRIT for the 81 applicable cases to determine whether exceptions to FTM policy were appropriately applied and documented.<sup>74</sup> For the first time this monitoring period, DCF took a primary role in this data validation process.

DCF’s performance exceeded the SEP standard in each month of the monitoring period.

<sup>73</sup> Monthly performance for this measure is as follows: January, 86%; February, 87%; March, 87%; April, 85%; May, 90%; June, 85%. Reported performance accounts for valid exceptions to the FTM requirement.

<sup>74</sup> Based on a joint review with DCF of all 81 cases, the Monitor excluded valid exceptions to the FTM requirement from the universe of cases. For example, in June 2018, there were 182 children newly entering placement. The Monitor and DCF determined that in five cases, the worker had appropriately determined that the parent declined the FTM or was otherwise unavailable. The Monitor excluded those cases, making the universe 177 children.

### 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 June 30, 2018:***<sup>75</sup>

In June 2018, 118 (78%) of 152 applicable children had an additional three or more FTMs within the first 12 months of entering placement. Performance from January 1 to June 30, 2018 ranged from a low of 77 percent to a high of 91 percent.<sup>76</sup> For this measure, the Monitor and DCF jointly verified monthly data from NJ SPIRIT for the 80 applicable cases to determine whether exceptions to FTM policy were appropriately applied and documented.<sup>77</sup> For the first time this monitoring period, DCF took a primary role in this data validation process.

Based on the verified data, DCF met the performance standard in four of six months in the monitoring period. The Monitor considers this measure to be met, and the fluctuation in performance this monitoring period to be insubstantial. An analysis of the data for this measure by Local Office shows that far more counties are improving in performance for this measure than declining, with only a few counties remaining significantly below the SEP standard.

### 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 June 30, 2018:***<sup>78</sup>

In June 2018, 18 (95%) of 19 applicable children with a permanency goal of reunification had three or more FTMs in the 12 months following their first year in out-of-home placement. Performance from January 1 to June 30, 2018 ranged from a low of 93 percent to a high of 100

<sup>75</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 June 2018 is based upon the 155 children who entered care in June 2017. Compliance is based on whether at least three FTMs were held for these children during the 12-month period they were in care.

<sup>76</sup> Monthly performance is as follows: January, 77%; February, 85%; March, 88%; April 91%; May, 86%; June, 78%. Reported performance accounts for valid exceptions to the FTM requirement.

<sup>77</sup> Based on a joint review of all 80 cases, the Monitor excluded valid exceptions to the FTM requirement from the universe of cases. For example, in June 2018, there were 155 children who had been in out-of-home placement for 12 months. The Monitor and DCF determined that in three cases, the worker had appropriately determined that the parent declined the FTM or was otherwise unavailable. The Monitor excluded those cases, making the universe of applicable cases 152 children.

<sup>78</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 June 2018, a combined total of 20 children who entered care in June 2015, June 2014, June 2013, etc. and were still in placement with a goal of reunification. Compliance is based on whether at least three FTMs were held for these children during their most recent 12 months in care.

percent.<sup>79</sup> For this measure, the Monitor and DCF jointly verified monthly data from NJ SPIRIT for the six applicable cases to determine whether exceptions to FTM policy were appropriately applied and documented.<sup>80</sup> For the first time this monitoring period, DCF took a primary role in this data validation process. DCF's performance exceeded the SEP standard in each month of the monitoring period.

The improvement in performance for two consecutive periods is likely a reflection of the impact of the strategies DCF identified to diagnose and address barriers to performance as part of its correction action plan, as well as DCF's renewed focus on improving the quality of case practice.

### 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 June 30, 2018:<sup>81</sup>*

In June 2018, 165 (96%) of 172 applicable children in out-of-home placement with a permanency goal other than reunification had two or more FTMs after 12 months. Performance from January 1 to June 30, 2018 ranged from a low of 91 percent to a high of 98 percent.<sup>82</sup> For this measure, the Monitor verified monthly data from NJ SPIRIT for the 21 applicable cases to determine whether exceptions to FTM policy were appropriately applied and documented.<sup>83</sup> For the first time this monitoring period, DCF took a primary role in this data validation process.

DCF exceeded the SEP standard on this measure in each month of the monitoring period.

<sup>79</sup> Monthly performance for this measure is as follows: January, 100%; February, 93%; March, 93%; April, 94%; May, 95%; June, 95%. Reported performance accounts for valid exceptions to the FTM requirement.

<sup>80</sup> Based on a review of all six cases, the Monitor excluded valid exceptions to the FTM requirement from the universe of cases. For example, in June 2018, there were 20 children who had been in care for at least 24 months who had a goal of reunification. The Monitor determined that in one case, the worker had appropriately determined that the parent declined the FTM or was otherwise unavailable. The Monitor excluded that case, making the universe of applicable cases 19 children.

<sup>81</sup> Children eligible for Measure 19 are all children who have been in care for at least 12 months who entered care in the month specified each year and have a goal other than reunification. For example, in June 2018, a combined total of 173 children entered care in June 2017, June 2016, June 2015, 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 each year in the most recent year after 12 months in care.

<sup>82</sup> Monthly performance is as follows: January, 98%; February, 96%; March, 96%; April, 91%; May, 91%; June, 96%. Reported performance accounts for valid exceptions to the FTM requirements.

<sup>83</sup> Based on a review of all 21 cases, the Monitor excluded valid exceptions to the FTM requirement from the universe of cases. For example, in June 2018 there were 173 children who had been in care after 12 months with a goal other than reunification. The Monitor determined that in one case, the worker had appropriately determined that the parent declined the FTM or was otherwise unavailable. The Monitor excluded that case, making the universe of applicable cases 172 children.

## 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 Qualitative 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.

FTMs are just one way in which DCF staff engage with families. Teaming with families involved with DCF is a central component of New Jersey’s Case Practice Model (CPM), and relies upon other foundational elements of quality case practice, such as engagement with family members, timely assessments and quality case planning, all of which are rated as part of the state’s QR process. Information about the QR process and protocol are detailed in Section V.N of this report.

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, including family members, work together to meet identified goals.

This QR measure is reported by the Monitor on an annual basis. The Monitor will report on the data for Quality of Teaming for the period of January 1 through December 31, 2018 in the next monitoring report.

## C. QUALITY OF CASE AND SERVICE PLANNING

Timely and meaningful case plans at the beginning of a case, as well as throughout a family’s involvement with DCF, rely on workers’ assessment and engagement skills. During this monitoring period, Case Practice Liaisons (CPLs) conducted record reviews to assess the quality of case plans, Family Agreements and contact notes to better understand barriers or challenges to quality case and service planning. CPLs also participated in various modalities of supervisory conferences. One of DCF’s proposed strategies to improve the quality of casework practice with parents is to implement behavior-based case planning. With this approach, DCF intends to orient case plans towards assessing a family’s underlying needs, and move away from case plans that primarily list services that a parent/caregiver needs to complete. This approach is consistent with the tenets of DCF’s Case Practice Model (CPM). The Monitor will report on the development of these plans in the next monitoring report.

The SEP includes three measures related to case planning, two of which have been previously met and designated as Outcomes *To Be Maintained*: the requirement that case plans be developed with families within 30 days of placement (SEP IV.D.22) and the requirement that case plans be reviewed and modified every six months (SEP III.C.6). The SEP measure regarding the quality of case planning (SEP IV.D.23) has not yet been achieved. Performance data for all three measures during the current monitoring period are discussed below.

### 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 June 30, 2018:*

In June 2018, 189 (95%) of 200 initial case plans were completed within 30 days of a child entering placement. Between January 1 and June 30, 2018, the timely development of initial case plans ranged from a low of 94 percent to a high of 99 percent.<sup>84</sup> In this monitoring period, DCF met this measure in five of six months, a significant improvement in performance from the previous three monitoring periods and an indication that the corrective actions put in place were successful in diagnosing and improving practice.<sup>85</sup>

<sup>84</sup> Monthly performance for this measure is as follows: January, 99%; February 95%; March, 94%, April, 95%; May, 96%; June, 95%.

<sup>85</sup> The Monitor requested a corrective action plan for this measure in the prior monitoring period as a result of three consecutive periods of performance below the SEP standard after the measure had already been designated as an Outcome *To Be Maintained*. As a result, DCF staff reviewed a random sample of case plans and determined that several plans were completed just outside the 30-day window. In response, DCF instituted Central Office oversight and clarification to Local Office staff.

### 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 June 30, 2018:***

In June, 2018, 98 percent of case plans had been modified no less frequently than every six months. Performance from January 1 to June 30, 2018 ranged from 94 to 98 percent.<sup>86</sup> DCF met or exceeded the required standard for this measure in four of six months, was just shy of the standard in the remaining two months, and therefore, in the Monitor’s judgment, continues to meet this measure.

### 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 Qualitative 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 or youth and family and that there is oversight of plan implementation to ensure case goals are met and 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 or youth and family needs are addressed in the case plan, appropriate family members were included in the development of the plan and interventions are being tracked and adjusted when necessary. The QR process and protocol are discussed in detail in Section V.N of this report.

This QR measure is reported by the Monitor on an annual basis. The Monitor will report on the data for Quality of Case Plans for the period January 1 through December 31, 2018 in the next monitoring report.

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<sup>86</sup> Monthly performance on this measure is as follows: January, 98%; February, 94%; March, 94%; April, 97%; May, 96%; June, 98%.

## D. EDUCATION

<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 Qualitative 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.

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 both the *stability in school* and *learning and development* indicators as measured by the QR.<sup>87</sup> The QR process and protocol are discussed in detail in Section V.N of this report. This measure is designated as an Outcome *To Be Maintained*.

This QR measure is reported by the Monitor on an annual basis. The Monitor will report on the data for Educational Needs for the period January 1 through December 31, 2018 in the next monitoring report.

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<sup>87</sup> This measure applies to school-aged children in out-of-home placement.

## E. VISITS

Visits between children in foster care and their workers, parents and siblings are critical to children’s safety and well-being, and are essential tools for strengthening family connections and improving prospects for permanency. Visits also offer the opportunity for engagement and assessment of children, youth and families.

The SEP includes six performance measures related to visits. As of January 2018, four measures were designated as Outcomes *To Be Maintained*, including caseworker contacts with children newly placed or after a placement change (SEP III.F.9); caseworker contacts with children in ongoing placement (SEP III.F.10); and parent-child weekly and bi-weekly visits (SEP IV.F.29 and 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), have not been met and are designated as Outcomes *To Be Achieved*. Performance for all six measures during the current monitoring period are discussed below.

### Caseworker Visits with Children in Placement

<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 June 30, 2018:*

In June 2018, 300 (90%) of the 335 children in a new placement had two visits with their caseworkers during their first two months in placement. Between January and June 2018, monthly performance ranged from 90 percent to 96 percent.<sup>88</sup> DCF reports that it has continued to take steps to address issues in documentation of these visits and that Case Practice Liaisons (CPLs) have been tasked with educating Local Office staff on the importance of visiting with children in care. DCF believes these efforts have been integral to improved performance for this measure over the last two monitoring periods.

<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.

<sup>88</sup> Monthly performance is as follows: January, 93%; February, 96%; March, 94%; April, 95%; May, 96%; June, 90%.

***Performance as of June 30, 2018:***

In June 2018, 5,165 (95%) of the 5,431 children in an ongoing placement were visited at least once by their caseworker. Between January and June 2018, monthly performance ranged between 95 percent and 97 percent, exceeding the SEP target.<sup>89</sup> DCF continues to meet this performance standard.

**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 June 30, 2018:***

In June 2018, 1,849 (77%) of 2,405 applicable children in custody with a goal of reunification had parents who were visited at least twice during the month by caseworkers. Between January and June 2018, a range of 76 percent to 80 percent of applicable parents or other legally responsible family members were visited at least two times per month by a caseworker (see Figure 1).<sup>90</sup> In assessing performance for this measure, the Monitor applied the findings from a joint review with DCF of children for whom case documentation indicated that a worker visit with a parent was not required because the parent was missing or otherwise unavailable.<sup>91</sup> DCF took a primary role in this data validation process for the second time this monitoring period. Based on the findings, the Monitor excluded children’s cases from the universe when it determined the exceptions to the requirement were appropriately applied and documented.

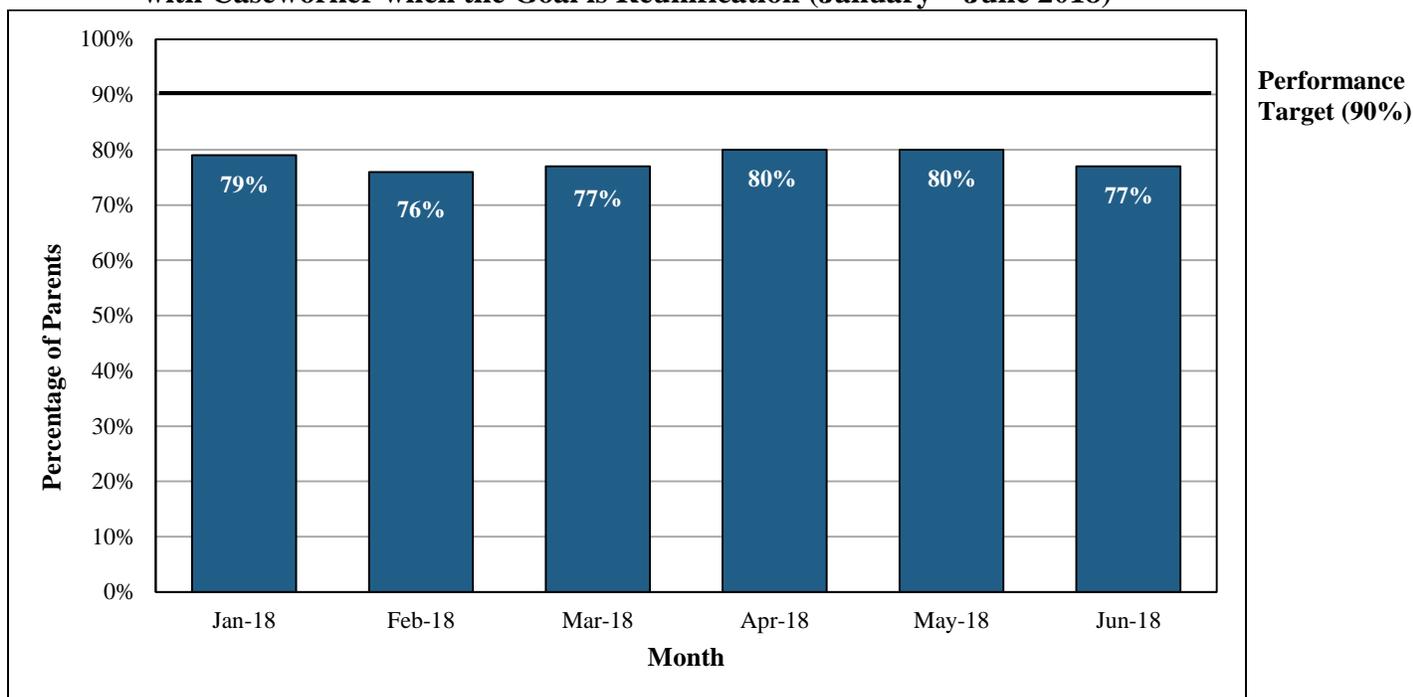
Current performance does not meet the level required by the SEP. An analysis of the data for this measure by Local Office shows wide variation in performance. About as many Local Offices have improved performance for caseworker contacts with parents as have declined in this monitoring period.

<sup>89</sup> Monthly performance is as follows: January, 97%; February, 95%; March, 96%; April, 96%; May, 95%; June, 95%.

<sup>90</sup> Monthly performance is as follows: January, 79%; February, 76%; March, 77%; April, 80%; May, 80%; June, 77%. Reported performance accounts for valid exceptions to the visits requirement.

<sup>91</sup> DCF and the Monitor jointly reviewed 251 cases from a universe of cases from March and April 2018 in which worker visits with parents were not held due to a documented exception to the visits requirement. Based on a review of findings, the Monitor and DCF determined that 136 (54%) of 251 cases had utilized a valid exception. As a result, the Monitor excluded 58% of the cases of exceptions from each month from the universe. For example, in June 2018 there were 2,638 children in custody with a goal of reunification. Data from NJ SPIRIT indicated that there were 432 documented cases that month for which the worker had determined that the parent was missing or otherwise unavailable. Based on these findings, the Monitor excluded from the universe 54% of the 432 cases in June, making the universe of applicable children 2,405 (2,638-233).

**Figure 1: Percentage of Families Who Had at Least Twice per Month Face-to-Face Contact with Caseworker when the Goal is Reunification (January – June 2018)**



Source: DCF data

### Visits between Children in Custody and their Parents

<b>Quantitative or Qualitative Measure</b>	29. <u>Weekly Visits 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 June 30, 2018:***

In June 2018, an average of 1,759 (79%) of 2,225 applicable children visited weekly with their parents during the month. Between January and June 2018, a monthly range of 78 percent to 82

percent of children had a weekly visit with their parents when the permanency goal was reunification.<sup>92</sup> This performance exceeds the SEP requirement.

<b>Quantitative or Qualitative Measure</b>	30. <u>Bi-Weekly Visits 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 June 30, 2018:***

In June 2018, 1,992 (92%) of 2,170 applicable children had at least two visits with their parents during the month. Between January and June 2018, a monthly range of 91 percent to 94 percent of children had visits at least twice a month with their parents when their permanency goal was reunification.<sup>93</sup> This performance exceeds the SEP requirement.

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

<b>Quantitative or Qualitative Measure</b>	31. <u>Visits 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 June 30, 2018:***

In June 2018, 1,350 (75%) of 1,795 applicable children in placement who had at least one sibling with whom they did not reside had at least one visit with one of their siblings during the month.

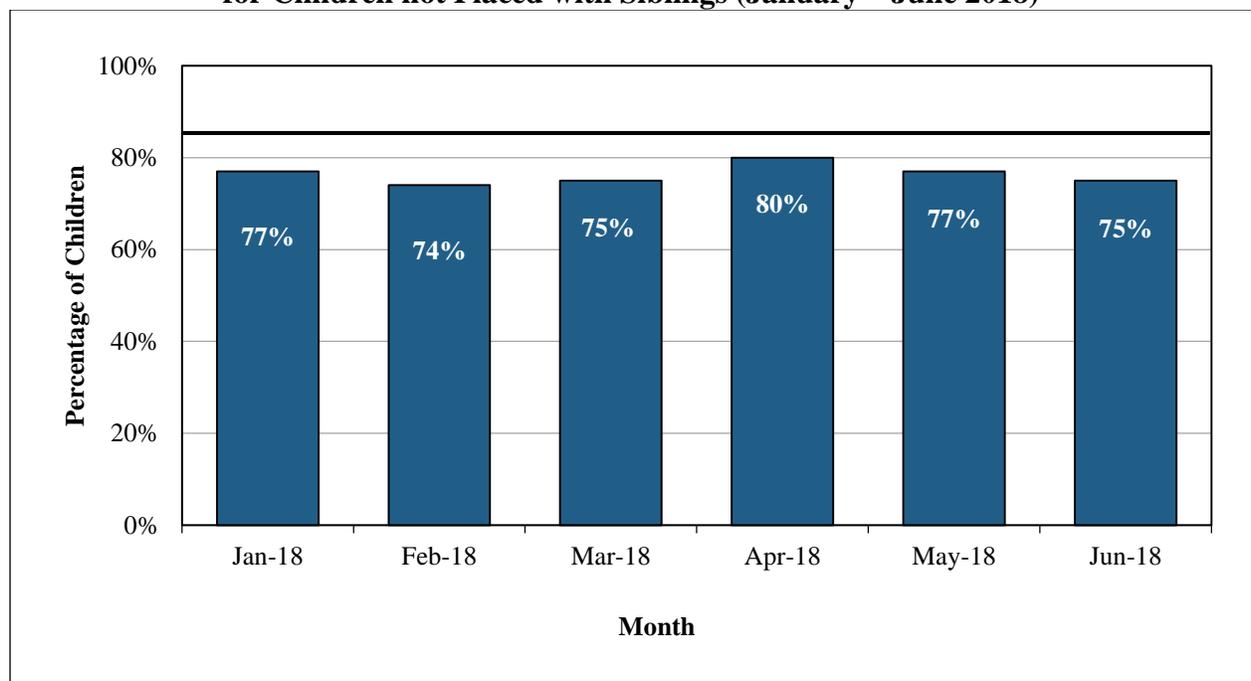
<sup>92</sup> Monthly performance is as follows: January, 78%; February, 80%; March, 79%; April, 82%; May, 81%; June, 79%. Given the results of validation from a prior monitoring period, the Monitor excluded from the universe all cases in which DCF documented an exception to the parent-child visit requirement. For example, in June 2018, there was an average of 2,803 children with a goal of reunification across the four weeks of the month. Data from NJ SPIRIT indicated that in an average of 578 cases that month, the worker had determined that the parent was unavailable for the visit, the child declined the visit or the visit was not required. Based on these data, the Monitor excluded those cases from the universe, making the universe of applicable children an average of 2,225 in June.

<sup>93</sup> Monthly performance is as follows: January, 94%; February, 92%; March, 94%; April, 93%; May, 91%; June, 92%. Given the results of validation activities from a 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, in June 2018, there were 2,640 children with a goal of reunification. Data from NJ SPIRIT indicated that in 470 cases that month, the worker had determined that the parent was unavailable for the visit, the child declined the visit or the visit was not required. Based on these data, the Monitor excluded those cases from the universe, making the universe of applicable children 2,170 in June.

Between January and June 2018, a range of 74 percent to 80 percent of children had at least monthly visits with one of their siblings with whom they were not placed (see Figure 2).<sup>94</sup>

In assessing performance for this measure, the Monitor applied the findings from a joint review with DCF of children for which case documentation indicated that a sibling visit was not required due to a court order, hospitalization, or because the child was missing or otherwise unavailable.<sup>95</sup> For the second time this monitoring period, DCF took a primary role in this validation process. Based on the findings, the Monitor excluded from the universe cases in which DCF and the Monitor determined the exceptions to the requirement were appropriately applied and documented. DCF’s current performance does not meet the required level for visits between children in custody and siblings with whom they are not placed. DCF plans on using data collected from the review to identify barriers to improved performance in this area.

**Figure 2: Percentage of Children Who Had at Least Monthly Visits with Siblings, for Children not Placed with Siblings (January – June 2018)**



Source: DCF data

<sup>94</sup> Monthly performance is as follows: January, 77%; February, 74%; March, 75%; April, 80%; May, 77%; June, 75%. Reported performance accounts for valid exceptions to the visits requirement. DCF has reported that current and past data for this measure may understate actual performance because the data do not account for some instances in which private providers facilitate sibling visits. The Monitor will work with DCF to validate the process and these additional data for inclusion in the next monitoring report.

<sup>95</sup> DCF and the Monitor reviewed a sample of 234 cases from a universe of eligible children in April, May, and June 2018 in which children were not able to visit their sibling due to a documented exception to the visits requirement. The Monitor and DCF determined that 148 (63%) of 234 cases had utilized a valid exception. As a result, the Monitor excluded 63% of the cases of exceptions from each month from the universe. For example, in the month of June 2018, there were 1,922 children in custody with a sibling in care with whom they were not placed. Data from NJ SPIRIT indicated that there were 201 documented cases for which the worker had determined the visit was not required or the child was unavailable. Based on these findings, the Monitor excluded 63% the 201 cases, making the universe of applicable children 1,795 (1,922 -172).

## F. PLACEMENT

Stable and appropriate placement for children in foster care is essential 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 performance measures related to placement. As of January 2018, all had been previously met and were designated as *Outcomes 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); placement stability for children in care between 13 and 24 months (SEP IV.G.36); and placement stability for children in care 12 months or less (SEP IV.G.35). All of these measures, except recruitment of placements to accommodate large sibling groups, are assessed through longitudinal cohort data on an annual basis.

The state's performance with respect to placement stability is not newly assessed in this report as performance for the stability standards is measured annually at the end of each calendar year. Updated data will be included in the next monitoring report when these data are available. The most recent performance data can be found in Table 1B of this report.

### Recruitment of Placements for Sibling Groups of Four or More

<b>Quantitative or Qualitative Measure</b>	34. <u>Recruitment of Placements for 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 June 30, 2018:*

DCF recruitment staff continued to develop recruitment plans to guide their work for CY 2018. These plans assist staff to determine local needs, including the need for families willing to care for large sibling groups, adolescents and children with advanced medical needs. Recruitment efforts include strategically placing advertisements in local publications, and in online websites, blogs and local sports facilities in an effort to reach potential resource families.

During this monitoring period, DCF continued to host recruitment and retention events for families willing and able to accommodate large sibling groups and adolescents. For example, DCF hosted a conference in Camden for 40 families to provide them with skills regarding fostering large sibling groups, presented to over 50 teachers in an Englewood Cliffs school about the need for families willing to care for adolescents, and placed online advertisements in Portuguese and Hispanic newspapers in Essex County.

As of June 30, 2018, DCF had a total of 84 large capacity Siblings in Best Placement Settings (SIBS) homes, eight fewer than at the end of December 2017. During the monitoring period, DCF recruited 23 new SIBS homes, three of which can accommodate five or more children, and 20 of which can accommodate four children. Because 27 homes that could accommodate four

children were either downgraded or closed this monitoring period, the state decreased its capacity for this size home by seven since December 31, 2017, resulting in a total of 64 SIBs homes that can accommodate four children. As of June 30, 2018, DCF had a total of 20 homes that could accommodate five or more children, which is one fewer than it had at the end of December 2017.<sup>96</sup>

The Monitor continues to consider DCF to have met the SEP standard for this measure between January and June 2018.

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<sup>96</sup> As of June 30, 2018, 27 homes accommodating four children either downgraded or closed: 14 homes closed or downgraded upon reunification, six homes closed or downgraded due to adoption finalizations, three homes closed or downgraded upon replacement of the sibling group to a more permanent setting, two homes closed or downgraded upon request of the removal of the sibling group, one home closed due to an IAIU investigation, and one home downgraded its capacity due to a family emergency. During the same period, four homes that could accommodate five or more children either closed or downgraded their capacity. The reasons for closure or downgrade: one home downgraded after adoption finalization, one home downgraded its capacity and two homes closed after reunification of the family.

## **G. MALTREATMENT OF CHILDREN AND YOUTH**

A fundamental responsibility of DCF is ensuring the long-term 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 SEP performance measures related to maltreatment of children and youth. As of January 2018, three measures were designated as Outcomes *To Be Maintained*: abuse and neglect of children in foster care (SEP III.H.12); repeat maltreatment for children remaining in their home (SEP IV.H.37); and maltreatment post-reunification (SEP IV.H.38). One was designated as an Outcome *To Be Achieved*: re-entry to placement (SEP IV.H.39).

The state's performance is not newly assessed in this report as performance is measured at the end of each calendar year. Updated data will be included in the next monitoring report when these data are available. The most recent performance data can be found in Table 1B of this report.

## **H. TIMELY PERMANENCY**

Regardless of age, gender, race or ethnicity, all children need and deserve a safe, nurturing family to protect and guide them. Safe family reunification is the preferred path, but permanency for children can be achieved through a number of different avenues, including kinship/guardianship and adoption.

There are four SEP measures that focus on permanency for children. As of January 2018, three measures were designated as Outcomes *To Be Maintained* – achieving permanency within 12 months (SEP IV.I.40), 36 months (SEP IV.I.42) and 48 months (SEP IV.I.43) – and one measure was designated as an Outcome *To Be Achieved* – achieving permanency within 24 months (SEP IV.I.41).

The state's performance on these permanency measures is not newly assessed in this report as performance is measured annually at the end of each calendar year. Updated data will be included in the next monitoring report when these data are available. The most recent performance data can be found in Table 1B of this report.

## I. CHILD HEALTH UNITS

Early in New Jersey’s child welfare reform efforts, DCF developed Child Health Units (CHUs) to facilitate and ensure the timely provision of health care to children in CP&P custody. CHUs are located 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 measure has been previously met and designated as an Outcome *To Be Maintained*. In what has become a model for other child welfare systems throughout the country, each child placed in a resource home has a nurse assigned for health care case management. CHUs are recognized by staff and external partners as an effective achievement of New Jersey’s child welfare reform efforts. The work of the nurses in concert with caseworkers and other team members have contributed to the consistently positive findings in New Jersey’s Qualitative Reviews (QRs) regarding children’s health. Performance for this measure is discussed below.

<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 June 30, 2018:***

As of June 30, 2018, DCF had 172 nurses and 85 staff assistants. Of the 172 nurses, an average of 163 were available for coverage for an average ratio of one nurse to every 38 children in out-of-home care, exceeding the standard of one nurse to 50 children in out-of-home care.

## J. OLDER YOUTH

The SEP includes four measures related to older youth, all designated as Outcomes *To Be Maintained* – completion of Independent Living Assessments (ILA) (SEP IV.K.45); quality of case planning and services (SEP IV.K.46); 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). 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 age 14 and 18 with a completed Independent Living Assessment.
<b>Performance Target</b>	90% of youth age 14 to 18 will have an Independent Living Assessment.

#### *Performance as of June 30, 2018:*

In June 2018, there were 732 youth age 14 to 18 in out-of-home placement for at least six months; 667 (91%) had an ILA completed. Monthly performance between January and June 2018 ranged from 91 percent to 94 percent.<sup>97</sup> DCF sustained performance above the level required by the SEP in all six months this monitoring period.

### Quality of Case Planning and Services

<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 age 18 and 21 who have not achieved legal permanency.
<b>Performance Target</b>	75% of youth age 18 to 21 who have not achieved legal permanency shall receive acceptable quality case management and service planning.

Performance data for this measure are collected through Qualitative Reviews (QRs) of the experiences and outcomes of youth age 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 LGBTQI, are victims of domestic violence, are expectant or parenting and/or are developmentally disabled.

This QR measure is reported by the Monitor on an annual basis. The Monitor will report on the data for Quality of Case Planning and Services for the period January 1 through December 31, 2018 in the next monitoring report.

<sup>97</sup> Monthly performance is as follows: January, 94%; February, 93%; March, 91%; April, 92%; May, 91%; June, 91%.

## 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 June 30, 2018:*

The Monitor and DCF staff conducted a case record review of all youth who exited care between January and June 2018 without achieving permanency to assess whether they had housing upon leaving DCF custody. Of the 49 youth for which this measure was applicable,<sup>98</sup> there was documentation of a housing plan for 43 (88%) youth. This performance is below the SEP standard, and a decline from the previous monitoring period, during which 58 (92%) of 63 applicable youth exiting care without achieving permanency had housing. Although the universe of cases to which this measure applies is small and susceptible to fluctuations, this decline in performance is of concern to the Monitor, particularly because it is the second period of decline. The Monitor does not consider this measure to be met for this reporting period, and has asked DCF to evaluate its practice in this area so that any barriers to performance can be addressed.

DCF has agreed to review the results from prior case record reviews of older youth exiting care without achieving permanency to better understand these youth's needs and available services, and to strategize ways to support and improve practice where needed. DCF reports that it continues to implement programming that utilizes housing vouchers, partner with private agencies that provide housing for youth over age 21, and partner with local Continuums of Care to identify sustainable housing for youth when they leave the child welfare system.

## 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 June 30, 2018:*

The Monitor and DCF also reviewed the case records of all youth who exited DCF custody between January and June 2018 without achieving permanency to determine whether they were employed or enrolled in school at the time of leaving care. Overall, there was satisfactory performance with this measure in 33 (80%) of cases. Of the 41 youth to whom this measure

<sup>98</sup> One youth was excluded from consideration because they could not be located.

applied,<sup>99</sup> 30 were either employed or enrolled in education or vocational training programs, and there was documentation of consistent efforts by the caseworker to help an additional three youth secure education or employment. This performance is below the SEP standard, and a decline from the previous monitoring period, during which 53 (95%) of 56 applicable youth exiting care without achieving permanency had employment or education. Although the universe of cases to which this measure applies is small and susceptible to fluctuations, this decline in performance is of concern to the Monitor. The Monitor has assessed that this measure is not met for this period and has asked DCF to evaluate its practice in this area as well so that any barriers to performance can be addressed.

DCF has agreed to review the results from prior case record reviews of older youth exiting care without achieving permanency to better understand youths' needs and available services, and to strategize ways to support educational and employment outcomes. In September 2017, DCF implemented the Pathways to Academic and Career Exploration to Success (PACES) program, aimed at supporting youths' academic and career goals. DCF anticipates improved progress in this area as the program gets established and older youth receive more intensive support.

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<sup>99</sup> Nine youth were excluded from this measure because they could not be located, had relocated to a different state and were in the process of applying or enrolling, or had a significant medical or mental health impairment.

## K. SERVICES TO SUPPORT TRANSITION

While involved with DCF, children, youth and families often face 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 Qualitative Review (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 on the *successful transitions* indicator. This measure is designated as an Outcome *To Be Achieved*. The QR process and protocol are discussed in detail in Section V.N of this report.

### 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 Qualitative Review (QR).

This QR measure is reported by the Monitor on an annual basis. The Monitor will report on the data for Services to Support Transition from January 1 to December 31, 2018 in the next monitoring report.

## L. CASELOADS

One of the early successes of DCF’s reform was reducing caseloads to levels where workers could do the work with children, youth and families that was expected of them. Caseload compliance is measured by assessing caseloads for individual caseworkers in each of the system’s functional areas (Intake, Permanency, Adoption and IAIU) as well as office standards for each CP&P Local Office. Table 2 summarizes the SEP’s caseload standards for individual workers.

The SEP includes eight performance measures related to caseloads. As of January 2018, all are designated as Outcomes *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). Performance for all eight measures during the current monitoring period are discussed below.

**Table 2: CP&P Individual Worker Caseload Standards**

<b>Caseworker Function</b>	<b>Responsibility</b>	<b>Individual Caseload Standard (SEP IV.E and III.B)</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> per month. <sup>100</sup>
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>100</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.

## Verifying Worker Caseloads

DCF caseload data are collected and analyzed through NJ SPIRIT and SafeMeasures. As in previous monitoring periods, the Monitor verified caseload data supplied by DCF by conducting telephone interviews with randomly selected workers across the state, and inquiring about caseloads during site visits and when doing QR reviews. The formal caseload verification process included workers in all areas in which the SEP establishes caseload standards: Intake, Permanency and Adoption. A sample of 100 workers<sup>101</sup> were selected from all active workers in the months of May and June 2018. For the past several years, the Monitor has weighted the sample with Intake workers to examine in more depth the impact of shared cases between Intake and Permanency workers. All 100 workers were called and information was collected from 49 workers (50% of the eligible sample).<sup>102</sup> Among the 49 workers who participated in the caseload verification interviews, 20 were Intake workers, eight were Permanency workers, nine were Adoption workers and 12 were trainees.

During the interviews, the Monitor asked each caseworker whether his or her current caseload met caseload standards during the months of May and June 2018; responses were compared to the caseload information from NJ SPIRIT and SafeMeasures for identified workers during the same period.

### **Intake**

The SEP Intake caseload standard is that no worker should have more than eight new case assignments per month, no more than 12 open primary cases at any one time and no Intake worker with 12 or more open primary 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 to staff and to streamline monitoring and reporting. DCF's new methodology captures secondary case assignments on the Intake worker's monthly caseload report, which tracks and reports 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, including secondary assignments, remains unchanged.

DCF continues to implement an internal caseload verification process which serves as a quality assurance method where Intake workers are interviewed and their reported caseloads are compared to their caseloads as reported in SafeMeasures. During the period of January through June 2018, DCF interviewed a random sample of 213 Intake workers from 23 Local Offices throughout the state. DCF verified that 91 percent (193 of 213) of Intake worker caseloads were accurately reflected in SafeMeasures. Findings from DCF's caseload verification reviews is

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<sup>101</sup> The new caseload verification methodology consists of conducting a survey of a random selection of 50 workers per selected months throughout the monitoring period that includes questions about their current caseload and workload.

<sup>102</sup> Two workers were on vacation during the period the calls were made and were removed from the sample. The Monitor made at least three attempts to contact each caseworker in the sample.

shared widely with DCF staff through briefs, posted onto the Office of Quality website and presented during ChildStat meetings.

<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 June 30, 2018:***

Performance data for January through June 2018 show that 96 percent of Local Offices met the Intake caseload standards. DCF continues to meet this SEP standard.

<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 as of June 30, 2018:***

The state reported an average of 1,070 active Intake workers between January and June 2018. Among those 1,070 active Intake workers, and average of 1,017 (95%) had caseloads that met the standard. Specifically, in June 2018, 1,020 (96%) of 1,061 active Intake workers were in compliance with individual worker standards. DCF continues to meet the individual Intake worker caseload standard.

Data by Local Office show that during June 2018, performance ranged from 55 percent to 100 percent, with 40 of 46 (87%) Local Offices having all Intake workers in compliance with caseload standards.

Among the 49 workers who participated in the Monitor’s interviews for caseload verification, 20 were Intake workers. None of the 20 Intake workers reported exceeding the caseload limit of eight new assignments per month during the months of May and June 2018. Two (10%) Intake workers reported having more than 14 total cases including both primary and secondary case assignments on their caseload during the months of May and June 2018.

DCF deploys Impact Teams (a supervisor and three workers) to a unit or a Local Office in different areas when intakes are unusually high, to assist in maintaining caseload standards by taking on investigation overflow. 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 when there are new allegations of abuse or neglect. According to DCF procedure, all Child Protective Services (CPS) reports 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 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 for such cases with families who are already currently assigned 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 worker’s 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. Thus, these secondary assignments are counted as one of the Intake worker’s eight new referrals assigned in a month and as part of the total 14 open cases per 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 3 provides the reported number of secondary assignments to Intake workers by month for this monitoring period.

**Table 3: Number of CP&P Investigations and Secondary Intake Assignments by Month (January – June 2018)<sup>103</sup>**

Month	Total Investigations Assigned to Intake Workers for the Month	Secondary Intake Worker Assignments of CPS and CWS Investigations	
January	6,339	558	9%
February	5,877	498	8%
March	5,901	488	8%
April	6,457	618	10%
May	6,794	581	9%
June	5,756	504	9%

Source: DCF data

<sup>103</sup> Total excludes intakes assigned to Impact, Permanency, Adoption and Advocacy Center workers and includes intakes assigned to workers on leave.

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 during the period reviewed. The Monitor also found that an average of 24 percent of Intake workers received two or more secondary case assignments and an average of six percent of Intake workers received three or more secondary assignments each month during the monitoring period. Specifically, in the month of June 2018, 246 (23%) Intake workers received two or more secondary intake assignments and 59 (6%) 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, how these assignments affect workload and how they are measured. Of the 20 Intake workers interviewed, 12 (60%) workers reported receiving an assignment to investigate a new report on an open permanency case as a secondary worker at least once during the months of May and June 2018.

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.

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

On occasion, in order to handle the unpredictable 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 investigations. DCF reports that all staff are required to complete First Responder training prior to being assigned an investigation and non-caseload carrying staff must have been similarly trained and receive supervision by the Intake supervisor. The Monitor's review of DCF's data for the months of January through June 2018 found that approximately one percent of investigations were assigned each month to non-caseload carrying staff and that about six 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 4 shows the number and percentage of investigations assigned to non-caseload carrying staff, and Table 5 shows the number and percentage of investigations assigned to non-Intake caseload carrying staff.

As part of the phone interviews, Intake workers were asked if there were scenarios in their Local Offices in which non-caseload carrying staff could be assigned an investigation. Three of the 20 Intake workers (15%) reported that they were aware of instances in which this has happened in their office in May and June 2018. 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 4: Percentage of CP&P Investigations Assigned to Non-Caseload Carrying Staff by Month (January – June 2018)<sup>104</sup>**

Month	Total Investigations Received in the Month	Number and Percentage of Investigations Assigned to Non-Case Carrying Staff	
January	6,867	72	1%
February	6,306	52	1%
March	6,393	77	1%
April	6,861	54	1%
May	7,354	90	1%
June	6,176	62	1%

Source: DCF data

**Table 5: Percentage of CP&P Investigations Assigned to Non-Intake Caseload Carrying Staff by Month (January – June 2018)**

Month	Total Investigations Received in the Month	Number and Percentage of Investigations Assigned to Non- Intake Caseload Carrying Staff <sup>105</sup>	
January	6,867	456	7%
February	6,306	377	6%
March	6,393	415	6%
April	6,861	350	5%
May	7,354	470	6%
June	6,176	358	6%

Source: DCF data

### 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.

<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.

<sup>104</sup> Data are provided for investigations assigned within five days of intake receipt date and do not reflect additional assignments to an investigation after the 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 six percent.

<sup>105</sup> This includes Permanency, Adoption, Impact and Advocacy Center caseload carrying workers.

***Performance as of June 30, 2018:***

Performance data for January through June 2018 show that 98 percent of Local Offices and 98 percent of individual workers continued to maintain the adoption caseload standard during this period.<sup>106</sup>

Among the 49 workers who participated in the phone interviews conducted by Monitor staff for caseload verification, nine were Adoption workers. All nine adoption workers interviewed reported caseloads within the standard during the months of May and June 2018.

**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.

***Performance as of June 30, 2018:***

Performance data for January through June 2018 show that 100 percent of Local Offices and 100 percent of individual workers continued to maintain the permanency caseload standard during this period.<sup>107</sup>

Among the 49 workers who participated in telephone interviews conducted by Monitor staff for caseload verification, eight were Permanency workers. All eight permanency workers interviewed reported caseloads within the standard during the months of May and June 2018.

**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.

<sup>106</sup> Reported performance is the average of DCF’s performance in meeting individual caseload standards during this six month monitoring period.

<sup>107</sup> Reported performance is the average of DCF’s performance in meeting individual caseload standards during this six month monitoring period.

***Performance as of June 30, 2018:***

DCF data show 100 percent of individual workers maintained the IAIU caseload standard for the period of January through June 2018.

**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 June 30, 2018:***

Performance data for January through June 2018 show that 100 percent of CP&P Local Offices had sufficient supervisors to maintain ratios of five workers to one supervisor.

## M. DEPUTY ATTORNEYS GENERAL 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 June 30, 2018:*

As of June 30, 2018, 135 Deputy Attorneys General (DAsG) staff positions assigned to work with DCF were filled. Of those, nine DAsG were on full time leave. Thus, there were a total of 126 (93%) 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 the 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, youth and families, 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 Case Practice Model (CPM). Select QR results related to both Child/Youth and Family Status and Practice/System Performance are also used to report on several SEP requirements, three of which are designated Outcomes *To Be Achieved*: Quality of Teaming (SEP IV.B.20), Quality of Case Plans (SEP IV.D.23) and Services to Support Transition (SEP IV.J.44); and two of which are designated Outcomes *To Be Maintained*: Educational Needs (SEP III.G.11) and Quality of Case Planning and Services for Older Youth (SEP IV.K.46). QRs take place during a single week and over the course of two years, occur in 21 counties and involve the review of a total of almost 400 children, youth and families. Given the small sample size of cases from each county, SEP measures based on the QR scores are reported by the Monitor on an annual basis. The Monitor will report on the data for all QR measures for the period January 1 through December 31, 2018 in the next monitoring report.

When conducting a QR involving children/youth under age 18, the 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 children/youth and their families. The results from reviews provide critical qualitative data on child/youth and family status and practice/system performance.

### *CONTINUOUS QUALITY IMPROVEMENT*

At the conclusion of each week of the QR, DCF's Office of Performance, Management and Accountability (OPMA) work with staff in each county, through its Office of Quality, to develop a Performance Improvement Plan (PIP) with short and long term goals to strengthen practice. 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. On a separate schedule, DCF conducts monthly ChildStat meetings – a case conferencing forum in which a selected case is used as an opportunity to critically analyze policy, procedure and practice.

DCF plans to restructure its continuous quality improvement (CQI) efforts. Going forward, DCF wants to continue with both the QR and ChildStat processes but structure them in a more streamlined way. The Monitor will report in more detail on the plans for this new CQI model in the next monitoring report.

## 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.

In 2014, DCF engaged Rutgers University School of Social Work to conduct a multi-year Needs Assessment to identify the strengths and needs of families with children at risk of entering out-of-home placement as well as those already in care. A detailed description of DCF's Needs Assessment process is available in previous monitoring reports, and DCF's three interim reports are available on the DCF website.<sup>108</sup> In sum, Phase I involved a review of DCF internal reports and assessments completed by DCF and its partners from CY 2008 to CY 2014. Phase II involved an analysis of the findings from Phase I and the identification of seven areas of need: caregiver mental health, caregiver substance abuse, child mental health, child substance abuse, poverty, housing and domestic violence. During Phase III of the Needs Assessment process, Rutgers identified three additional 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.

During Phase III, researchers at the Child Welfare and Well-Being Research Unit at Rutgers School of Social Work conducted almost 2,000 surveys with CP&P staff, including (a) intake workers and permanency workers (637); (b) parents from families of origin, including those with children in the home (391) and those placed out-of-home (185); and (c) resource parents providing out-of-home care (739). In March 2018, DCF published its report regarding these surveys in its *DCF Needs Assessment 2018 Report #3: Survey Findings and Synthesis*.<sup>109</sup> During the monitoring period, DCF leadership considered how the findings from this report can be utilized to refine its service array to best meet family's needs. Going forward, DCF plans to redesign its Needs Assessment process. The Monitor will discuss the plans for this redesign in the next monitoring report.

<sup>108</sup> To see DCF's Needs Assessment Interim Reports from January 2015, March 2016, and April 2017, go to: <http://www.nj.gov/dcf/childdata/protection/>

<sup>109</sup> To see DCF's Final Needs Assessment 2018 Report #3: Survey Findings and Synthesis, go to: <http://www.nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Phase.IV.Report-March2018.pdf>.

## **P. FISCAL YEAR BUDGET**

Governor Murphy's proposed FY 2019 budget, which was approved by the legislature in June 2018, maintains funding for programs and services related to the core mission of DCF.

The budget, effective July 1, 2018, includes \$1.15 billion in state funds. The budget includes a \$3.7 million increase for Mobile Response and Stabilization Services within the Children's System of Care, as well as \$750,000 for the Displaced Homemaker program, which will contribute to five new programs and a statewide expansion. Commissioner Beyer testified in May 2018 in support of the proposed allocations, which include funding for all of DCF's budget requests.

DCF received a supplemental appropriation in FY 2018 for \$5.477 million to support utilization trends in the CP&P out-of-home placement, family support services, and subsidized adoption accounts.

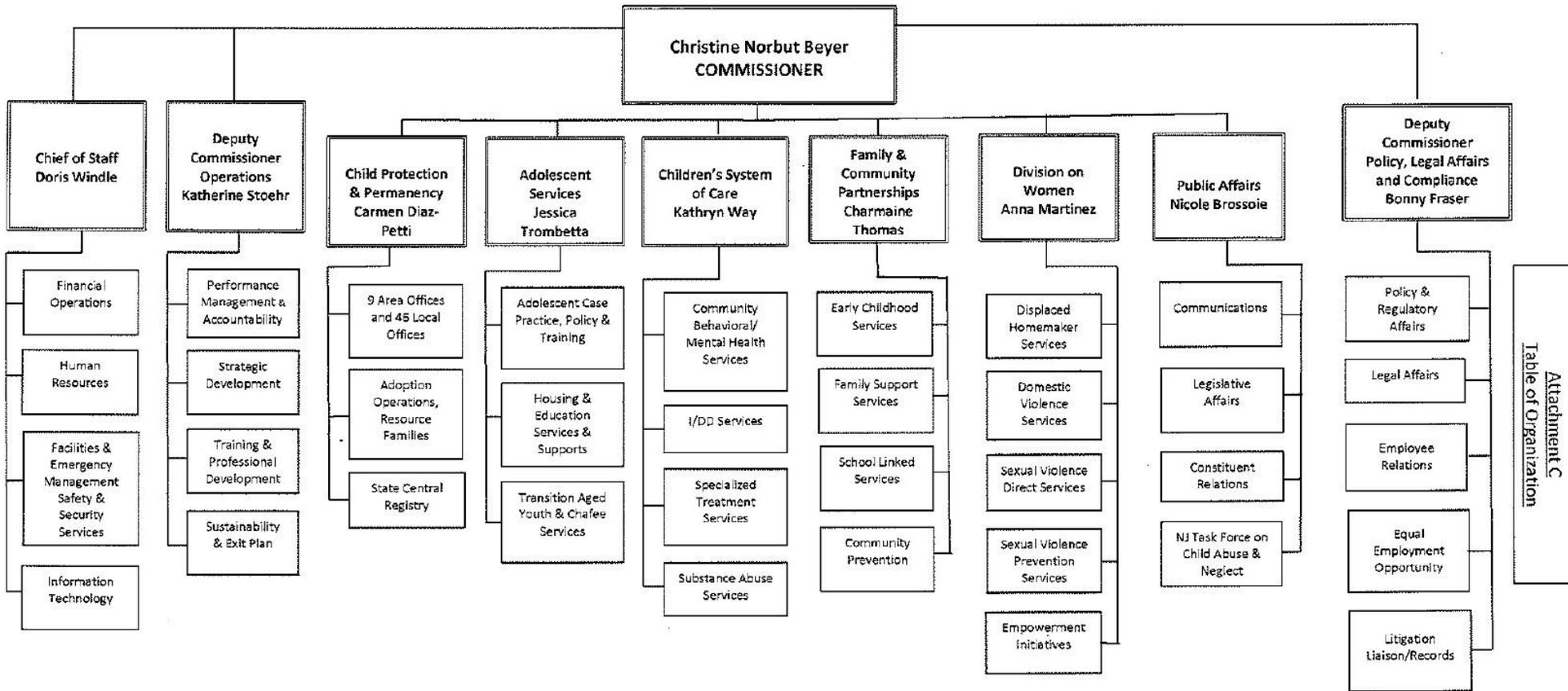
**APPENDIX: A**  
**Glossary of Acronyms Used in the Monitoring Report**

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<b>AQC:</b> Area Quality Coordinators	<b>HCCM:</b> Health Care Case Manager
<b>CFSR:</b> Child and Family Services Review	<b>IAIU:</b> Institutional Abuse Investigative Unit
<b>CHU:</b> Child Health Unit	<b>ILA:</b> Independent Living Assessment
<b>CIACC:</b> Children’s Interagency Coordinating Council	<b>LGBTQI:</b> Lesbian, Gay, Bisexual, Transgender, Questioning or Intersex
<b>CP&amp;P:</b> Division of Child Protection and Permanency	<b>KLG:</b> Kinship Legal Guardian
<b>CPL:</b> Case Practice Liaisons	<b>LOM:</b> Local Office Manager
<b>CPM:</b> Case Practice Model	<b>MSA:</b> Modified Settlement Agreement
<b>CPS:</b> Child Protective Services	<b>OAS:</b> Office of Adolescent Services
<b>CQI:</b> Continuous Quality Improvement	<b>OPMA:</b> Office of Performance Management and Accountability
<b>CRC:</b> Child Research Center	<b>PIP:</b> Performance Improvement Plan
<b>CSOC:</b> Children’s System of Care	<b>PPFs:</b> Protective and Promotive Factors
<b>CSSP:</b> Center for the Study of Social Policy	<b>QR:</b> Qualitative Review
<b>CWS:</b> Child Welfare Services	<b>SACWIS:</b> Statewide Automated Child Welfare Information System
<b>DAsG:</b> Deputy Attorneys General	<b>SEP:</b> Sustainability and Exit Plan
<b>DCF:</b> Department of Children and Families	<b>SCR:</b> State Central Registry
<b>FAFS:</b> Foster and Adoptive Family Services	<b>SDM:</b> Standard Decision Making tool
<b>FFT-FC:</b> Family Functional Therapy – Foster Care	<b>SIBS:</b> Siblings in Best Placement Settings
<b>FSC:</b> Family Success Centers	<b>USDA:</b> United States Department of Agriculture
<b>FTM:</b> Family Team Meeting	<b>YAB:</b> Youth Advisory Board

## APPENDIX: B

### New Jersey Department of Children and Families



Attachment C  
Table of Organization

Updated September 11, 2018