

Progress of the New Jersey Department of Children and Families

Monitoring Period XVII
(January 1 – December 31, 2015)

Charlie and Nadine H. v. Christie

June 8, 2016

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

**Monitoring Period XVII Report for
Charlie and Nadine H. v. Christie
January 1 – December 31, 2015**

TABLE OF CONTENTS

I.	INTRODUCTION	1
II.	SUMMARY OF PERFORMANCE	7
III.	CHILD AND FAMILY OUTCOMES AND CASE PRACTICE PERFORMANCE MEASURES	10
IV.	FOUNDATIONAL ELEMENTS	44
	A. DATA TRANSPARENCY	44
	B. CASE PRACTICE MODEL	44
	C. STATE CENTRAL REGISTRY OPERATIONS	45
	D. APPROPRIATE PLACEMENTS	46
	E. SERVICE ARRAY	47
	F. MEDICAL AND BEHAVIORAL HEALTH SERVICES	50
	G. TRAINING	52
	H. FLEXIBLE FUNDING	52
	I. RESOURCE FAMILY CARE SUPPORT RATES	53
	J. PERMANENCY	53
	K. ADOPTION PRACTICE	54
V.	TO BE ACHIEVED AND TO BE MAINTAINED	55
	A. INVESTIGATIONS	55
	B. FAMILY TEAM MEETINGS	59
	C. QUALITY OF CASE SERVICE PLANNING	69
	D. EDUCATION	73
	E. VISITATION	74
	F. PLACEMENT	81
	G. MALTREATMENT	86
	H. TIMELY PERMANENCY	89
	I. CHILD HEALTH UNITS	94
	J. OLDER YOUTH	95
	K. SERVICES TO SUPPORT TRANSITION	99
	L. CASELOADS	100
	M. DAsG STAFFING	107

N. ACCOUNTABILITY THROUGH THE QUALITATIVE REVIEW AND THE PRODUCTION AND USE OF ACCURATE DATA	108
O. NEEDS ASSESSMENT.....	111
P. FISCAL YEAR 2017 BUDGET	113

APPENDICES

A. Glossary of Acronyms Used in Monitoring Report	A-1
B. Sustainability and Exit Plan	B-1
C. DCF Organizational Chart as of October 2015.....	C-1

LIST OF TABLES

TABLE

1.	<i>Charlie and Nadine H. v. Christie</i> Child and Family Outcome and Case Practice Performance Measures (Summary of Performance as of December 31, 2015).....	12
2.	Family Team Meetings Held within 45 days (January – November 2015).....	61
3.	Family Team Meetings Held within the first 12 months (January – December 2015)	63
4.	Family Team Meetings Held After 12 Months in Placement with a Goal of Reunification (January – December 2015)	65
5.	Family Team Meetings Held After 12 Months in Placement with a Goal other than Reunification (January – December 2015)	67
6.	Case Plans Developed within 30 and 60 days of Child Entering Placement (January – December 2015)	71
7.	CP&P Individual Caseload Standards	101
8.	Qualitative Review Gender and Age Demographics (January – December 2015)	109
9.	Qualitative Review Race and Ethnic Demographics (January – December 2015)	109
10.	Qualitative Review Child and Family Status Results (January – December 2015)	110
11.	Qualitative Review Practice/System Performance Results (January – December 2015)	111

LIST OF FIGURES

FIGURE

1. Percentage of Abuse/Neglect Investigations Completed within 60 days (June 2009 – November 2015).....	56
2. Percentage of Abuse/Neglect Investigations Completed within 90 days (January – November 2015).....	57
3. Family Team Meetings Held within 45 days of Entry into Care (January – December 2015)	62
4. Family Team Meetings Held within the First 12 months in Placement (January – December 2015)	64
5. Family Team Meetings Held After 12 months in Placement with a Goal of Reunification (January – December 2015)	66
6. Family Team Meetings Held After 12 months in Placement with a Goal other than Reunification (January – December 2015)	68
7. Qualitative Review (QR) Cases Rated Acceptable on Family Teamwork (January – December 2015).....	69
8. Qualitative Review (QR) Cases Rated Acceptable on Quality of Case Plans and Components of Planning (January – December 2015)	73
9. Percentage of Families who had at least Twice per month Face-to-Face Contact with Caseworker when the Goal is Reunification (January – December 2015)	76
10. Average Monthly Percentage of Children who had Weekly Visits with their Parent(s) (January – December 2015).....	78
11. Percentage of Children who had at least Twice Monthly Visits with their Parent(s) (January – December 2015).....	79
12. Percentage of Children in Custody who had at least Monthly Visits with Siblings, for Children not Placed with Siblings (December 2010 – December 2015).....	80
13. Percentage of Children in Custody who had at least Monthly Visits with Siblings, for Children not Residing with Siblings (January – December 2015).....	81
14. Percentage of Sibling Groups of Two or Three Placed Together (CY 2008 – CY 2015).....	82
15. Percentage of Sibling Groups of Four or More Placed with at Least One Other Sibling (CY 2010 – CY 2015).....	83
16. Percentage of Children Entering care who have No More than One Placement Change during the 12 months Following their Date of Entry (CY 2007 – CY 2014)	85
17. Percentage of Children Entering Case who have No More than One Placement Change during the 13 to 24 Months Following their Date of Entry (CY 2009 – CY 2013).....	86
18. Percentage of Children who Re-Entered Custody within One year of Date of Exit (CY 2007 – CY 2013)	89
19. Percentage of Children who Entered Care in a 12 Month Period who Discharged to Permanency within 12 months of Entering Foster Care (CY 2007 – CY 2014)	91

20.	Percentage of Children Who Entered Foster Care in a 12 Month Period Who Discharged to Permanency within 24 months of Entering Foster Care (CY 2007 – CY 2013)	92
21.	Percentage of Children who Entered Foster Care in a 12 Month Period Who Discharged to Permanency within 36 months of Entering Foster Care (CY 2007 – CY 2012)	93
22.	Percentage of Children Who Entered Foster Care in a 12 Month Period who Discharged to Permanency within 48 months of Entering Foster Care (CY 2007 – CY 2011)	94
23.	Percentage of Youth Aged 14 – 18 with Independent Living Assessments (December 2009 – December 2015)	96
24.	Qualitative Review (QR) Cases Rated Acceptable for Services to Older Youth (January – December 2015)	97
25.	Youth Exiting Care with Housing (January 2010 – December 2015)	98
26.	Youth Exiting Care without Who are Employed or Enrolled in Educational or Vocational Training Program (January 2010 – December 2015)	99
27.	Qualitative Review (QR) Cases Rated Acceptable for Services to Support Transitions (January – December 2015)	100
28.	Percentage of CP&P Local Offices Meeting Average Caseload Standards for Adoption Workers (June 2009 – December 2015)	104
29.	Average Percentage of Adoption Workers with Individual Caseloads at or Below the Applicable Individual Caseload Standards (June 2009 – December 2015)	105

I. INTRODUCTION

The Center for the Study of Social Policy (CSSP) was appointed in July 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. Christie*. As Monitor, CSSP is charged with independently assessing New Jersey's compliance with the goals, principles and outcomes of the original Court Order and the Modified Settlement Agreement (MSA)¹ aimed at improving the state's child welfare system. The MSA was structured in two phases: Phase I focused on building infrastructure and standardizing caseloads, and Phase II focused on quality case practice and outcome measures.

On November 4, 2015, the court approved a new Sustainability and Exit Plan (SEP)² that supersedes the MSA, attached as Appendix B. The SEP, which is the product of a year of productive negotiations between the parties, intentionally recognizes and accounts for the significant progress the state has made since the lawsuit began, while at the same time mandates a continued focus on those areas where additional improvements are needed.

This is the first monitoring report measuring progress under the SEP and includes performance data for the period January 1, 2015 through December 31, 2015.³ Under both the MSA and the SEP, the Monitor is to issue a report every six months on the state's performance in meeting the agreed upon performance measures. However, by agreement of the parties, this report – because it covers the period during which the parties were in negotiations on the SEP – covers performance from January to December 2015 or calendar year 2015 (CY 2015). The next monitoring report will resume reporting on six month intervals and will cover the state's progress from January 1 to June 30, 2016.

The SEP includes three enforceable categories of requirements. All the requirements are to be guided by the same important principles that guided the original Court Order and the MSA:

- *Foundational Elements*: The SEP includes as Foundational Elements many of the MSA's Phase 1 accomplishments, particularly those related to DCF's infrastructure and preserves and solidifies the state's commitment to maintain these as Foundational Elements of a high quality child welfare system. These Foundational Elements, including such things as maintaining a high quality training program for staff and a functional management information system (NJ SPIRIT), remain enforceable in the unanticipated event that the state fails to maintain them. The Foundational Elements are described in further detail and included within Section IV of this report.
- *Outcomes To Be Maintained*: This category includes all requirements in the SEP for which the state has satisfied the outcomes and specified performance targets for at least the most recent six-month period. The state is expected to maintain these performance levels as verified by the Monitor. The SEP establishes criteria for modest fluctuation and

¹ To see the full Agreement, go to: http://nj.gov/dcf/documents/home/Modified_Settlement_Agreement_7_17_06.pdf

² To see the full SEP, go to: <http://www.state.nj.us/dcf/about/welfare/Sustainability-and-Exit-Plan-110415.pdf>

³ Copies of all Monitoring Reports can be found at: <http://www.cssp.org/publications/child-welfare>

a corrective action/dispute resolution process if performance on an item in Maintenance falls below expectations in ways that are substantial and not temporary. As additional measures currently designated as *To Be Achieved* are met, they will be re-designated as *To Be Maintained*. There are currently 12 performance measures in the *To Be Maintained* category. Outcomes *To Be Maintained* are described in further detail and included within Section V of this report.

- *Outcomes To Be Achieved*: This category includes all items for which DCF has not yet met the required level of performance. There are currently 36 performance measures in the *To Be Achieved* category. If, at the conclusion of any six month monitoring period the Monitor determines that the state has satisfied a performance measure in this category, the Monitor will designate the measure *To Be Maintained*; if the Monitor determines the state has not satisfied the performance measure, it will continue as *To Be Achieved*. Outcomes *To Be Maintained* are described in further detail and included within Section V of this report.

The SEP also modified some MSA outcomes and performance measures, reflecting the parties' understanding and agreement that some of the MSA's original targets were either not feasible, created negative, unintended consequences, or failed to reflect what is now considered child welfare best practice. For example, staff and stakeholders consistently reported that there are circumstances where workers need additional time to gather pertinent information in determining investigative findings (e.g., investigations involving the prosecutor's offices and sexual abuse cases). In those cases, adhering to a 60-day closure timeframe could compromise the quality of the investigation. Parties therefore agreed to modify the target and methodology to support best practice; the modifications provide a mechanism to include investigations that have documented, acceptable extension requests to complete investigations beyond the 60-day timeframe as compliant. DCF's Division of Child Protection and Permanency (CP&P) policy⁴ outlines acceptable reasons for extension requests and the supervisory approval process.

Refinements were also made in several SEP performance measures related to permanency timeliness and outcomes. The SEP continues to include both process as well as outcome measures and performance standards related to the quality of case practice and the MSA's caseload measures.

The Monitor's access to data and its responsibilities to confirm and verify data reports and statistics provided by the state remain unchanged under the SEP. Subsequent to the current monitoring period that covers the full CY 2015, the Monitor will continue to produce reports for the court and the public based upon six month monitoring periods. In order to build capacity within DCF, the Monitor will look first to the state's data for analysis, but retains the authority to engage in independent data collection and analysis where needed. The state has committed to expanding the data that it publishes on its public website.⁵

⁴ CP&P Policy Manual 5-28-2013, Intake Investigation and Response, II.C.5.125

⁵ To see DCP&P public website, go to: <http://www.state.nj.us/dcf/about/>

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

- Commissioner's Monthly Report⁶ – Produced monthly. This report gives a broad data snapshot of various DCF services. The report includes information from CP&P, Adolescent Services, Institutional Abuse Investigation Unit (IAIU), Children's System of Care (CSOC), Family & Community Partnerships and the Division on Women.
- Screening and Investigations Report⁷ – Produced monthly. This report details State Central Registry activity including data regarding calls to the Child Abuse and Neglect Hotline, assignments to CP&P offices and trends in Child Protective Services (CPS) Reports and Child Welfare Services (CWS) Referrals.
- Workforce Report⁸ – Produced annually. This report provides information regarding the demographics and characteristics of current workers, as well as a variety of indicators of workforce planning and development.
- Demographics Report⁹ – Produced quarterly. This report provides demographic data on children and youth receiving in-home and out-of-home services.
- Abuse and Neglect Report¹⁰ – Produced annually. This report provides data on abuse and neglect findings including type of maltreatment, age of victim and county. The report also includes institutional abuse reported by facility type and county.
- Qualitative Review Report¹¹ – Produced annually. This report assesses the status of children in care throughout the state, as well as the overall performance of DCF systems and practice models. The qualitative data is used to uncover trends and provide insight on issues within the state. Information previously included in Qualitative Review (QR) Reports will now be included in the Work with Children, Youth and Families Reports.
- Children's InterAgency Coordinating Council Report¹² – Produced monthly. This summary details call and service activity for the Children's System of Care. It also includes the demographics of the youth, caller types, reasons for calls, resolutions to calls and services provided.

⁶ To see the February 2016 Commissioner's Monthly Report, go to:

http://www.state.nj.us/dcf/childdata/continuous/Commissioners.Monthly.Report_2.16.pdf

⁷ To see the December 2015 Screening and Investigations Report, go to:

http://www.state.nj.us/dcf/childdata/continuous/Screening.and.Investigation.report_12.15.pdf

⁸ To see the 2015 Workforce Report, go to: http://www.state.nj.us/dcf/childdata/orgdev/NJ.DCF.Workforce.Report_2015.pdf

⁹ To see the 4th Quarter 2015 Demographics Report, go to: http://www.state.nj.us/dcf/childdata/continuous/Demo.2015_Q4.pdf

¹⁰ To see the 2014 Abuse and Neglect Report, go to:

http://nj.gov/dcf/childdata/protection/2014_AnnualAbuseNeglectReport.pdf

¹¹ To see the 2014 Qualitative Report, go to: <http://www.nj.gov/dcf/about/divisions/opma/Qualitative%20Review%20-%202014%20Annual%20Report.pdf>

¹² To see January 2016 Children's InterAgency Coordinating Council Report, go to:

http://www.state.nj.us/dcf/childdata/continuous/CIACC_Dashboard_AllCounty_1.16.pdf

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- New Jersey Youth Resource Spot¹³ – Ongoing and updated as relevant. The website offers the latest resources, opportunities, news and events for young people. This site includes a list of current Youth Advisory Boards, as well as additional resources available in each county and statewide.
 - DCF Needs Assessment¹⁴ – DCF will produce an annual report on its website and will report twice annually to the Monitor. The annual report presents interim findings on DCF's three year multi-phase needs assessment process to identify the resources needed to serve families with children at risk for entering out-of-home placements and those already in placement.

Reports the state has committed to publishing on DCF's website include:

- Our Work with Children, Youth and Families Report – Produced annually. This report will be an analysis of DCF's implementation of the Case Practice Model, largely utilizing annual data from the QRs as well as selected qualitative data sets. The first of these reports is expected to be published in fall of 2016.
- CP&P Outcomes Report – Produced annually. This report will review all of the longitudinal outcome data identified in the SEP. This report will be based on CY data. The first of these reports is expected to be published in fall of 2016.
- Healthcare of Children in Out-of-Home Placement – Produced annually. This report will be a review of the health indicators identified in the SEP and will be based on state FY (July 1 - June 30) data. The first of these reports is expected to be published by December 2016.
- Adoptions Report – Produced annually. This report will be a review of CP&P adoption data and practice related to SEP requirements and will be based on CY data. The first of these reports is expected to be published in fall of 2016.

Additionally, the SEP establishes a fair and open dispute resolution process through which the Monitor will consider information from all parties when making determinations about *To Be Maintained* or *To Be Achieved* designations. The ultimate authority for those designations remain with the Monitor after consideration of evidence. The SEP also establishes a process for addressing non-compliance with enforceable provisions of the SEP that requires the parties to negotiate in good faith to design and implement corrective action before resorting to litigation.

Finally, the SEP creates a clear path toward exiting the lawsuit based on the state demonstrating that it has achieved compliance with all provisions of the SEP and sustained performance for a continuous period of at least 12 months.

¹³ To see the New Jersey Youth Resource Spot, go to: <http://www.njyrs.org/>

¹⁴ To see the CP&P Needs Assessment, go to: http://www.state.nj.us/dcf/childdata/protection/DCF.Needs.Assessment.Interim.Report_3.16.pdf

Methodology

The primary sources of information on New Jersey's progress are quantitative and qualitative aggregate and back-up data supplied by DCF and independently validated by the Monitor.¹⁵ DCF provides back-up data and access to staff at all levels to enable the Monitor to verify performance. For this report, the Monitor was involved in the following additional verification activities:

- **Caseload Data Verification**

The Monitor conducted a telephone survey of 257 workers to verify their individual caseloads during the periods of January to June 2015 and July to December 2015. Findings from this survey are discussed in Section V.L – Caseload – of this report.

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

The Monitor collaborated with DCF to review case records of 81 youth ages 18 to 21 years who exited care between January and June 2015 without achieving permanency and 72 youth ages 18 to 21 who exited care between July and December 2015 without achieving permanency. The review focused on the education, housing and employment status of these youth to determine if performance met the level required by the SEP. Findings from the review are discussed in Section V.J – Older Youth – of this report.

- **Visitation Data Review**

The Monitor conducted a review of a statistically significant sample of 160 cases requiring caseworker visits with parents and 181 cases requiring parent visits with children in which documentation indicated that the parent was unavailable or the visit was not required during the months of March, June and August 2015. This is discussed in Section V.E – Visitation – of this report.

- **Investigation Extension Data Review**

The Monitor conducted a review of a statistically significant sample of 158 cases where an extension request to complete investigations beyond the 60 day time frame was submitted and approved by a supervisor during the months of March, June and August 2015. This is discussed in Section V.E – Visitation – of this report.

- **Family Team Meeting Data Review**

The Monitor reviewed 30 cases from March, June and August 2015 to verify how workers were using and documenting legitimate reasons when the required Family Team Meetings (FTMs) did not occur. Further discussion of the current performance is included in Section V.B – Family Team Meetings – of this report.

¹⁵ Not all data are verified for each monitoring period.

- **Site Visits**

Between January and December 2015, the Monitor visited seven Local Offices and met with leadership and staff to discuss current case practice strategies and to hear directly from frontline staff and some local providers.

- **Other Monitoring Activities**

The Monitor interviewed and/or visited multiple internal and external stakeholders of New Jersey's child welfare system, including staff at all levels, contracted service providers, youth, relatives, birth parents, advocacy organizations and judicial officers. The Monitor also periodically attends DCF's ChildStat meetings, statewide Child Fatality/Near Fatality Review Board meetings, adolescent practice forums, Area Director meetings, youth permanency meetings, Youth Advisory Board meetings and participates in statewide Qualitative Reviews.

DCF has fully cooperated with the Monitor in notifying Monitor staff and facilitating their participation in relevant activities.

Structure of the Report

Section II of the report provides an overview of the state's accomplishments and challenges. Section III provides summary performance data on each of the outcomes and performance measures required by the SEP in Table 1, *Charlie and Nadine H. v. Christie* Child and Family Outcome and Case Practice Performance Measures (*Summary of Performance as of December 31, 2015*). Section IV provides details and discussion of the Foundational Elements.

Section V of the report provides more detailed data and discussion of performance on measures *To Be Maintained* and Measures *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 visitation (Sections V.B, V.C & V.E);
- Placement of children in out-of-home settings, incidence of maltreatment of children in foster care and abuse of children when they reunite with families (Sections V.F & V.G)
- Efforts to achieve permanency for children either through reunification with family, legal guardianship or adoption (Section V.H);
- Provision of health care services to children and families (Section V.I)
- Services to older youth (Sections V.J & V.K);
- Caseloads (Section V.L)
- DAsG Staffing (Section V.M);
- Accountability through the Qualitative Review and the production and use of accurate data (Section V.N)
- Needs Assessment (Section V.O); and
- Fiscal Year 2015 budget (Section V.P).

II. SUMMARY OF PERFORMANCE

This is the first report measuring progress under the SEP and includes performance data for the period January 1, 2015 through December 31, 2015.

During this period, DCF continued to maintain acceptable performance on each Foundational Element included in the SEP. Examples of continued performance on Foundational Elements include:

- Quality performance on nearly all of the SEP health care measures that assess whether the children in out-of-home placement have dependable access to health care;
- Efficient and effective operation of the State Central Registry (SCR) that receives and triages reports of alleged child abuse or neglect and maintenance of quality assurance mechanisms to support good SCR practice; and
- A comprehensive and reliable training program for child welfare staff and supervisors on pre-service, in-service and other training needs.

Between January and December 2015, DCF also maintained performance on the 12 measures the SEP defines as Outcomes *To Be Maintained*. Examples of areas *To Be Maintained* that were sustained include the timeliness of institutional abuse investigations (IAI), meeting ongoing case planning requirements and caseworker visits with children in custody.

DCF's focus for improvement is now on the SEP Outcomes *To Be Achieved*. In order to successfully make progress in the remaining areas of the SEP yet to be achieved, the state has been steadily building its continuous quality improvement capacity. In CY 2015, it refined and strengthened its Qualitative Review (QR) protocol and process, intensified efforts that support quality supervision and made significant strides towards becoming a more transparent and continuous learning organization.

This monitoring report demonstrates the state's continued progress during CY 2015. Nine of the 36 SEP performance measures designated as *To Be Achieved* have been met for all of CY 2015 and an additional five were achieved for the six month period between July and December 2015.¹⁶ Three performance measures were partially met during this monitoring period.¹⁷

In accordance with the SEP, based on its review of the evidence, the Monitor is to determine whether DCF's performance during the monitoring period satisfies each measure. If it does, the Monitor will certify the measure as *To Be Maintained*. In separate correspondence, the Monitor

¹⁶ Measures met for CY 2015 (or most recent data available) include: IV.A.14 Timeliness of Completion (90 days); IV.B.16 Initial Family Team Meeting; IV.F.29 Parent-Child Visits – weekly; IV.F.30 Parent-Child Visits – bi-weekly; IV.G.32, Placing Siblings; IV.G.33 Sibling Placements of Four or More Children; IV.G.36 Placement Stability, 13-24 Months in Care; IV.I.40, Permanency within 12 Months; and IV.K.45 Independent Living Assessments. Measures met for July through December 2015 include: IV.B.18, Subsequent FTMs after 12 months – Reunification Goal; IV.E.26 Adoption Local Office Caseload; IV.G.34 Recruitment for Sibling Groups of Four or More; IV.H.37 Repeat Maltreatment (In-home); and IV.K.46; Quality of Case Planning and services.

¹⁷ Measures partially met during this monitoring period include: IV.C.21, Needs Assessment; IV.D.22, Initial Case Plans; and IV.I.43, Permanency within 48 Months.

will be providing information to the parties and the court on those measures the Monitor intends to certify as *To Be Maintained*.

A summary of the achievements, strengths and challenges of current performance on outcomes designated in the SEP as *To Be Achieved* follows. Data on all performance measures are provided in Table 1 and the remaining sections of this report.

Implementation of the Case Practice Model

The SEP places an emphasis on the quality of New Jersey's case practice, measured in large part by the state's QR. Between January and December 2015, DCF's Office of Performance Management and Accountability (OPMA) consulted with other states, national experts, the Monitor and community-based providers to update key portions of the QR process and protocol and to create a more user-friendly protocol with a common language for the workforce on DCF's practice expectations. Beginning in January 2016, DCF revised the QR protocol to align with case practice. Using a new sampling strategy based on the number of children served in each CP&P Local Office, between 10 and 30 cases will be reviewed in each county, every other year, with cases drawn from each Local Office. Local Office supervisors will be included as reviewers in order to better integrate the QR process and ratings into case practice at the local level.

In the QRs conducted from January to December 2015, using the original QR protocol, the status of children and families continued to be rated as acceptable in the majority of cases in most key areas including safety, living arrangement, learning and development and physical health of the child, a significant achievement for the state. Overall, in CY 2015 key QR results on practice performance indicators, while improved, remain below acceptable levels expected by the Monitor and DCF in areas such as family teamwork, case planning and engagement with parents (See Section V.N).

A critical component of the Department's Case Practice Model (CPM) is the use of Family Team Meetings (FTMs) to engage families and their formal and informal supports to discuss the families' strengths and needs, craft individualized service plans and track progress toward accomplishing case plan goals. There are five performance measures in the SEP pertaining to FTMs; DCF met the SEP requirement that FTMs be held within 45 days of a child's removal, as well as the SEP standard requiring children with a goal of reunification to have at least three FTMs each year, but has yet to meet the remaining three SEP performance measures in this area.

Performance on completing case plans remains strong; DCF continues to meet the standard for reviewing and modifying case plans within the required six month time frame and is close to meeting the standard for completing case plans within 30 days of a child's placement.

The Monitor staff are impressed with the Agency's commitment to the CPM and quality case practice in site visits conducted to three Local Offices in December 2015 in diverse geographic areas of the state. Monitor staff also heard about the need for more resource families willing to care for large sibling groups and adolescents; transportation and capacity challenges in rural communities for families trying to access services and the need for more Spanish speaking service providers. DCF leaders continue to use their continuous quality improvement (CQI)

processes, including ChildStat and the QRs, to communicate that quality of work and attention to performance metrics are both important.

Visitation

DCF's performance on weekly visits between parents and children in out-of-home care exceeded the required SEP target every month during CY 2015 and performance on bi-weekly visits exceeded the standard for most months. The required SEP levels of performance for frequency of caseworker visits with parents when the goal is reunification and for visits between siblings who were placed apart were not met.

Placement of Children in Out of Home Care

DCF met each of the SEP requirements for placing sibling groups together, a significant achievement. According to the most recent data available (from children entering foster care in CY 2013), DCF also met the SEP performance target that children in care between 13 and 24 months have no more than one placement change. The stability of children during their first year in out-of-home placement is within reach, however it remains slightly below the SEP standard.

Repeat Maltreatment

DCF showed significant improvement in the rate of repeat maltreatment of children who remain in their homes and met the SEP target for this performance measure. However, an area that continues to challenge the state is the maltreatment of children after reunification and re-entry to care within one year of reunification. DCF leadership continues to target this area in its CQI processes.

Permanency for Children in Out-of-Home Care

The SEP modified the way in which permanency outcomes are measured to reflect advances in the field's understanding of how best to assess permanency progress. The SEP includes four Outcomes *To Be Achieved* related to timely permanency, each measured through entry cohorts of children and youth. The measures look at their achievement of permanency with specific timeframes including permanency within 12 months, 24 months, 36 months and 48 months. Data for the most recent calendar years available show that DCF's performance meets the required performance level for permanency within 12 months and partially meets the required level for permanency within 48 months. DCF is close to meeting the required levels for the remaining two cohorts, permanency within 24 and 36 months.

Services to Older Youth

DCF's work with older youth has been steadily improving; the state met the requirements for two standards this monitoring period – 1) completing Independent Living Assessments for youth and 2) providing acceptable quality case management and service planning as measured by the QR.

DCF continues to update and modify policies and practices to support well-being and permanency for youth involved with DCF and to achieve better outcomes for youth after they exit care. For example, in March 2015, the Office of Adolescent Services (OAS) received 100 Project Based Section 8 housing vouchers from New Jersey's Department of Community Affairs to provide long-term, stable and supportive housing opportunities for young people aging out of foster care. In August 2015, the federal government awarded DCF funding to begin implementation of its Youth at Risk of Homelessness initiative. The grant will be used to focus on four outcome areas of housing stability, permanency, well-being and education/employment to prevent and address youth homelessness. In the previous six months, DCF finalized new policies related to its LGBTQI population, with input from its LGBTQI Youth Committee, a group of community advocates.

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 on 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 requirements pertaining to elements such as caseloads and appropriate staffing.

Many of the measures are assessed using data from NJ SPIRIT and SafeMeasures,¹⁸ reviewed and in some areas independently validated by the Monitor. Some data are also provided through DCF's work with Hornby Zeller Associates, Inc. who assist with data analysis. Data provided in the report are as of December 2015, or the most current data available.

¹⁸ SafeMeasures is a data warehouse and analytical tool that allows tracking of critical child welfare indicators by worker, supervisor, Local Office area and statewide. It is used by different levels of staff to track, monitor and analyze trends in case practice and targeted measures and outcomes.

**Table 1: *Charlie and Nadine H. v. Christie* Child and Family Outcome and Case Practice Performance Measures
(Summary of Performance as of December 31, 2015)**

Table 1A: To Be Achieved						
SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance¹⁹	December 2015 Performance²⁰	Requirement Fulfilled (Yes/No/Partially)²¹
<i>Investigations</i>						
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. ²²	Commissioner's Monthly Report	In June 2015, 83% of all investigations were completed within 60 days. Monthly range January – June 2015: 78-81% ²³	In November 2015, ²⁴ 83% of all investigations were completed within 60 days. ²⁵ Monthly range July – November 2015: 83-85% ²⁶	No

¹⁹ In some instances where the Monitor does not have June 2015 data, the Monitor has included the most recent data available.

²⁰ In some instances, where the Monitor does not have December 2015 data, the Monitor has included the most recent data available.

²¹ “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 final SEP standard or there are a small number of cases causing the failure to meet the SEP standard. “Partially” is used when DCF has come very close but, in the Monitor’s judgement, has not met the SEP standard, for example when performance is met during at least three of six months for at least one six month period. “No” indicates that, in the Monitor’s judgment, DCF has not fulfilled its obligation regarding the requirement.

²² Under the MSA standard, 98% of all abuse/neglect investigations were to have been within 60 days.

²³ Monthly performance is as follows: January, 78%; February, 80%; March 79%; April, 79%; May 81%; June, 83%.

²⁴ November 2015 was the most current data available at the time of writing of this report. December 2015 data will be included in the next monitoring report.

²⁵ This is a new provision of the SEP. The Monitor was unable to validate appropriate use of investigation extension requests and thus cannot determine performance for this monitoring period using the new reporting methodology. Data on this measure understates performance because they do not yet reflect acceptable extension requests.

²⁶ Monthly performance is as follows: July, 83%; August, 84%; September 85%; October, 83%; November, 83%.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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.	Commissioner's Monthly Report	In June 2015, 95% of all investigations were completed within 90 days. Monthly range January – June 2015: 93-95% ²⁷	In November 2015, ²⁸ 95% of all investigations were completed within 90 days. ²⁹ Monthly range January – November 2015: 95-96% ³⁰	Yes

²⁷ Monthly performance is as follows: January, 93%; February, 94%; March 95%; April, 94%; May 95%; June, 95%.

²⁸ November 2015 was the most current data available at the time of writing of this report. December 2015 data will be included in the next monitoring report.

²⁹ This is a new provision of the SEP. The Monitor was unable to validate appropriate use of investigation extension requests and thus cannot determine performance for this monitoring period using the new reporting methodology. Data on these measures understate performance because they do not yet reflect acceptable extension requests.

³⁰ Monthly performance is as follows: July, 95%; August, 95%; September, 96%; October, 95%; November, 95%.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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. ³¹	Investigation Case Record Review Data Investigation Report	In September 2014, data collected in a case record review found that 78% of investigations met quality standards.	N/A Investigation Case Record Review to be conducted in Fall 2016. ³²	No ³³
<i>Family Teaming</i>						
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. ³⁴	Commissioner's Monthly Report	In June 2015, 84% of children newly entering placement had a FTM within 45 days of entering placement. Monthly range January – June 2015: 73 to 87%. ³⁵	In December 2015, 85% of children newly entering placement had a FTM within 45 days of entering placement. Monthly range July – December 2015: 80 to 88%. ³⁶	Yes

³¹ Under the MSA standard, 90% of investigations were to have met quality rating of acceptable.

³² Investigation Case Record Review is conducted every two years.

³³ Based on findings from DCF's report released in May 2015.

³⁴ Under the MSA standard, 90% of children newly entering placement were to have had a FTM before or within 30 days of placement.

³⁵ Monthly performance on Initial FTMs is as follows: January, 73%; February, 84%; March, 80%; April, 81%; May, 87%; June, 84%.

³⁶ Monthly performance on Initial FTMs is as follows: July, 86%; August, 83%; September, 85%; October, 80%; November, 88%; December, 85%.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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. ³⁷	Commissioner's Monthly Report	In June 2015, 73% of children had an additional three or more FTMs within the first 12 months of placement. Monthly range January – June 2015: 68 to 81%. ³⁸	In December 2015, 77% of children had an additional three or more FTMs within the first 12 months of placement. Monthly range July – December 2015: 74 to 78%. ³⁹	No
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.	Commissioner's Monthly Report	In June 2015, 95% of children with a goal of reunification had three or more FTMs after 12 months in placement. Monthly range January – June 2015: 62 to 95%. ⁴⁰	In December 2015, 100% of children with a goal of reunification had three or more FTMs after 12 months of placement. Monthly range July – December 2015: 83 to 100%. ⁴¹	Yes

³⁷ Under the MSA standard, 90% of children were to have had at least one family team meeting per quarter.

³⁸ Monthly performance on FTMs held within the first 12 months in placement is as follows: January, 75%; February, 78%; March, 80%; April, 68%; May 81%; June, 73%.

³⁹ Monthly performance on FTMs held within the first 12 months in placement is as follows: July, 78%; August, 77%; September, 78%; October, 74%; November, 78%; December, 77%.

⁴⁰ Monthly performance on FTMs held after the first 12 months in placement with a goal of reunification is as follows: January, 62%; February, 79%; March, 91%; April, 90%; May, 68%; June, 95%. Monthly fluctuations in performance percentages in part reflect the small numbers of applicable children each month.

⁴¹ Monthly performance on FTMs held after the first 12 months in placement with a goal of reunification is as follows: July, 100%; August, 90%; September, 83%; October, 92%; November, 87%; December, 100%. Monthly fluctuations in performance percentages in part reflect the small numbers of applicable children each month.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance¹⁹	December 2015 Performance²⁰	Requirement Fulfilled (Yes/No/Partially)²¹
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.	Commissioner's Monthly Report	In June 2015, 67% of children with a goal other than reunification had two or more FTMs after 12 months in placement. Monthly range January – June 2015: 64 to 78%. ⁴²	In December 2015, 78% of children with a goal other than reunification had two or more FTMs after 12 months of placement. Monthly range July – December 2015: 63 to 78%. ⁴³	No

⁴² Monthly performance on FTMs held after the first 12 months in placement with a goal other than reunification is as follows: January, 65%; February, 78%; March, 64%; April, 67%; May, 73%; June, 67%.

⁴³ Monthly performance on FTMs held after the first 12 months in placement with a goal other than reunification is as follows: July, 63%; August, 68%; September, 65%; October, 70%; November, 65%; December, 78%.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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. ⁴⁴	Data are currently provided by DCF directly to the Monitor ⁴⁵	35% of cases rated at least minimally acceptable on both QR 'Family Teamwork' indicators: 'Team Formation' and 'Team Functioning'. ⁴⁶ (CY 2014)	40% of cases rated at least minimally acceptable on both QR 'Family Teamwork' Indicators: 'Team Formation' and 'Team Functioning'. ⁴⁷ (CY 2015)	No

⁴⁴ Under the MSA standard, 90% of cases assessed as part of the QR process were to have shown acceptable on team formation and functioning.

⁴⁵ Going forward, the following new reports will be published as data sources for this measure: DCF Report on Our Work with Children, Youth & Families and the Qualitative Review Report.

⁴⁶ 180 cases were reviewed as part of the QRs conducted from January to December 2014. Sixty-three of 180 (35%) in and out-of-home cases rated acceptable on *both* areas of Family Teamwork, team formation and team functioning; 94 of 180 (52%) rated acceptable on team formation; and 75 of 180 cases (42%) rated acceptable on team functioning.

⁴⁷ 191 cases were reviewed as part of the QRs conducted from January to December 2015; Seventy-seven of 191 (40%) in and out-of-home cases rated acceptable on *both* areas of Family Teamwork, team formation and team functioning; 103 of 191 (54%) rated acceptable on team formation; and 83 of 191 cases (42%) rated acceptable on team functioning.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
<i>Needs Assessment</i>						
IV.C. 21	<u>Needs Assessment</u>	The state shall regularly evaluate the need for additional placements and services to meet the needs of children in custody and their families, and to support intact families and prevent the need for out-of-home care. Such needs assessments shall be conducted on an annual, staggered basis that assures that every county is assessed at least once every three years. The State shall develop placements and services consistent with the findings of these needs assessments.	March 2016 – New Jersey DCF Needs Assessment Interim Report ⁴⁸	N/A	DCF has completed Phase I and II of a three part Needs Assessment process. In April 2016, DCF published its March 2016 – New Jersey DCF Needs Assessment Interim Report.	Partially

⁴⁸ This report is available on DCF's website: http://www.state.nj.us/dcf/childdata/protection/DCF.Needs.Assessment.Interim.Report_3.16.pdf

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
<i>Case And Service Planning</i>						
IV.D. 22	<u>Initial Case Plans</u>	95% of initial case plans for children and families shall be completed within 30 days.	Commissioner's Monthly Report	94% of children entering care had case plans developed within 30 days. Monthly range January – June 2015: 91 to 94%. ⁴⁹	100% of children entering care had case plans developed within 30 days. Monthly range July – December 2015: 88 to 100%. ⁵⁰	Partially

⁴⁹ Monthly performance on case plans developed within 30 days of placement is as follows: January, 91%; February, 93%; March, 93%; April, 92%; May, 93%; June, 94%.

⁵⁰ Monthly performance on case plans developed within 30 days of placement is as follows: July, 95%; August, 92%; September, 93%; October, 88%; November, 96%; December, 100%.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
IV.D. 23	<u>Quality of Case Plans</u>	80% of case plans shall be rated acceptable as measured by the QR process. The Monitor, in consultation with the parties, shall determine that standards for quality case planning. ⁵¹	Data are currently provided by DCF directly to the Monitor. ⁵²	51% of cases rated at least minimally acceptable on both QR indicators 'Case Planning Process' and 'Tracking and Adjusting'. ⁵³ (CY 2014)	53% of cases rated at least minimally acceptable on both QR indicators 'Case Planning Process' and 'Tracking and Adjusting'. ⁵⁴ (CY 2015)	No
Caseloads						
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.	Commissioner's Monthly Report	Unable To Determine ⁵⁵	Unable To Determine ⁵⁵	Unable To Determine ⁵⁵

⁵¹ Under the MSA standard, 90% of case plans assessed as part of the QR process were to have been rated as acceptable standard.

⁵² Going forward, the following new reports will be published as data sources for this measure: DCF Report on Our Work with Children, Youth and Families and the Qualitative Review Report.

⁵³ 180 cases were reviewed as part of the QRs conducted from January to December 2014. 92 of 180 (51%) in and out-of-home cases rated acceptable on *both* the Case Planning Process and Tracking and Adjusting indicators; 104 of 180 cases (58%) rated acceptable on Case Planning Process; and 115 of 180 cases (64%) rated acceptable on Tracking and Adjusting.

⁵⁴ 191 cases were reviewed as part of the QRs conducted from January to December 2015. One-hundred-and-two of 191 (53%) in and out-of-home cases rated acceptable on *both* the case planning process and tracking and adjusting indicators; 115 of 191 cases (60%) rated acceptable on case planning process; and 131 of 191 cases (69%) rated acceptable on tracking and adjusting.

⁵⁵ See discussion on pages 101 to 102.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
IV.E. 25	<u>Intake Workers Caseload</u>	90% of individual intake works shall have no more than 12 open cases and no more than eight new case assignments per month. No intake worker with 12 or more open cases can be given more than two secondary assignments per month. ⁵⁶	Commissioner's Monthly Report Caseload Report	Unable To Determine ⁵⁸	Unable to Determine ⁵⁸	Unable To Determine ⁵⁷
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	Commissioner's Monthly Report Caseload Report	95% of Local Offices met adoption standards. Monthly range January – June 2015: 84-95% ⁵⁸	98% of Local Offices met adoption standards. Monthly range July – December 2015: 95-98% ⁵⁹	Yes
IV.E. 27	<u>Adoption Workers Caseload</u>	95% of individual adoption worker caseloads shall be no more than 15 children per worker.	Commissioner's Monthly Report Caseload Report	90% of Adoption workers met caseload standards. Monthly range January – June 2015: 88-91% ⁶⁰	92% of Adoption workers met caseload standards. Monthly range July – December 2015: 88-94% ⁶¹	No

⁵⁶ Under the MSA standard, 95% of individual Intake workers were to have no more than 12 open cases and no more than eight new case assignments per month.

⁵⁷ See discussion on pages 101 to 102.

⁵⁸ Monthly performance for average office adoption caseloads is as follows: January, 84%; February, 93%; March, 91%; April, 88%; May, 93%; June, 95%.

⁵⁹ Monthly performance for average office adoption caseloads is as follows: July, 95%; August, 98%; September, 95%; October, 98%; November, 95%; December, 98%.

⁶⁰ Monthly performance for individual adoption worker caseloads is as follows: January, 91%; February, 89%; March, 91%; April, 88%; May, 89%; June, 90%.

⁶¹ Monthly performance for individual adoption worker caseloads is as follows: July, 90%; August, 94%; September, 92%; October, 88%; November, 93%; December, 92%.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
Visitation						
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. ⁶²	Commissioner's Monthly Report	In June 2015, 80% 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 January – June 2015: 77-80%. ⁶³	In December 2015, 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 July – December 2015: 76-80%. ⁶⁴	No
IV.F. 29	<u>Parent-Child Visits – weekly</u>	60% of children in custody with a return home goal will have an in-person visit with their parent(s) at least weekly, excluding those situations where a court order prohibits or regulates visits or there is a supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.	Commissioner's Monthly Report	79% of applicable children had weekly visits with their parents. Monthly range January – June 2015: 73 – 81%. ⁶⁵	81% of applicable children had weekly visits with their parents. Monthly range July – December 2015: 76 – 81%. ⁶⁶	Yes

⁶² Under the MSA standard, 95% of families were to have at least twice-per-month face-to-face contact with their caseworker when the permanency goal is reunification.

⁶³ Monthly performance on twice-per-month caseworker visits with parents are as follows: January, 77%; February, 78%; March, 80%; April, 80%; May, 77%; June, 80%.

⁶⁴ Monthly performance on twice-per-month caseworker visits with parents are as follows: July, 80%; August, 79%; September, 76%; October, 79%; November, 76%; December, 77%.

⁶⁵ Monthly performance on weekly visits between parents and children are as follows: January, 73%; February, 81%; March, 78%; April, 79%; May, 77%; June, 79%.

⁶⁶ Monthly performance on weekly visits between parents and children are as follows: July, 76%; August, 77%; September, 79%; October, 79%; November, 80%; December, 81%.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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.	Commissioner's Monthly Report	89% of applicable children had bi-weekly visits with their parents. Monthly range January – June 2015: 86-89%. ⁶⁷	86% of applicable children had bi-weekly visits with their parents. Monthly range July – December 2015: 85-87%. ⁶⁸	Yes

⁶⁷ Monthly performance on bi-weekly visits between parents and children are as follows: January, 86%; February, 88%; March, 89%; April, 88%; May, 87%; June, 89%.

⁶⁸ Monthly performance on bi-weekly visits between parents and children are as follows: July, 87%; August, 87%; September, 86%; October, 86%; November, 85%, December, 86%.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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.	Commissioner's Monthly Report	In June 2015, 77% of children in custody who have sibling with whom they are not residing visited with their siblings monthly. Monthly range January – June 2015: 76 – 78%. ⁶⁹	In December 2015, 77% of children in custody who have sibling with whom they are not residing visited with their siblings monthly. Monthly range July – December 2015: 73 – 78%. ⁷⁰	No ⁷¹
Placement						
IV.G 32	<u>Placing Siblings</u>	At least 80% of siblings groups of two or three children entering custody will be placed together.	Data are currently provided directly to the Monitor. ⁷²	In CY 2014, 82% of sibling groups of two or three were placed together.	In CY 2015, 79% of sibling groups of 2 or 3 were placed together.	Yes ⁷³

⁶⁹ Performance data for the monitoring period for monthly sibling visits are as follows: January, 76%; February, 77%; March, 77%; April, 77%; May, 78%; June, 77%.

⁷⁰ Performance data for the monitoring period for monthly sibling visits are as follows: July, 78%; August, 78%; September, 74%; October, 75%; November, 73%, December, 77%.

⁷¹ Reported performance understates actual performance because data do not exclude instances where a visit is not required based on a new provision in the SEP that defines appropriate exclusions. These exclusions were not applied or documented in CY 2015. The Monitor will validate data for this measure during the next monitoring period and include findings in the next monitoring report.

⁷² Going forward, the following new report will be published as the data source for this measure: CP&P Outcome Report.

⁷³ The SEP designates this measure as *To Be Achieved*. However, it was actually achieved in CY 2014 prior to the finalization of the SEP. Since current performance is within one percentage point of the standard, this measure, in the Monitor's discretion, has been met.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
IV.G 33	<u>Sibling Placements of Four or More Children</u>	All children will be placed with at least one other sibling 80% of the time. ⁷⁴	Data are currently provided directly to the Monitor. ⁷⁵	In CY 2014, 87% of applicable children were placed with at least one other sibling.	In CY 2015, 87% of applicable children were placed with at least one other sibling.	Yes
IV.G.34	<u>Recruitment for Sibling Groups of Four or More</u>	DCF will continue to recruit for resource homes capable of serving sibling groups of four or more.	DCF manual Data to Monitor	N/A	DCF is focusing recruitment efforts on targeted needs, including large sibling groups. DCF began and ended CY 2015 with a total of 24 SIBS homes: 16 SIBS homes were newly licensed during CY 2015 and 16 SIBS homes left the program.	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. ⁷⁶	Data are currently provided directly to the Monitor. ⁷⁷	N/A	Of all children who entered out-of-home care for the first time in CY 2014, 82% had no more than one placement change in the 12 months following their date of entry.	No

⁷⁴ Under the MSA standard, 40% of sibling groups of four or more sibling entering custody at the same time shall be placed together.

⁷⁵ Going forward, the following new report will be published as the data source for this measure: CP&P Outcome Report.

⁷⁶ Under the MSA standard, 88% of children entering care shall have two or fewer placements during the 12 months following their date of entry.

⁷⁷ Going forward, the following new report will be published as the data source for this measure: CP&P Outcome Report.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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.	Data are currently provided directly to the Monitor. ⁷⁸	Of all children entering care for the first time in CY 2012 who remained in care for at least 12 months, 98% had no more than one placement change during the 13 – 24 months following their date of entry.	Of all children entering care for the first time in CY 2013 who remained in care for at least 12 months, 97% had no more than one placement change during the 13 – 24 months following their date of entry.	Yes
<i>Maltreatment</i>						
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.	Data are currently provided directly to the Monitor. ⁷⁹	Of all children with a substantiated investigation within CY 2013 who remained in their home, 7.9% had another substantiation within the next 12 months.	Of all children with a substantiated investigation within CY 2013 who remained in their home, 6.9% had another substantiation within the next 12 months.	Yes

⁷⁸ Ibid

⁷⁹ Ibid

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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. ⁸⁰	Data are currently provided directly to the Monitor. ⁸¹	Of all children entering care for the first time in CY 2011 who discharged to reunification or living with a relative within 24 months, 7.2% were victims of abuse or neglect within 12 months after their discharge. ⁸²	Of all children entering care for the first time in CY 2012 who discharged to reunification or living with a relative within 24 months, 7.7% were victims of abuse or neglect within 12 months after their discharge.	No
IV.H 39	<u>Re-entry to Placement</u>	Of all children who enter foster care in a 12 month period for the first time who are discharged within 12 months to reunification, living with a relative(s), or guardianship, no more than 9% will re-enter foster care within 12 months of their discharge.	Data are currently provided directly to the Monitor. ⁸³	Of all children entering care for the first time in CY 2012 who discharged to reunification, living with a relative or guardianship within 12 months, 11.5% re-entered foster care within 12 months of their discharge. ⁸⁴	Of all children entering care for the first time in CY 2013 who discharged to reunification, living with a relative or guardianship within 12 months, 11.5% re-entered foster care within 12 months of their discharge.	No

⁸⁰ Under the MSA standard, no more than 4.8% of children who reunified shall be victims of substantiated abuse or neglect within one year after reunification.

⁸¹ Going forward, the following new report will be published as the data source for this measure: CP&P Outcome Report.

⁸² Performance data were calculated using the revised SEP entry cohort methodology and are therefore not comparable to previously reported data using the MSA methodology.

⁸³ Going forward, the following new report will be published as the data source for this measure: CP&P Outcome Report.

⁸⁴ Performance data were calculated using the revised SEP entry cohort methodology and are therefore not comparable to previously reported data using the MSA methodology.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
<i>Timely Permanency</i>						
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. ⁸⁵	Data are currently provided directly to the Monitor. ⁸⁶	Of all children who entered foster care in CY 2013, 42% discharged to permanency within 12 months of entering foster care. ⁸⁷	Of all children who entered foster care in CY 2014, ⁸⁸ 41% discharged to permanency within 12 months of entering foster care.	Yes ⁸⁹

⁸⁵ Under the MSA standard, 50% of all children who entered foster care for the first time in the target year and remained in care for eight days or longer were to be discharged to permanency within 12 months.

⁸⁶ Going forward, the following new report will be published as the data source for this measure: CP&P Outcome Report.

⁸⁷ Performance data were calculated using the revised SEP methodology and therefore are not comparable to previously reported data using the MSA methodology.

⁸⁸ CY 2015 data will not be available until early CY 2017.

⁸⁹ The SEP designates this measure as *To Be Achieved*. However, it was actually achieved in CY 2013, prior to the finalization of the SEP. Since current performance is within one percentage point of the standard, this measure, in the Monitor's discretion, has been met.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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. ⁹⁰	Data are currently provided directly to the Monitor. ⁹¹	Of all children who entered foster care in CY 2012, 63% discharged to permanency within 24 months of entering foster care. ⁹²	Of all children who entered foster care in CY 2013, ⁹³ 64% discharged to permanency within 24 months of entering foster care.	No

⁹⁰ Under the MSA standard, 47% of all children who were in foster care on the first day of the target year and remained in care between 12 – 24 months were to be discharged to permanency prior to their 21st birthday.

⁹¹ Going forward, the following new report will be published as the data source for this measure: CP&P Outcome Report.

⁹² Performance data were calculated using the revised SEP methodology and are not comparable to previously reported data using the MSA methodology.

⁹³ CY 2014 data will not be available until early CY 2017.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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.	Data are currently provided directly to the Monitor. ⁹⁴	Of all children who entered foster care in CY 2011, 78% discharged to permanency within 36 months of entering foster care. ⁹⁵	Of all children who entered foster care in CY 2012, ⁹⁶ 78% discharged to permanency within 36 months of entering foster care.	No
IV.I 43	<u>Permanency within 48 Months</u>	Of all children who enter foster care in a 12-month period, at least 86% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 48 months of entering foster care.	Data are currently provided directly to the Monitor. ⁹⁷	Of all children who entered foster care in CY 2010, 83% discharged to permanency within 48 months of entering foster care.	Of all children who entered foster care in CY 2011, ⁹⁸ 85% discharged to permanency within 48 months of entering foster care.	Partially

⁹⁴ Going forward, the following new report will be published as the data source for this measure: CP&P Outcome Report.

⁹⁵ Performance data were calculated using the revised SEP methodology and therefore are not comparable to previously reported data using the MSA methodology.

⁹⁶ CY 2013 data will not be available until early CY 2017.

⁹⁷ Going forward, the following new report will be published as the data source for this measure: CP&P Outcome Report.

⁹⁸ CY 2012 data will not be available until early CY 2017.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
<i>Services To Support Transition</i>						
IV.J 44	<u>Services to Support Transitions</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. ⁹⁹	Data are currently provide directly to the Monitor. ¹⁰⁰	69% of cases rated at least minimally acceptable on QR indicator “Transitions and Life Adjustments’ (CY 2014)	68% of cases rated at least minimally acceptable on QR indicator “Transitions and Life Adjustments’. ¹⁰¹ (CY 2015)	No
<i>Older Youth</i>						
IV.K 45	<u>Independent Living Assessments</u>	90% of youth ages 14 to18 have an Independent Living Assessment. ¹⁰²	Commissioner’s Monthly Report	94% of youth ages 14 to 18 in out-of-home placement for at least six months had a completed Independent Living Assessment.	93% of youth ages 14 to 18 in out-of-home placement for at least six months had a completed Independent Living Assessment.	Yes

⁹⁹ Under the MSA standard, 90% of cases were to have been rated as acceptable for supporting transitions as measured by the QR.

¹⁰⁰ Going forward, the following new reports will be published as data sources for this measure: DCF Report on Our Work with Children, Youth & Families and the Qualitative Review Report.

¹⁰¹ One-hundred and ninety-one cases were reviewed as part of the QRs conducted from January to December 2015. One-hundred and thirty of the 191 cases (68%) rated acceptable for services to support transitions.

¹⁰² Under the MSA standard, 95% of youth age 14 to 18 were to have had an Independent Living Assessment.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
IV.K 46	<u>Quality of Case Planning and Services</u>	75% of youth aged 18 to 21 who have not achieved legal permanency shall receive acceptable quality case management and service planning. ¹⁰³	Data are currently provided directly to the Monitor. ¹⁰⁴	59% of youth cases reviewed rated acceptable. ¹⁰⁵ (CY 2014)	74% of youth cases reviewed rated acceptable. ¹⁰⁶ (CY 2015)	Yes
IV.K 47	<u>Housing</u>	95% of youth exiting care without achieving permanency shall have housing.	Case Record Review conducted by CP&P and Monitor	88% of youth exiting care without achieving permanency had documentation of a housing plan upon exiting care. ¹⁰⁷	91% of youth exiting care without achieving permanency had documentation of a housing plan upon exiting care. ¹⁰⁸	No

¹⁰³ Under the MSA standard, 90% of youth were to have been receiving acceptable services as measured by the QR

¹⁰⁴ Going forward, the following new reports will be published as data sources for this measure: DCF Report on Our Work with Children, Youth & Families and the Qualitative Review Report.

¹⁰⁵ Reported performance based upon QR findings from 39 cases of youth ages 18 to 21 whose cases were reviewed in CY 2014. Cases were considered acceptable if acceptable ratings were determined for both overall Child(Youth)/Family Status and Practice Performance. Of the 39 reviewed, 34 (87%) cases rated acceptable on overall Child (Youth)/Family Status and 24 (62%) cases rated acceptable on Practice Performance.

¹⁰⁶ Reported performance based upon QR findings from 42 cases of youth ages 18 to 21 whose cases were reviewed in CY 2015. Cases were considered acceptable if acceptable ratings were determined for *both* Child (Youth)/Family Status and Practice Performance. Of the 42 cases reviewed, 36 (86%) rated acceptable on overall Child (Youth)/Family Status, 36 (86%) rated acceptable on Practice Performance and 31 (74%) cases were rated acceptable for *both* categories.

¹⁰⁷ Case records for 81 youth were reviewed.

¹⁰⁸ Case records for 72 youth were reviewed.

Table 1A: To Be Achieved

SEP Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No/Partially) ²¹
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. ¹⁰⁹	Case Record Review conducted by CP&P and Monitor	50% of youth exiting care without achieving permanency were either employed or enrolled in education or vocational training programs. ¹¹⁰	85% of youth exiting care without achieving permanency were either employed or enrolled in education or vocational training programs. ¹¹¹	No

¹⁰⁹ Under the MSA standard, 95% of youth were to have been employed, enrolled in, or completing a training or an educational program or have documented evidence of consistent efforts to help the youth secure employment or training.

¹¹⁰ Case records for 81 youth were reviewed.

¹¹¹ Case records for 72 youth were reviewed.

Table 1B: To Be Maintained

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No)
Investigations						
III.A. 1	<u>Institutional Abuse Investigations (IAI)</u>	80% of IAI will be completed within 60 days.	Commissioner's Monthly Report	88% of IAI were completed within 60 days.	86% of IAI Were completed within 60 days.	Yes
Caseloads						
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.	Commissioner's Monthly Report Caseload Report	97% of Local Offices have sufficient supervisory staff.	98% 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.	Commissioner's Monthly Report	98% of IAIU investigators met caseload standards.	100% of IAIU investigators met caseload standards.	Yes

Table 1B: To Be Maintained

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No)
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.	Commissioner's Monthly Report; Caseload Report	100% of Local Offices met permanency standards.	100% of Local Offices met permanency standards.	Yes
III.B. 5	<u>Permanency Workers Caseload</u>	95% of permanency workers will have (a) no more than 15 families, and (b) no more than 10 children in out of home care.	Commissioner's Monthly Report; Caseload Report	99% of Permanency workers met caseload standards.	100% of Permanency workers met caseload standards.	Yes
Case Plans						
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.	Commissioner's Monthly Report	95% of case plans were reviewed and modified as necessary at least every six months. From January through June 2015 monthly performance ranged from 95 to 98%.	97% of case plans were reviewed and modified as necessary at least every six months. From July through December 2015 monthly performance ranged from 95 to 97%.	Yes

Table 1B: To Be Maintained

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No)
<i>DAsG</i>						
III.D. 7	<u>Adequacy of DAsG Staffing</u>	The State will maintain adequate DAsG staff positions and keep positions filled.	DAsG Staffing Data	131(100%) of 131 staff positions filled with six staff on leave; 125 (95%) available DAsG.	132 (100%) of 132 staff positions filled with seven staff on leave; 125 (95%) available DAsG. ¹¹²	Yes
<i>Child Health Units</i>						
III.E. 8	<u>Child Health Units</u>	The State will continue to maintain its network of child health unites, adequately staffed by nurses in each local office.	Report on the Healthcare of Children in Out-of-Home Placement in NJ	As of June 30, 2015, DCF had 162 health care case managers and 84 staff assistants.	As of December 31, 2015, DCF had 168 health care case managers and 84 staff assistants. ¹¹³	Yes

¹¹² DCF reported that during this monitoring period, 3.9 DAsG outside of the DCF Practice Group have dedicated their time to DCF matters.

¹¹³ Of the 168 health care case managers (HCCM), 162 were available for coverage for a ratio of one HCCM to every 43 children in out-of-home care. A ratio of one HCCM to 50 children in out-of-home care or less is considered adequately staffed.

Table 1B: To Be Maintained

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No)
Visitation						
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. ¹¹⁴	Commissioner's Monthly Report	In June 2015, 95% 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 January – June 2015: 94 – 95%. ¹¹⁵	In November 2015, 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 July – November 2015: ¹¹⁶ 90 – 94%. ¹¹⁷	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. ¹¹⁸	Commissioner's Monthly Report	In June 2015, 95% of children had at least one caseworker visit per month in his/her placement. Monthly range January – June 2015: 95 – 96%. ¹¹⁹	In December 2015, 97% of children had at least one caseworker visit per month in his/her placement. Monthly range July – December 2015: 96 – 97%. ¹²⁰	Yes

¹¹⁴ Under the MSA standard, 95% of children were to have had at least twice-per-month face-to-face contact with their caseworker within the first two months on a new or subsequent placement.

¹¹⁵ Performance data for the monitoring period for caseworker visits with children after a new placement are as follows: January, 94%; February, 95%; March, 94%; April, 94%; May, 94%; June, 95%.

¹¹⁶ Data for December 2015 was not available at the time of this report. This data will be included in the next monitoring report.

¹¹⁷ Performance data for the monitoring period for caseworker visits with children after a new placement are as follows: July, 93%; August, 91%; September, 90%; October, 93%; November, 94%.

¹¹⁸ Under the MSA standard, 98% of children were to have had at least one caseworker visit per month during the child's time in out-of-home placement.

¹¹⁹ Performance data for the monitoring period for caseworker visits with children are as follows: January, 95%; February, 95%; March, 95%; April, 96%; May, 96%; June, 95%.

¹²⁰ Performance data for the monitoring period for caseworker visits with children are as follows: July, 97%; August, 97%; September, 97%; October, 97%; November, 96%; December, 97%.

Table 1B: To Be Maintained

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No)
<i>Education</i>						
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. ¹²¹	Data are currently provided directly to the Monitor. ¹²²	85% of cases rated acceptable for both QR indicators: 'Stability (school)' and 'Learning and Development'. ¹²³ (CY 2014)	86% of cases rated acceptable for both QR indicators: 'Stability (school)' and 'Learning and Development'. ¹²⁴ (CY 2015)	Yes

¹²¹ Under the MSA standard, 90% of cases were to have been rated as acceptable as measured by the QR

¹²² Going forward, the following new reports will be published as data sources for this measure: DCF Report on Our Work with Children, Youth & Families and the Qualitative Review Report.

¹²³ Eighty-four of the total 180 QR cases reviewed from January to December 2014 were applicable for this performance measure because cases must involve children five and older *and* in out-of-home placement. Seventy-one of 84 applicable cases (85%) rated acceptable on *both* the Stability (school) and Learning and Development (age 5 and older) QR indicators. Seventy-two of 84 applicable cases (86%) rated acceptable on Stability (school) alone and 79 of 84 applicable (94%) cases rated acceptable on Learning and Development (age 5 and older) alone.

¹²⁴ Eighty-three of the total 191 QR cases reviewed from January to December 2015 were applicable for this performance measure because cases must involve children five and older *and* in out-of-home placement. Seventy-one of 83 applicable cases (86%) rated acceptable on *both* the Stability (school) and Learning and Development (age 5 and older) QR

Table 1B: To Be Maintained

Reference	Quantitative or Qualitative Measure	Sustainability and Exit Plan Standard	Data Source	June 2015 Performance ¹⁹	December 2015 Performance ²⁰	Requirement Fulfilled (Yes/No)
<i>Maltreatment</i>						
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.	Data are currently provided directly to the Monitor. ¹²⁵	In CY 2014, 0.17% of applicable children in foster care were victims of substantiated abuse or repeat by resource parent or facility staff.	CY 2015, 0.16% of applicable children in foster care were victims of substantiated abuse or repeat by resource parent or facility staff.	Yes

indicators. Seventy-six of 83 applicable cases (92%) rated acceptable on Stability (school) alone; Seventy-six of 84 applicable (92%) cases rated acceptable on Learning and Development (age 5 and older) alone.

¹²⁵ Going forward, the following new report will be published as the data source for this measure: CP&P Outcome Report.

Table 1C: Foundational Elements

Reference	Additional SEP Requirements That DCF Must Meet:	Data Source	December 2015 Fulfilled (Yes/No)
A. Data Transparency	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 are currently provided directly to the Monitor and published by DCF in reports and on its website. ¹²⁶	Yes
B. Case Practice Model	Implement and sustain a Case Practice Model	QR Data Data are currently provided directly to the Monitor. ¹²⁷	Yes
	Quality investigation and assessment	Investigation Report May 2015	
	Safety and risk assessment and risk reassessment	Data are currently provided directly to the Monitor. ¹²⁸	
	Engagement with youth and families	QR Data Data are currently provided directly to the Monitor. ¹²⁹	
	Working with family teams	QR Data Data are currently provided directly to the Monitor. ¹³⁰	
	Individualized planning and relevant services	QR Data Data are currently provided directly to the Monitor. ¹³¹	
	Safe and sustained transition from DCF	QR Data Data are currently provided directly to the Monitor. ¹³²	
	Continuous review and adaptations	Data are currently provided directly to the Monitor. ¹³³	

¹²⁶ Going forward, the following reports will be published as data sources for this Foundational Element: Report on Our Work with Children, Youth & Families; CP&P Outcome Report; Report on the Healthcare of Children in Out-of-Home Placement in NJ; Adoption Report; DCF Needs Assessment; and the DCF Workforce Report.

¹²⁷ Going forward, the following new report will be published as the data source for this Foundational Element: Report on Our Work with Children, Youth & Families.

¹²⁸ Ibid

¹²⁹ Ibid

¹³⁰ Ibid

¹³¹ Ibid

¹³² Ibid

¹³³ Ibid

Table 1C: Foundational Elements

Reference	Additional SEP Requirements That DCF Must Meet:	Data Source	December 2015 Fulfilled (Yes/No)
C. State Central Registry	Received by the field in a timely manner	Commissioner's Monthly Report	Yes
	Investigation commenced within required response time	Commissioner's Monthly Report	
D. Appropriate Placements	Appropriate placements of children	QR data Data are currently provided directly to the Monitor. ¹³⁴	Yes
	Resource family homes licensed and closed (kinship/non-kinship)	Commissioner's Monthly Report	
	Number of children in home/out of home demographic data	Quarterly Demographic Report	
	Placed in a family setting	Commissioner's Monthly Report	
	Placement proximity	Data are currently provided directly to the Monitor. ¹³⁵	
	No children under 13 years old in shelters	Commissioner's Monthly Report	
	Children over 13 in shelters no more than 30 days	Commissioner's Monthly Report	
	No behavioral health placements out of state without approval	Commissioner's Monthly Report	
	Adequate number of resource placements	CP&P Needs Assessment Data are currently provided directly to the Monitor. ¹³⁶	

¹³⁴ Ibid¹³⁵ Ibid¹³⁶ Ibid

Table 1C: Foundational Elements

Reference	Additional SEP Requirements That DCF Must Meet:	Data Source	December 2015 Fulfilled (Yes/No)
E. Service Array	Services for youth age 18-21, LGBTQI, mental health and domestic violence for birth parents with families involved with the child welfare system	Services for older youth can be found at NJYRS.org DCF Website will be updated with information on services for youth (e.g. Safe Space Liaison Program) CP&P Needs Assessment	Yes
	Preventive home visitation programs	Commissioner's Monthly Report	
	Family Success Centers	Commissioner's Monthly Report	
F. Medical and Behavioral Health Services	Appropriate medical assessment and treatment	Data are currently provided directly to the Monitor ¹³⁷	Yes
	Pre-placement and entry medical assessments	Data are currently provided directly to the Monitor ¹³⁸ Commissioner's Monthly Report	
	Dental examinations	Data are currently provided directly to the Monitor ¹³⁹ Commissioner's Monthly Report	
	Immunizations	Data are currently provided directly to the Monitor ¹⁴⁰ Commissioner's Monthly Report	
	Follow-up care and treatment	Data are currently provided directly to the Monitor ¹⁴¹	
	Mental health assessment and treatment	Data are currently provided directly to the Monitor ¹⁴²	
	Behavioral health	CIACC Monthly Report	

¹³⁷ Going forward, the following new report will be published as the data source for this Foundational Element: Report on the Healthcare of Children in Out-of-Home Placement in NJ.

¹³⁸ Going forward, the following new reports will be published as data sources for this Foundational Element: Report on Our Work with Children, Youth & Families, CP&P Outcome Report, Report on the Healthcare of Children in Out-of-Home Placement in NJ and Adoption Report.

¹³⁹ Ibid

¹⁴⁰ Ibid

¹⁴¹ Going forward, the following new report will be published as the data source for this Foundational Element: Report on the Healthcare of Children in Out-of-Home Placement in NJ.

¹⁴² Going forward, the following new report will be published as the data source for this Foundational Element: Report on the Healthcare of Children in Out-of-Home Placement in NJ.

Table 1C: Foundational Elements

Reference	Additional SEP Requirements That DCF Must Meet:	Data Source	December 2015 Fulfilled (Yes/No)
G. Training	Pre-service training	Data are currently provided directly to the Monitor ¹⁴³	Yes
	Case practice model		
	Permanency planning		
	Concurrent planning		
	Adoption		
	Demonstration of competency		
H. Flexible Funding	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 are currently provided directly to the Monitor DCF Online Policy Manual Budget Report	Yes
I. Resource Family Care Support Rates	Family care support rates	DCF Online Policy Manual DCF Website ¹⁴⁴	Yes
	Independent Living Stipend	DCF Online Policy Manual Youth Website	
J. Permanency	Permanency practices	Data are currently provided directly to the Monitor ¹⁴⁵	Yes
	Adoption practices		
K. Adoption Practice	5- and 10-month placement reviews	Data are currently provided directly to the Monitor ¹⁴⁶	Yes
	Child specific recruitment		

¹⁴³ Going forward, the following new report will be published as the data source for this Foundational Element: Workforce Report

¹⁴⁴ USDA has altered its schedule for producing its Annual Report on costs of raising a child. By agreement, DCF will update the rates within 30 days of the USDA annual report's release to meet the SEP standards and will provide written confirmation to the Monitor.

¹⁴⁵ Going forward, the following new report will be published as the data source for this Foundational Element: Report on Our Work with Children, Youth & Families

¹⁴⁶ Going forward, the following new report will be published as the data source for this Foundational Element: Adoption Report

IV. FOUNDATIONAL ELEMENTS

The Foundational Elements section of the SEP (SEP II) intentionally recognizes accomplishments the state achieved and sustained in early implementation of the MSA. These Foundational Elements remain enforceable and the state is required to continue to collect and publish information on them. The state will be producing and disseminating through its website a series of reports as described in the Introduction and in Table 1C of this report. These reports will be grouped by areas and published according to an established schedule at different times of the year; at the time of the writing of this report, not all of these reports had been produced. Until such time as these reports are all produced, DCF will continue to provide data directly to the Monitor for verification. For any measure designated as a Foundational Element, the Monitor will look first to the state's data for analysis and perform periodic examinations to ensure that continued performance is maintained at the required level. At the Monitor's discretion, if there is any concern that a Foundational Element has not been sustained, the Monitor may request additional information. Further, if problems are identified, the state may propose and implement corrective action, although this is not anticipated by either party.

A. DATA TRANSPARENCY

Section II.A of the SEP requires "DCF will continue to maintain a case management information and data collection system that allows for the assessment, tracking, posting or web-based publishing and utilization of key data indicators."

DCF has embraced a commitment to using qualitative and quantitative data for both management and continuous quality improvement (CQI). Their CQI capacity has been developing over the past several years and has helped leaders, managers and frontline staff better assess strengths and weakness of practice and develop targeted improvements. DCF continues to work to improve data entry, quality and reporting through NJ SPIRIT. SafeMeasures v5, a data warehouse and analytical tool, continues to be used by DCF staff at all levels of the organization to help track, monitor and analyze trends in case practice in their own local areas. Additionally, DCF continues to regularly produce and publish agency performance reports on their website for public viewing. The Commissioner's Monthly Report, now includes key data on systems performance indicators.¹⁴⁷

B. CASE PRACTICE MODEL

Section II.B of the SEP requires the state to continue to implement and maintain a Case Practice Model (CPM) that is reflective of quality investigation and assessment, working with family teams, individualized planning and relevant services, continuous review and adaptation and safe and sustained transition from DCF involvement.

The CPM was developed to guide and support staff towards a strength-based and family-centered approach that ensures the safety, permanency and well-being of children, youth and families. The CPM describes expected casework practice that requires engagement with children,

¹⁴⁷ To see Commissioner's Monthly Reports, go to: <http://nj.gov/dcf/childdata/continuous/>

youth and families through teamwork and crafting individualized case plans with families and children.

New Jersey's CPM is reflected in requirements in many parts of the SEP, however, the parties will be measuring the state's progress in infusing the principles and elements of the CPM into daily casework practice primarily through the results of its Qualitative Review (QR) process, as discussed in Section V.N of this report. In the future, and in addition to reporting QR data to the Monitor, the state will report on its progress in this area through its annual Report on Work with Children, Youth and Families and annually in its QR report (see Table 1C).

The state continues to hold monthly ChildStat meetings and has been doing so since September 2010.¹⁴⁸ The ChildStat process encourages skill development through self-diagnosis and data analysis. At the ChildStat meetings, Local Office leadership present practice issues, including data on key performance indicators from the most recent two fiscal quarters and compares their data to statewide data. The Monitor regularly attends DCF's ChildStat meetings and is always impressed by its usefulness in engaging staff throughout DCF as well as community partners to review and assess the quality of case practice. In addition, the state is engaging in an effort to deepen and reinvigorate staff's supervisory skills through a number of statewide case practice initiatives.

Performance during the months of January through December 2015 for safety and risk assessment prior to an investigation completion and risk reassessment prior to non-investigative case closure continues to be met during this monitoring period. Under the MSA the Monitor reported these data semi-annually. The parties have agreed that in the future, these data will be reported annually in DCF's Report on Our Work the Children, Youth & Families. According to DCF data, 100 percent of safety and risk assessments were completed prior to investigation completion and 100 percent of risk reassessments were completed 30 days prior to non-investigative case closure.¹⁴⁹

C. STATE CENTRAL REGISTRY OPERATIONS

Section II.C of the SEP requires the state to continue to implement and maintain a system for receiving, screening and timely response by the field to calls of suspected child abuse and neglect.

DCF continues to operate its State Central Registry (SCR) in a professional, efficient and effective manner with quality assurance mechanisms to support good practice. Reports of alleged abuse and neglect continue to be appropriately screened and forwarded within 24 hours of receipt to the field for investigation. Performance during the months of January through December 2015 for timely transmission to the field and commencement of investigations continues to be met during this monitoring period. Under the MSA the Monitor reviewed these data semi-annually.

¹⁴⁸ Drawn from CompStat in New York City, ChildStat is a process wherein organizations use quantitative and qualitative data from multiple contexts to understand and attempt to improve service delivery.

¹⁴⁹ NJ SPIRIT now has guardrails that require workers complete the appropriate assessments prior to completing an investigation and prior to closing a case.

The parties have agreed that in the future, these data will be reported monthly in DCF's Commissioner's Monthly Report, currently available on the DCF website.

According to the February 2016 Commissioner's Monthly Report, 100 percent of referrals were timely transmitted to the field and 100 percent of investigations were commenced within the required response time.

D. APPROPRIATE PLACEMENTS

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. Children under age 13 shall not be placed in shelters, and no child shall be placed out-of-state in a behavioral health facility without written approval of the Director of the Children's System of Care. The State shall maintain an adequate number and array of family-based placements to appropriately place children in family settings."

Since the lawsuit began, DCF has been successfully building and maintaining a pool of placement resource homes and group settings that meets the needs of children in out-of-home care. DCF continues to keep pace with placement demands and is actively improving its process to recruit and license family resource homes in which to appropriately place children when they enter DCF custody. As of December 31, 2015, a total of 6,955 children were in out-of-home placement; 6,329 (91%) in family-like settings, with 53 percent placed in non-kinship resource family homes and 39 percent in kinship homes. Seven percent of children were placed in group and residential settings and two percent were in independent living programs.

Between January and December 2015 DCF recruited and licensed 1,244 new kinship and non-kinship family homes; 795 (64%) of the 1,244 newly licensed homes were kinship homes, reflecting the state's continued commitment to licensing relatives.

A total of 1,648 resource family homes closed between January and December 2015, resulting in a net loss of 404 resource family homes during the 12 months. DCF cites the growing number of licensed kinship homes as the primary reason for the net loss of resource homes, as kinship homes tend not to remain open at the same rate as non-kinship homes. This trend reflects good case practice because kinship homes that close do so primarily because children are achieving permanency. The state has begun shifting its emphasis from the total number of homes licensed to a focus on targeted needs, such as homes for large sibling groups and adolescents. For example, an effort is currently underway to engage the existing pool of resource families about the need for homes that will accept large sibling groups. Another potential factor in the net loss of homes may be that from July to December 2015, DCF transitioned 210 contract agency homes to Local Offices, which diverted staff time from recruiting new resource homes to making sure the new resource families were appropriately engaged and supported.

While DCF reports that it continues to have a more than adequate supply of resource family homes for children in out-of-home care across the state, the Monitor will continue to examine

DCF's capacity to maintain an adequate pool of such homes and its progress towards increasing the number of family-like placements for the specific populations discussed above.

The assessment of appropriate placement is made through data collected in the QR process. This assessment considers whether the child or youth is residing in the least restrictive setting to meet their needs. This includes whether the placement allows a child or youth to remain in his or her own community, maintain contact with siblings and relatives and whether caregivers are supportive of the child or youth's education. Other considerations include whether the living arrangement is consistent with the child's language and culture and whether the placement meets the child's basic needs, including his or her need for emotional support, supervision, and socialization. DCF met the performance standard in this area from January through December 2015.

Overall, DCF has maintained its practice this monitoring period of keeping children under age 13 out of shelters.¹⁵⁰ Beginning in January 2015, DCF began publishing data on shelter placements in the Commissioner's Monthly Report. The Monitor will continue to receive DCF's back-up data on shelter placements and conduct periodic assessments of practice in this area.

E. SERVICE ARRAY

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

Youth Age 18 to 21 Services

DCF continues to provide services to older youth in the areas of housing, education, employment, general transition support, youth engagement and permanency and familial support. Services available by county and type can be found on the NJ Youth Resource Spot website.¹⁵¹ Bulleted below are additional highlights for services to youth:

- The Adolescent Housing Hub (HUB) is a real time bed tracking and referral process system designed to assist youth with placement in transitional or permanent housing programs. In CY 2015, DCF had a total of 368 housing slots for homeless and aging out youth.

¹⁵⁰ Between January and December 2015 two children under 13 were placed in shelters: one for one day in February 2015 on an emergency basis after his father refused to permit him back in the home at midnight, and the other in August 2015 over a weekend prior to transferring to relative custody in Delaware. This shelter placement was in error in that the workers assumed the placement was in a family resource home run by the shelter provider and were not informed at the time of placement that the family resource program at the shelter had closed. The resource records have since been updated to prevent a similar mistake going forward.

¹⁵¹ To see the NJ Youth Resource Spot website, go to: <http://www.njyrs.org/>

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- In March 2015, the Office of Adolescent Services (OAS) received 100 Project Based Section 8 Housing Vouchers from New Jersey's Department of Community Affairs to provide long-term, stable and supportive housing opportunities for young people aging out of care. The housing programs created through these vouchers will include support services and will be targeted for youth age 18 to 20 who are involved with or have experience in the child welfare system and at risk of homelessness. Youth will be coached to move on from the program by age 26.
 - New Jersey continues to provide educational support through the NJ Scholars program¹⁵² and Project MYSELF.¹⁵³
 - The Youth Employment Specialist with the OAS has focused on identifying regional and statewide employment resources; collaborating with the Department of Labor and the State Employment and Training Commission to build partnerships and increase access to existing programs, networks and practices; and educating and providing resource training to DCF staff, providers and youth.
 - Adolescent Practice Forums, facilitated by OAS, are held twice yearly and provide attendees with updates on changes and improvements to DCF youth-specific policy, practice and resources.
 - DCF held a second round of Permanency Roundtables in January 2016, targeting youth between the ages of 14 and 17. Permanency Roundtables is a process developed by Casey Family Programs to help staff strategize about potential permanency options for older youth.
 - The 15 Youth Advisory Boards (covering 21 counties) meet twice a month and are open to youth between the ages of 14 and 22 who have experience with CP&P or homelessness. The purpose is to discuss ways to improve policies, procedures and services provided by DCF.
 - On August 30, 2015, DCF learned they were awarded national funding to begin implementation of their Youth At-Risk of Homelessness work. The implementation will focus on the four outcomes areas of housing stability, permanency, well-being and education/employment to prevent and address homelessness. Services will be piloted in Burlington, Mercer and Union counties.

¹⁵² NJ Scholars provides assistance with tuition and fees to eligible current and former foster youth in order to pursue post-secondary education at an accredited two or four year college, university, trade or career school. Eligible youth must have a high school diploma or GED.

¹⁵³ Project MYSELF is a multi-service mentoring program designed to improve academic performance, increase post-secondary education retention and completion and develop life skills and competencies.

LGBTQI Services

DCF continues to operate Safe Space Programs in the north, south and central regions of the state with representation from all Local Offices, IAIU and school-based programs. Each region meets three times a year and provides opportunities for trainings: a work group focused on case practice; LGBTQI resources; and data analysis, reporting and tracking. The LGBTQI Youth Committee, comprised of LGBTQI community advocates, meets quarterly and provides feedback to DCF on practice and services issues. The Committee provided feedback on the draft LGBTQI policy, which was finalized in late 2015.¹⁵⁴ DCF launched its statewide Safe Space Training at a meeting in December 2015 attended by over 100 participants.

Information on specific LGBTQI services and supports are available by county on the NJ Youth Resources Spot website.

Domestic Violence Services

In October 2014, the Office of Domestic Violence Services transferred from DCF's Family and Community Partnerships to DCF's Division on Women (DOW). Thirty-two domestic violence liaisons are available in CP&P's 46 Local Offices, at least one in each county, to provide CP&P with on-site consultation, support and advocacy for the non-offending parent and children. Data on DOW's domestic violence programs, including data on residential programs that are over capacity, are available on the Commissioner's Monthly Report. Between January and December 2015, DCF served 13,312 clients, the majority of services in non-residential settings.

Home Visitation Programs

Since 2007 the state has doubled its support for home visiting programs, an evidence-based initiative that provides information on health and parenting and links health and social services to families with young children during pregnancy, infancy and until the child is age two or three, depending on the model. New Jersey currently serves families of infants and young children through three home visiting models available to families in 21 counties statewide: Healthy Families, Nurse-Family Partnerships and Parents as Teachers, as well as Home Instruction to Parents of Preschool Youngsters (HIPPY) in Bergen County. Data on home visitation programs are available on the Commissioner's Monthly Report. Between January and December 2015, DCF served 7,188¹⁵⁵ families in its home visiting programs.

Family Success Centers

New Jersey began developing Family Success Centers (FSCs) in 2007, initially with 21 centers. Currently there are 54 FSCs, with at least one located in each of the state's 21 counties. FSCs are neighborhood-based places where any community resident can access family support, information and services and specialized supports that vary depending on the needs and desires of the community in which they are located. Their function is to provide resources and supports

¹⁵⁴ To see the LGBTQI policy, go to: http://www.state.nj.us/dcf/policy_manuals/CPPIA-1-500_issuance.shtml

¹⁵⁵ As of November 2015, both new and ongoing clients are reported for Home Visiting Programs.

before families fall into crisis. FSCs are situated in many types of settings: storefronts, houses, schools, places of worship and public housing. Services, which are available to any family free of charge, include life skills training, parent and child activities, advocacy, parent education and housing related activities. Data on Family Success Centers and families served are available on the Commissioner's Monthly Report. Between January and December 2015, 30,177 families were served by FSCs statewide.

F. MEDICAL AND BEHAVIORAL HEALTH SERVICES

Medical Health Services

SEP Section II.F requires DCF to “continue to provide medical care to children and youth including appropriate medical assessment and treatment, pre-placement and entry medical assessments under EPSDT guidelines, dental examinations, up to date immunizations, follow-up care and treatment and mental health assessments and treatment, where appropriate.”

As part of the MSA, DCF successfully built child health units to facilitate and ensure the timely provision of health care to children in CP&P custody. These units are operational in each CP&P Local Office and are staffed with a managing Clinical Nurse Coordinator, Nurse Health Care Case Manager and staff assistants based on the projected number of children in out-of-home placement. Each child in a resource home continues to have a nurse assigned for health care case management. These child health units are a fundamental cornerstone of the reform effort, and as a result of this investment, since June 2011 DCF has maintained or improved performance on all measures related to health care services.

From January through December 2015, DCF continued to demonstrate sustained access to health care for children in out of home placement. In this monitoring period between 97 and 100 percent of children and youth entering out-of-home care received a pre-placement assessment (PPA) in an appropriate setting, considered to be a non-emergency room setting or in an ER, based on the presenting medical needs of the child/youth. The state also met its responsibility to conduct comprehensive medical examinations (CME) within 30 days of children entering out-of-home care. These examinations involve a comprehensive physical, including a developmental history and evaluation, and an initial mental health screening. From January through December 2015, between 81 and 91 percent of children entering out-of-home placement received a CME within 30 days and between 98 and 100 percent had received this exam within 60 days of entering care.

The state also continues to provide children in out-of-home placements with timely immunizations and annual dental exams: from January through December 2015, between 96 and 98 percent of children and youth were current with their immunizations. As of December 30, 2015, 99 percent of children and youth had received an annual dental exam.

DCF continues to conduct a biannual review to determine if children in out-of-home care receive timely follow-up care for identified medical needs and if children are receiving mental health

screening, assessment and recommended treatment. For the period January through June 2015,¹⁵⁶ data show that 96 percent of children in out-of-home care received some or all follow-up care for identified medical needs, 62 percent of children in out-of-home care who needed further treatment following a mental health assessment received all of the recommended treatment and another 29 percent had received some of the recommended treatment. For the period July through December 2015,¹⁵⁷ data show that 86 percent of children in out-of-home care received some or all follow-up care for identified medical needs, 77 percent of children in out-of-home care who needed further treatment following a mental health assessment received all of the recommended treatment and another nine percent had received some of the recommended treatment.

Finally, NJ SPIRIT and SafeMeasures provide reports on when a child receives a required Early and Periodic Screening, Diagnosis and Treatment (EPSDT) well-child examination. However, these reports do not account for whether or not a child is clinically up-to-date with these exams. That is, a child may be noted in NJ SPIRIT as not up to date if the child was sick at the EPSDT visit or if the visit was missed but rescheduled within a close time period. Also, especially for younger children, once a child is off schedule, he or she will remain off schedule within DCF's data system for all subsequent EPSDT exams. Therefore, the Child Health Program conducts a secondary review of all the records of children noted as "not current with their EPSDT exams." As of December 2015, 90 percent of children under the age of two and 93 percent of children age two and older were up-to-date with these exams.¹⁵⁸

Most of the health care tracking described above are currently available through the Commissioner's Monthly Report and all health care data are anticipated to be available in the future in DCF's *Report on the Healthcare of Children in Out-of-Home Placement in New Jersey*.

Behavioral Health Services

SEP II.F also requires the state to "continue to provide behavioral health treatment in the least restrictive setting for children and youth."

DCF's Children's System of Care (CSOC) serves children and adolescents with emotional, behavioral health, developmental and intellectual disabilities and co-occurring conditions. Beginning in 2012, the provision of services to children with developmental and intellectual

¹⁵⁶ The Health Care Case Record Review conducted by DCF to report on the above indicators for January-June 2015 was done by reviewing records of a random sample of children in CP&P out-of-home placement who were removed between November 1, 2014 and April 30, 2015 and were in care for a minimum of 60 days. 1,768 children comprise this cohort. A sample of 332 children was reviewed. The results have a ± 5 percent margin of error.

¹⁵⁷ The Health Care Case Record Review conducted by DCF to report on the above indicators for July-December 2015 was done by reviewing records of a random sample of children in CP&P out of home placement who were removed between May 1 and October 31, 2015 and were in care for a minimum of 60 days. 1,795 children comprise this cohort. A sample of 320 children was reviewed. The results have a ± 5 percent margin of error.

¹⁵⁸ For children under the age of two, performance on ensuring EPSDT between July and December 2015 ranged from 90 to 99 percent. For children over the age of two, performance ranged between 91 to 98 percent during the same six month time period.

disability, formerly under the purview of the Department of Human Services (DHS), transitioned to CSOC.

CSOC continues to seek new opportunities to best serve such a large and diverse population. For example, in 2015, the CSOC concluded its participation in a Developmentally Disabled (DD)/Mentally Ill (MI) Learning Collaborative facilitated by Georgetown Technical Assistance Center which supported CSOC in focusing on skill development for both the CSOC team and system partners. CSOC also continued implementation of the Comprehensive Medicaid Waiver focused, in part, on increasing supports for children and youth who have a risk of hospital level care (i.e., seriously emotionally disturbed). Two pilots programs have begun -- one focused on children and youth with autism spectrum disorder and one focused on increasing services to youth with a developmental disability and a behavioral health concern. Each of the two pilot programs can accommodate 200 individuals.

The Commissioner's Monthly Report provides utilization and other descriptive data on the CSOC. Data from the Commissioner's February 2016 Monthly Report show that DCF continues to serve an increasing population of children through community based care management and that the number of children in out-of-home treatment settings in 2015 had declined since 2013. New Jersey's system of behavioral health services for children is impressive.

G. TRAINING

Section II.G of the SEP requires the state to continue to maintain a comprehensive training program for child welfare staff and supervisors, and report training data for in-service, pre-service, permanency planning, concurrent planning and adoption training, as well as competency testing. From January through December 2015, DCF continued to meet this measure as it has since early in the litigation.

Under the MSA, the Monitor reported these data semi-annually through a review of a statistically significant sample of staff transcripts. The parties have agreed that in the future, these data will be reported annually in DCF's Workforce Report, currently available on the DCF website. However, the Monitor will perform periodic checks of training academy operations to validate that continued performance is maintained at the required level.

According to DCF's annual Workforce Report, data from July 2014 through June 2015 show that 100 percent of DCF's caseload carrying staff and supervisors completed at least 40 hours of annual in-service training. In addition, DCF reports that from January 1 to December 31, 2015, 269 staff were trained and passed competency exams in pre-service; 316 staff participated in concurrent planning training; 316 were trained and passed competency exams in investigations and intake; 30 supervisors completed supervisory training; and 61 staff were trained in adoption practice.

H. FLEXIBLE FUNDING

Under Section II.H of the SEP, DCF is required to maintain availability of flexible funds 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.”

Flexible funds are a source of money accessible to casework staff to meet the individualized short term needs of a child, birth family or resource family. The fund is meant to assist families to purchase needed items, goods or services that they cannot otherwise afford in order to provide appropriate care for children, promote family preservation, avoid the disruption of otherwise stable placements and to facilitate family reunification. DCF will be reporting data on flexible funding in its Annual Budget Report. As the Monitor reported in the previous monitoring period, in FY 2015 the flexible fund budget was \$5,714,602. From January to June 2015, total flexible fund expenditures were \$2,897,269.00 and from July to December 2015, these funds totaled \$2,490,853.53, for a total of \$5,388,122.53 in CY 2015.

I. RESOURCE FAMILY CARE SUPPORT RATES

SEP Section II.I requires that DCF “continue to adjust the resource family care support rates to maintain them at the United States Department of Agriculture (USDA) estimates for the cost of raising a child for the following State fiscal year. The State will continue to adjust the Independent Living Stipend considering the USDA estimate rates for raising an adolescent, the Housing and Urban Development (HUD) Fair Market Value for average rent in New Jersey, and Internal Revenue Service (IRS) estimates for monthly food and household expenses.”

Historically the USDA’s Center for Nutritional Policy and Promotion reports annually on the cost of raising a child. The most recent USDA report was issued in August 2014 for CY 2013. The USDA’s report for CY 2014 has not yet been issued. DCF will be adjusting its resource family care support rates and its independent living stipend based on receipt of the USDA’s annual reports and will be reporting the adjusted rates to the Monitor.¹⁵⁹ DCF’s resource family support rates are also found in the DCF Online Policy Manual and in its budget report.

J. PERMANENCY

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

Permanency is a cornerstone of child welfare work and DCF’s continued training and implementation of the CPM provides a framework for staff to focus on permanency outcomes for children and families. The monitoring reports will continue to include outcome data for those permanency measures which are categorized as Outcomes *To Be Achieved* and Outcomes *To Be Maintained*, and the state will also be reporting more thoroughly on progress in this area through its annual Report on Work with Children, Youth and Families.

¹⁵⁹ USDA has altered its schedule for producing its Annual Report on costs of raising a child. By agreement, DCF will update the rates within 30 days of the USDA report’s release each year to meet the SEP standards and will provide written confirmation to the Monitor.

K. ADOPTION PRACTICE

Section II.K of the SEP requires the state maintain the “process of freeing a child for adoption and seeking and securing an adoptive placement shall begin as soon as the child’s permanency goal becomes adoption but no later than as required by federal law. The State will conduct five and 10 month placement reviews for children in custody. DCF shall commence the adoption process as soon as a diligent search process has been completed and has failed to identify the location of both parents or a suitable family placement. DCF shall develop a child specific recruitment plan for all children with a permanency goal of adoption needing the recruitment of an adoptive family.” DCF will report on these data in the annual Adoption Report, which will be available on DCF’s website. Specific performance data for five and 10 month placement reviews and child specific adoption recruitment plans for January through December 2015 are discussed below.

Five and 10 month placement reviews are routinely occurring. DCF reports that between January and December 2015, 90 to 98 percent of applicable families each month had the required five month reviews and between 79 and 95 percent of applicable families each month had the required 10 month reviews.

DCF workers hold these enhanced reviews in CP&P Local Offices for staff to engage families in concurrent planning, a child welfare practice in use throughout the country that requires workers to simultaneously engage with families on reunifying children as quickly as possible while also pursuing alternative permanency options should reunification efforts fail.

The majority of child specific adoption recruitment plans are being completed in a timely manner. It is CP&P’s practice to develop a child specific recruitment plan for children with a permanency goal of adoption who do not have an adoptive home identified at the time of termination of parental rights. These plans should be developed within 30 days of a child’s goal change. Of the 66 children requiring a child specific plan between January and June 2015, 56 (85%) had a child specific recruitment plan developed within 30 days of goal change.¹⁶⁰ Of the 51 children requiring a child specific plan between July and December 2015, 46 (90%) had a child specific recruitment plan developed within 30 days of goal change.¹⁶¹

¹⁶⁰ Of the 10 cases where the plan not completed within 30 days of goal change, seven (11%) had a plan developed within 60 days of goal change, two (3%) had a plan developed within 90 days of goal change and the remaining child had a plan developed over 91 days.

¹⁶¹ Of the five cases where the plan was not completed within 30 days of goal change, three (6%) had a plan developed within 60 days of goal change and two (4%) had a plan completed within 90 days.

V. TO BE ACHIEVED AND TO BE MAINTAINED

The remaining items in this report are areas in the SEP for which the state has satisfied the specified performance targets for at least six months -- designated as *To Be Maintained* -- or areas of performance that the state still needs to achieve -- designated in the SEP as *To Be Achieved*. The state will continue to provide the Monitor with primary and backup data and will be publishing reports as described in the introduction to this report and in Table 1A and 1B.

A. INVESTIGATIONS

Investigative Practice

Section IV of the SEP includes four measures related to investigative practice.¹⁶² Section III.A of the SEP includes one measure designated as an Outcome *To Be Maintained*, timeliness of IA investigations. The remaining three measures are designated as Outcomes *To Be Achieved*: 1) timeliness of alleged child abuse and neglect investigation completion within 60 days; 2) timeliness of alleged child abuse and neglect investigation completion within 90 days, and 3) quality of investigations.

The MSA required that 98 percent of investigations of child abuse and neglect be completed within 60 days. The SEP, responding to feedback from staff and stakeholders that there are circumstances where workers need additional time to gather pertinent information in determining investigative findings, modified the performance target and methodology (e.g., investigations involving the prosecutor's offices and sexual abuse cases). The modifications to the methodology include the addition of investigations with documented acceptable extension requests in increments of 30 calendar days to complete investigations beyond the 60 day time frame. CP&P policy outlines acceptable reasons for extension requests and the supervisory approval process.¹⁶³

To assess performance for timeliness of investigation completion, the Monitor conducted a review of a statistically significant sample¹⁶⁴ of investigations where an extension request was submitted and approved by a supervisor during the months of March, June and August 2015. Overall, the review determined that 32 percent of the cases¹⁶⁵ demonstrated appropriately documented extensions. These findings were shared with CP&P to verify the Monitor's conclusion. Given the results of the review, the Monitor was unable to validate appropriate use of investigation extension requests and thus cannot determine performance for this monitoring period using the new reporting methodology. Data provided in this report on these measures therefore understate performance by some unverifiable amount because it does not yet reflect acceptable extension requests.

¹⁶² Some of the measures were modified in the SEP with respect to performance target and/or methodology as described in the text.

¹⁶³ CP&P Policy Manual 5-28-2013, Intake Investigation and Response, II.C.5.125

¹⁶⁴ 95% confidence level with ± 5 percent of error

¹⁶⁵ 51 of the 158 cases reviewed.

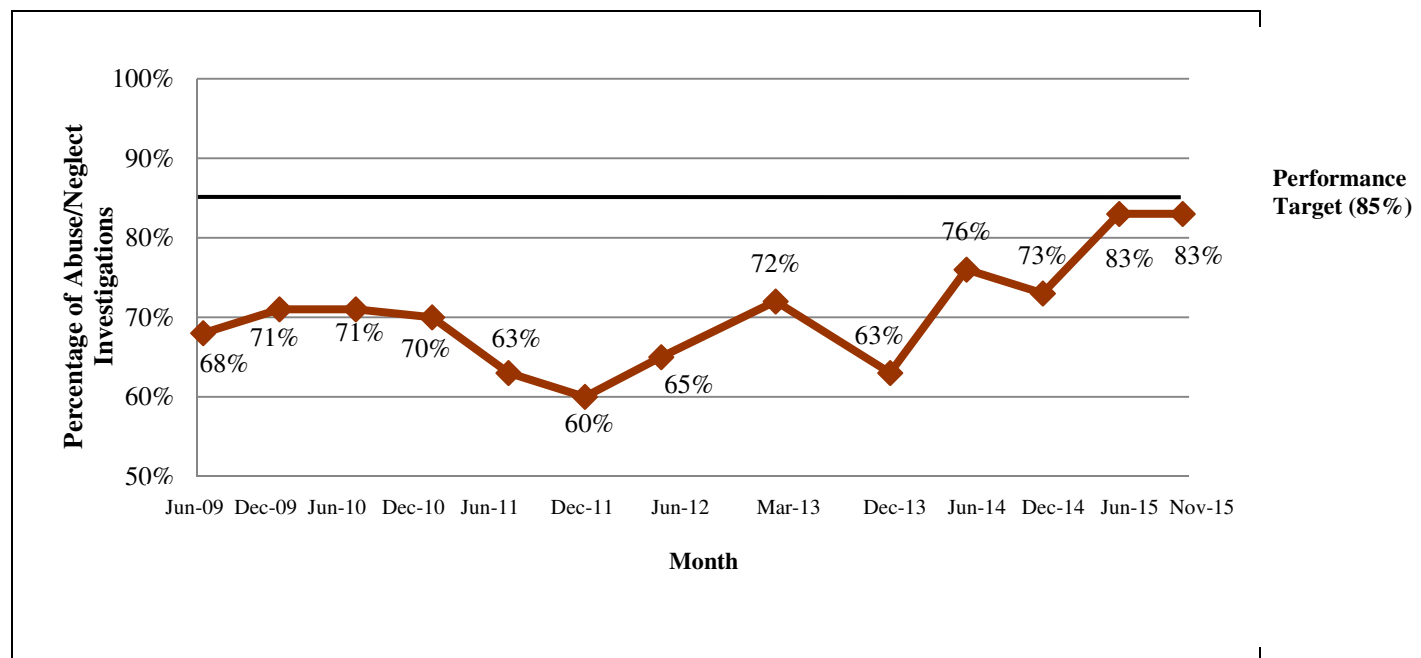
Timeliness of Investigation Completion

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

Performance as of November 30, 2015:

In June 2015, there were 4,582 investigations of alleged child abuse and neglect and 3,791 (83%) were completed within 60 days. Performance between January and June 2015 ranged from a low of 78 percent to a high of 83 percent. In November 2015,¹⁶⁶ there were 4,109 investigations of child abuse and neglect and 3,406 (83%) were completed within 60 days. From July through November 2015, performance ranged from a low of 83 percent to a high of 85 percent. Performance for timeliness of investigation completion within 60 days although close to the final target was not met for the period of January through June 2015 nor for the period of July through November 2015.

**Figure 1: Percentage of Abuse/Neglect Investigations Completed within 60 days
(June 2009 – November 2015)¹⁶⁷**



Source: DCF data

Data does not include as compliant investigations with documented accepted extensions.¹⁶⁸

¹⁶⁶ November 2015 was the most current data available at the time of writing of this report.

¹⁶⁷ Ibid.

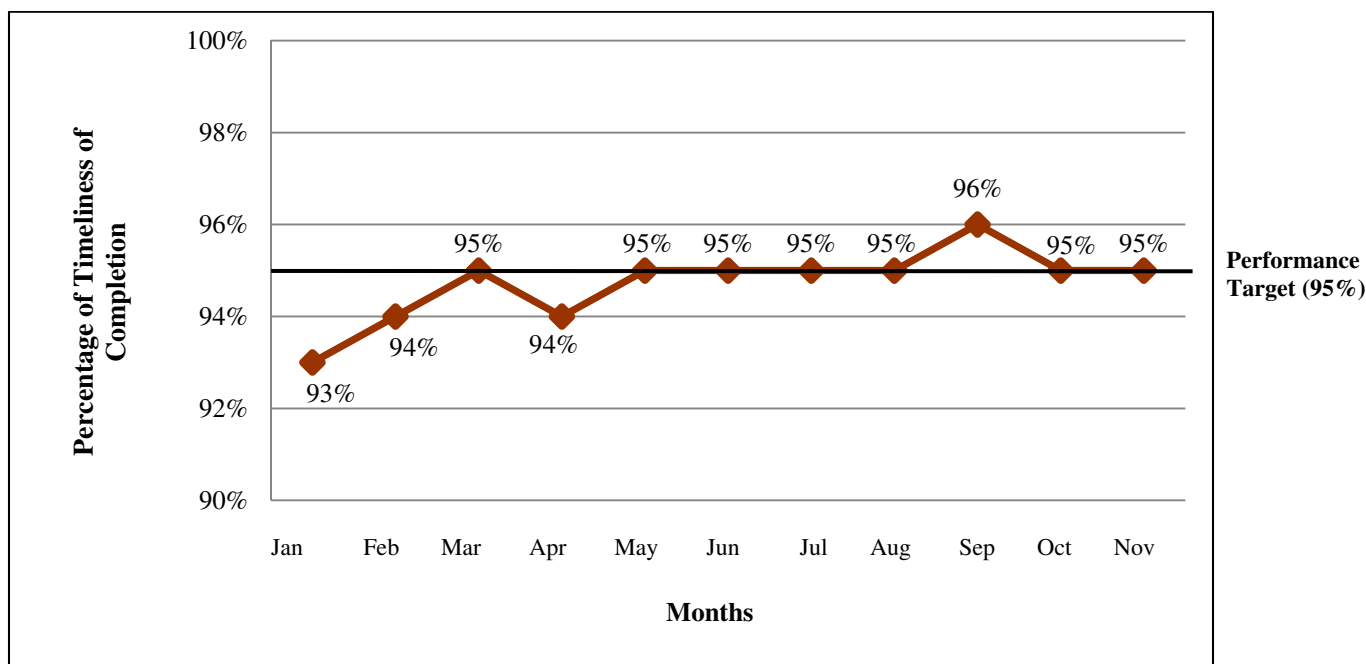
¹⁶⁸ The Monitor was unable to validate appropriate use of investigation extension requests and thus cannot determine performance using the new reporting methodology.

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

Performance as of November 30, 2015:

In June 2015, there were 4,582 investigations of child abuse and neglect and 4,356 (95%) were completed within 90 days. Performance between January and June 2015 ranged from a low of 93 percent in January 2015 to a high of 95 percent in March, May and June 2015 (See Figure 2). In November 2015, there were 4,109 investigations of child abuse and neglect and 3,918 (95%) were completed within 90 days.¹⁶⁹ From July through November 2015, performance ranged from a low of 95 percent to a high of 96 percent (See Figure 2). Performance for timeliness of investigation completion within 90 days met or exceeded SEP standards for period of January through June 2015 and the period of July through November 2015.

Figure 2: Percentage of Abuse/Neglect Investigations Completed within 90 days (January - November 2015)¹⁷⁰



Source: DCF data.

Data does not include as compliant investigations with documented accepted extensions.¹⁷¹

¹⁶⁹ November 2015 was the most current data available at the time of writing of this report.

¹⁷⁰ Ibid

¹⁷¹ The Monitor was unable validate appropriate use of investigation extension requests and thus cannot determine performance using the new reporting methodology.

Quality of Investigations

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

A case record review of the quality of CP&P's investigative practice was conducted in September 2014. The review examined the quality of practice of 313 randomly selected CPS investigations assigned to DCF Local Offices between February 1 and February 14, 2014 involving 477 alleged child victims.¹⁷² Overall, reviewers found that 244 (78%) of the investigations were of acceptable quality.¹⁷³ The findings of this review reflect some clear strengths in CP&P investigative case practice as well as areas in need of further development. A report of the findings was released in May 2015.¹⁷⁴

DCF and the Monitor will conduct a subsequent case record review to examine the quality of investigative practice in the fall of 2016. Findings from that review will be included in the next monitoring report.

Institutional Abuse Investigations

Quantitative or Qualitative Measure	1. <u>Timeliness of Completion</u> : IAI of allegations of Child maltreatment in placements shall be completed within 60 days
Performance Target	80% of IAI shall be completed within 60 days.

The Institutional Abuse Investigations Unit (IAIU) is responsible for investigating allegations of child abuse and neglect in resource family homes and other out-of-home care settings, as well as in child care facilities, detention centers, schools and residential facilities.¹⁷⁵ From January to December 2015, IAIU received 2816 referrals. This is a decrease of 179 referrals (6%) over the same time period in 2014.

Performance as of December 31, 2015

Between January and December 2015, monthly performance for this measure ranged from 83 and 91 percent of all IA investigations completed within 60 days. DCF exceeded the final target for this measure for the period of January through June 2015 and continued to do so for the period of July through December 2015. Under the MSA, the Monitor reviewed these data semi-

¹⁷² These results have a $\pm 5\%$ margin of error with 95% confidence.

¹⁷³ Reviewers could select four possible responses to the question of quality of the investigation which included completely, substantially, marginally and not at all. Investigations determined to be completely and substantially of quality were considered acceptable.

¹⁷⁴ A full report on the findings and recommendations from the review can be found at: http://nj.gov/dcf/about/divisions/opma/DCF_InvestigationsReviewReport_2014.pdf

¹⁷⁵ CP&P Policy Manual (4-1-2013). Introduction to IAIU, I, A, 100.

annually. The parties have agreed that in the future, these data will be publically reported monthly in the DCF's Commissioner's Report currently available on the DCF website.

B. FAMILY TEAM MEETINGS

Family Team Meetings (FTMs) are intended to support and promote individualized case planning. Workers are trained and coached to hold FTMs at key decision points in the life of a case, such as when a child enters placement, when a child has a change of placement and/or when there is a need to adjust a case plan to achieve permanency or meet a child's needs. Working at optimal capacity, FTMs enable families, providers, formal and informal supports to exchange information that can be critical to coordinating and following up on services, examining and solving problems and achieving positive outcomes. Meetings should be scheduled according to the family's availability in an effort to involve as many family members and family supports as possible. Engaging the family, the core of New Jersey's CPM, is a critical component of successful family teaming.

Engagement with families to support shared goals continues to be a primary focus of DCF leadership, Area Directors, Local Office managers and frontline staff. Efforts continue to be targeted at improving practice in this area as well as documenting and entering data on FTMs and also to account for legitimate reasons when FTMs do not occur (either because the parent is unavailable or the parent declined to attend). Due to continued challenges in verifying data on legitimate reasons why FTMs do not occur, performance data on FTMs include only the number of FTMs that have actually occurred. During this monitoring period, DCF provided the Monitor with data intended to account for legitimate reasons when the required FTMs are not occurring; in those cases workers are to document the reasons for the legitimate exceptions. In January 2016, the Monitor reviewed a random sample of cases and was not able to validate that workers were appropriately using the exceptions.¹⁷⁶ By agreement with DCF, as soon as the state determines that workers are properly using and documenting exceptions, the Monitor and DCF will conduct a review of statistically significant sample of cases with exception documentation and will report on the findings. Consequently, the report continues to show the progress that has been made in the number of FTMs actually held.

There are five performance measures pertaining to FTMs in the SEP; DCF met the SEP requirement that FTMs be held within 45 days of a child's removal for July through December 2015. DCF also met the SEP requirement that children with the goal of reunification have at least three FTMs each year, but has yet to meet the remaining three SEP final targets in this area.

¹⁷⁶ The Monitor reviewed a non-statistically valid but random sample of 30 cases that required an initial FTM from the data DCF provided for March, June and August 2015 to assess if the exceptions were being applied according to policy. Nine of the 30 cases reviewed were designated as "parent declined" and the remaining 21 cases were designated as "parent unavailable." NJ SPIRIT documentation indicates that three of the nine (33%) cases coded as "parent declined" demonstrated appropriate utilization of the exception criteria and 16 (76%) of the 21 cases coded as "parent unavailable" demonstrated appropriate utilization of that exception criteria.

Initial FTMs Held within 45 Days of Entry

Quantitative or Qualitative Measure	16. For children newly entering placement, the number/percent who have a family team meeting within 45 days of entry.
Performance Target	80% of children newly entering placement shall have a family team meeting before or within 45 days of placement.

Responding to feedback from staff and stakeholders that the timeframe for preparing families and conducting an initial FTM was too limited to meaningfully involve parents and their supports in many cases, the SEP modifies the MSA methodology and timeframe to require that 80 percent of children have FTMs within 45 days of removal.¹⁷⁷

Performance as of December 31, 2015:

According to NJ SPIRIT, and including only those FTMs that actually occurred, in June 2015, out of 285 possible FTMs, 238 (84%) occurred within 45 days of a child's removal from his or her home. Performance from January to June 2015 ranged from a low of 73 percent in January 2015 to a high of 87 percent in May 2015, with five of the six months either meeting or exceeding the final performance target. In December 2015 out of 244 possible FTMs, 207 (85%) occurred within 45 days of a child's removal. From July to December 2015, performance ranged from a low of 80 percent to a high of 88 percent, meeting the final target in each of the six months. Figure 3 shows DCF's performance on holding initial FTMs from January to December 2015.¹⁷⁸ DCF met the SEP performance measure for July through December 2015.

¹⁷⁷ Under the MSA the state required that 90 percent of children entering placement have FTMs within 30 days of a child's placement.

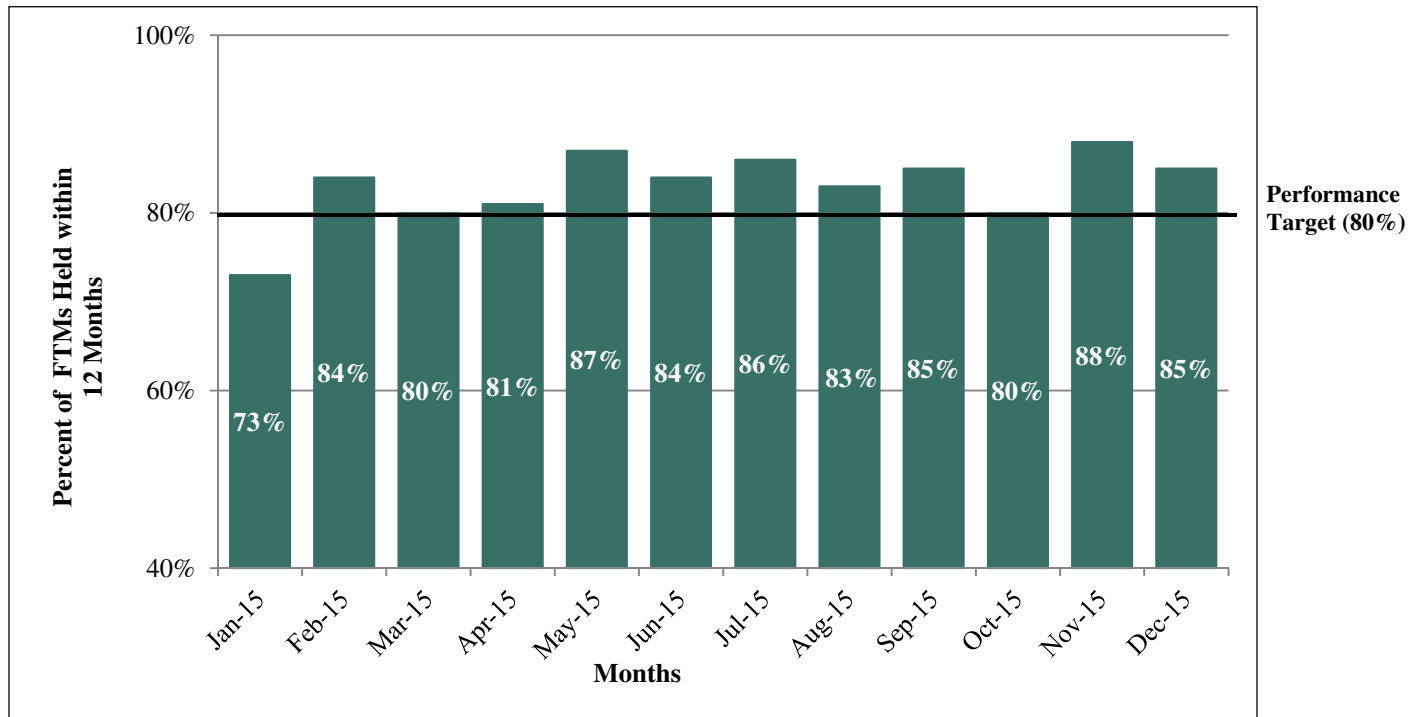
¹⁷⁸ Reported performance understates actual performance because data do not exclude instances where an FTM is not required.

**Table 2: Family Team Meetings Held within 45 days of Entry into Placement
(January – December 2015)
Performance Target 80 %**

Month	Total Number of Applicable Children	Number of Initial FTMs Held within 45 days	Percent
JANUARY	259	190	73%
FEBRUARY	315	264	84%
MARCH	369	295	80%
APRIL	357	290	81%
MAY	294	257	87%
JUNE	285	238	84%
JULY	308	265	86%
AUGUST	263	218	83%
SEPTEMBER	364	310	85%
OCTOBER	316	252	80%
NOVEMBER	223	196	88%
DECEMBER	244	207	85%

Source: DCF Data

**Figure 3: Family Team Meetings Held within 45 days of Entry into Placement
(January – December 2015)**



Source: DCF data

FTMs Held within the First 12 Months

Quantitative or Qualitative Measure	17. 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.
Performance Target	80% of children will have three additional FTMs within the first 12 months of the child coming to placement.

Section IV.B requires 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. Leadership, staff and stakeholders have argued for some time that the MSA requirement to hold quarterly FTMs did not provide enough flexibility for staff to conduct FTMs when good case practice required it; the SEP standards relating to FTMs are a direct response to that feedback.

Performance as of December 31, 2015:¹⁷⁹

Based upon data from NJ SPIRIT, and including only those FTMs that actually occurred, in June 2015, out of 203 applicable children, 149 (73%) had an additional three or more FTMs within the first 12 months of entering placement. Performance from January to June 2015 ranged from a low of 68 percent in April 2015 to a high of 81 percent in May 2015 (see Table 3). In December 2015, out of 175 applicable children, 135 (77%) had an additional three or more FTMs within the first 12 months of a child coming into placement. From July to December 2015, performance ranged from a low of 74 percent to a high of 78 percent. Figure 4 shows DCF's performance on holding FTMs within the first 12 months from January to December 2015.

DCF has not yet met this SEP performance measure.

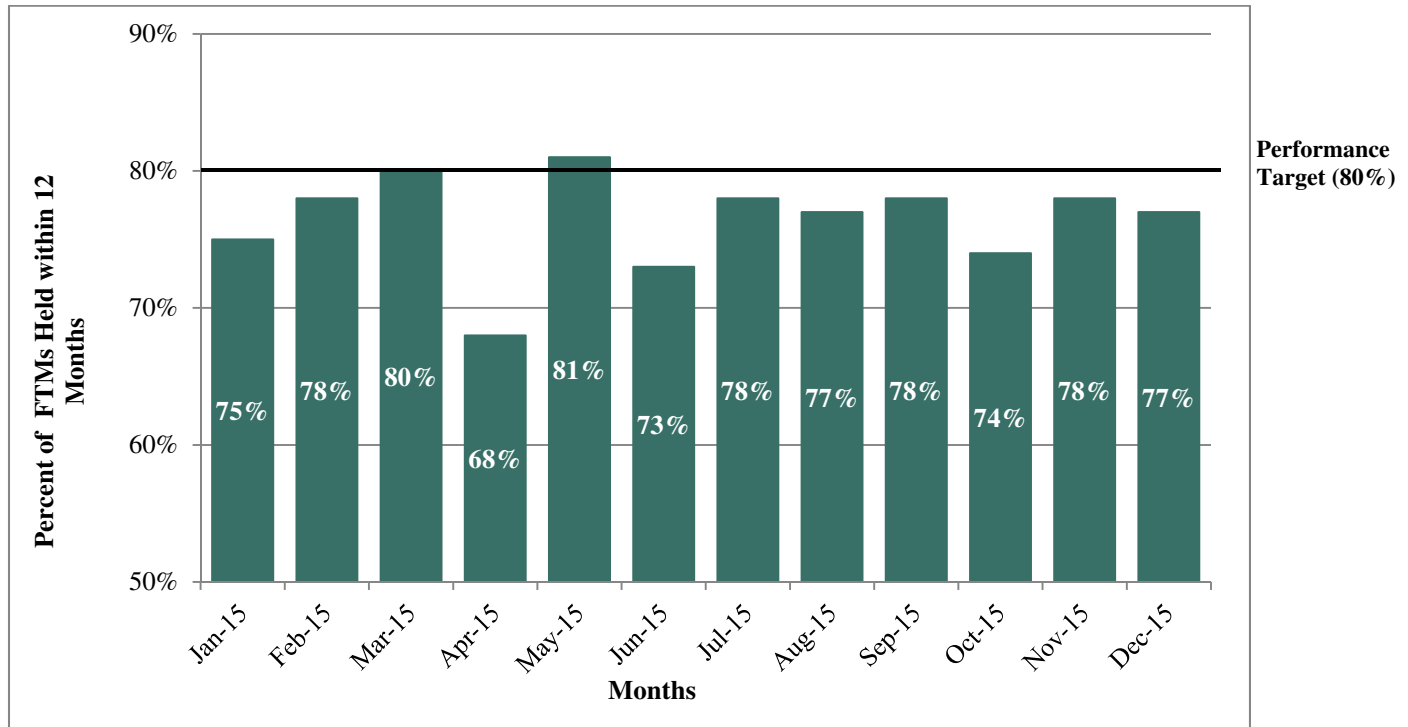
**Table 3: Family Team Meetings Held within the First 12 Months
(January – December 2015)
Performance Target 80 %**

Month	Total Number of Applicable Children	Number of 3 or More FTMs Held within 12 Months	Percent
JANUARY	256	193	75%
FEBRUARY	200	156	78%
MARCH	221	176	80%
APRIL	203	138	68%
MAY	224	182	81%
JUNE	203	149	73%
JULY	263	205	78%
AUGUST	203	157	77%
SEPTEMBER	215	167	78%
OCTOBER	219	163	74%
NOVEMBER	160	125	78%
DECEMBER	175	135	77%

Source: DCF data

¹⁷⁹ Children eligible for Measure 17 are all children who have been in out-of-home placement for 12 months who entered care in the specified month. For example, in January 2015, 256 children entered care in January 2014. Compliance is based on whether at least three FTMs were held for these children during the 12 month period they were in care.

**Figure 4: Family Team Meetings Held within the First 12 Months
(January – December 2015)**



Source: DCF data

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

Quantitative or Qualitative Measure	18. For all children in placement with a goal of reunification, the number/percent who have at least three FTMs each year.
Performance Target	After the first 12 months of a child being in care, 90% of those with a goal of reunification will have at least three FTMs each year.

Performance as of December 31, 2015:¹⁸⁰

Based on data from NJ SPIRIT, and including only those FTMs that actually occurred, in June 2015, out of 37 applicable children with goals of reunification, 35 (95%) had three or more FTMs after 12 months in out-of-home placement. Performance from January to June 2015 ranged from a low of 62 percent in January 2015 to a high of 95 percent in June 2015 (see Table 4). In December 2015, all 11 (100%) applicable children had three or more FTMs after 12 months in placement. From July to December 2015 performance ranged from a low of 83 percent

¹⁸⁰ Children eligible for Measure 18 are 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 January 2015, a combined total of 26 children entered care in January 2013, January 2012, January 2011, etc. and are still in placement with a goal of reunification. Compliance is based on whether at least three FTMs were held for these children during the most recent 12 months in care.

in September 2015 to a high of 100 percent in July and December 2015, with four of the six months meeting or exceeding the SEP final target. Figure 5 shows DCF's performance from January to December 2015 on convening FTMs after the first 12 months in placement for children with a goal of reunification.

Performance improved over the year and in the Monitor's judgment DCF has met this SEP performance measure for the period of July through December 2015.¹⁸¹

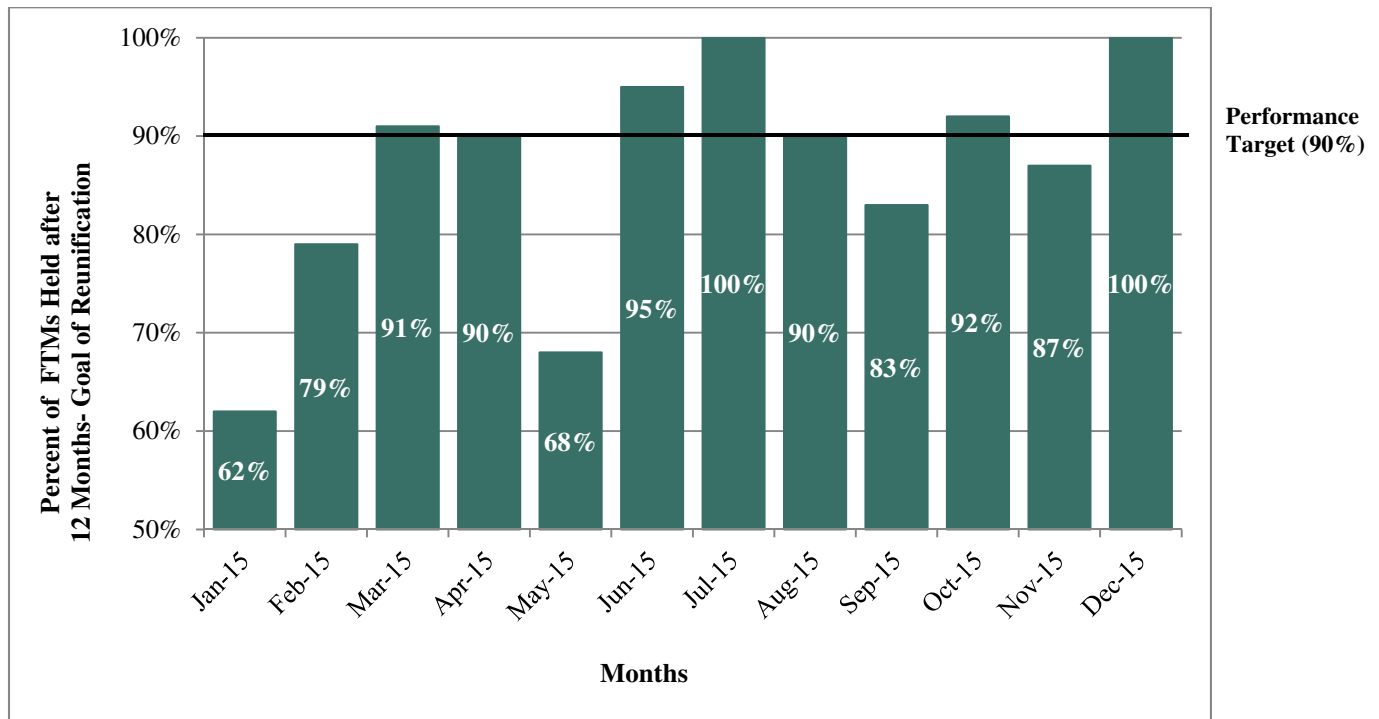
**Table 4: Family Team Meetings Held After 12 Months in Placement with a Goal of Reunification
(January – December 2015)
Performance Target 90%**

Month	Total Number of Applicable Children	Number of 3 or More FTMs Held After 12 Months in Placement with a Goal of Reunification	Percent
JANUARY	26	16	62%
FEBRUARY	28	22	79%
MARCH	35	32	91%
APRIL	38	34	90%
MAY	31	21	68%
JUNE	37	35	95%
JULY	31	31	100%
AUGUST	20	18	90%
SEPTEMBER	47	39	83%
OCTOBER	24	22	92%
NOVEMBER	31	27	87%
DECEMBER	11	11	100%

Source: DCF data

¹⁸¹ The SEP performance level was met four of the six months in the monitoring period. Further, the monthly percentages are based on a small number of applicable cases. If monthly numbers are aggregated over the six month period, the compliance is at 90%

**Figure 5: Family Team Meetings Held After 12 Months in Placement with a Goal of Reunification
(January – December 2015)**



Source: DCF data

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

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

Performance as of December 31, 2015:¹⁸²

Based upon data from NJ SPIRIT, and including only those FTMs that actually occurred, in June 2015, out of 210 children with goals other than reunification, 140 (67%) had two or more FTMs after 12 months in out-of-home placement. Performance from January to June 2015 ranged from a low of 64 percent in March 2015 to a high of 78 percent in February 2015. In December 2015, 116 out of 149 (78%) applicable children had two or more FTMs after 12 months in placement. From July to December 2015, performance ranged from a low of 63 percent in July 2015 to a high of 78 percent in December 2015. Table 5 and Figure 6 show DCF's performance from January to December 2015 on holding FTMs after the first 12 months in placement for children with a goal other than reunification.

DCF has not yet met this performance measure.

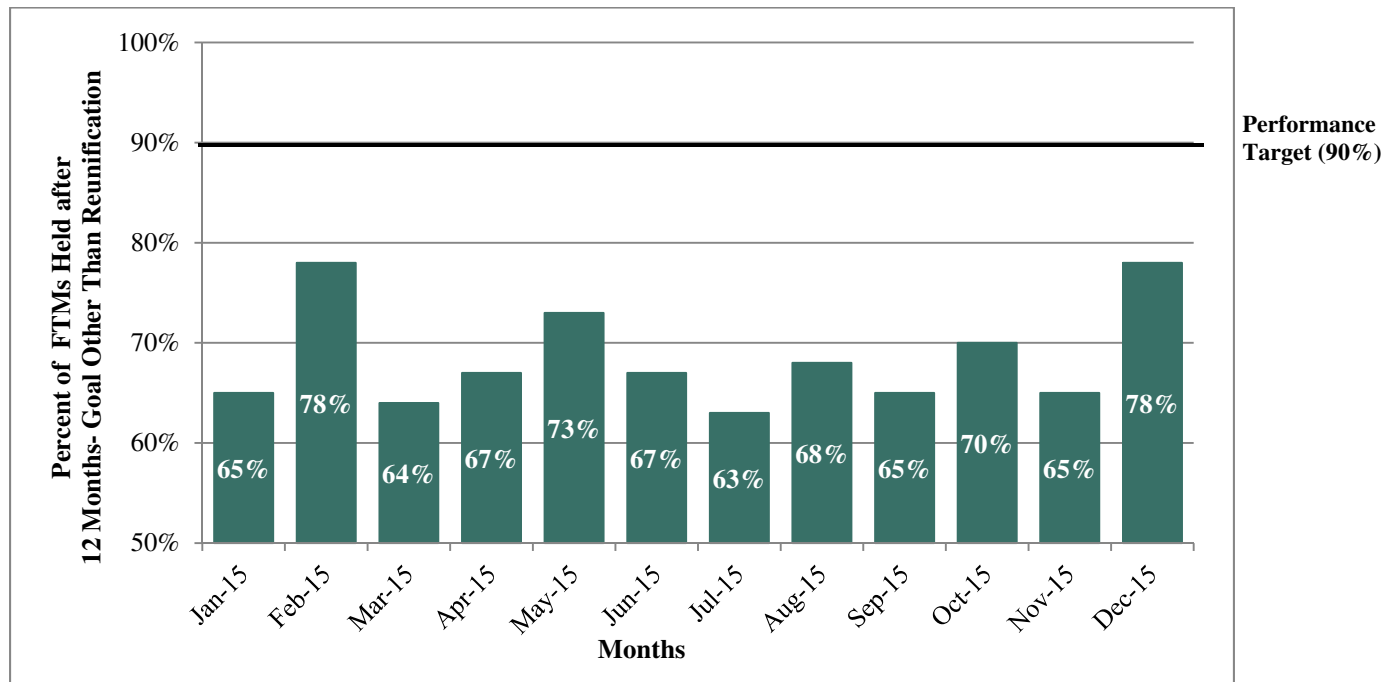
**Table 5: Family Team Meetings Held After 12 Months in Placement with a Goal other than Reunification
(January – December 2015)
Performance Target 90%**

Month	Total Number of Applicable Children	Number of 2 or More FTMs Held After 12 Months in Placement with a Goal Other than Reunification	Percent
JANUARY	161	104	65%
FEBRUARY	163	127	78%
MARCH	210	134	64%
APRIL	186	125	67%
MAY	243	178	73%
JUNE	210	140	67%
JULY	182	115	63%
AUGUST	189	128	68%
SEPTEMBER	225	146	65%
OCTOBER	195	136	70%
NOVEMBER	194	126	65%
DECEMBER	149	116	78%

Source: DCF data

¹⁸² Children eligible for Measure 19 are all children who have been in care *for at least 24 months* who entered care in the month specified each year and have a goal other than reunification. For example, in January 2015, a combined total of 161 children entered care in January 2013, January 2012, January 2011, etc. and are still in placement with a goal other than reunification. Compliance is based on whether at least two FTMs were held for these children during the most recent 12 months in care.

**Figure 6: Family Team Meetings Held After 12 Months in Placement with a Goal other than Reunification
(January – December 2015)**



Source: DCF data

Quality of Teaming

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

In order to assess the quality of collaborative teamwork with children, youth and family members, results from two QR indicators, team formation and team functioning are used. In assigning a rating, the reviewer considers a range of questions for these two indicators, including whether the family's team is composed of the providers and informal supports needed to meet the child and family's needs and the extent to which team members, family members included, work together to meet goals.

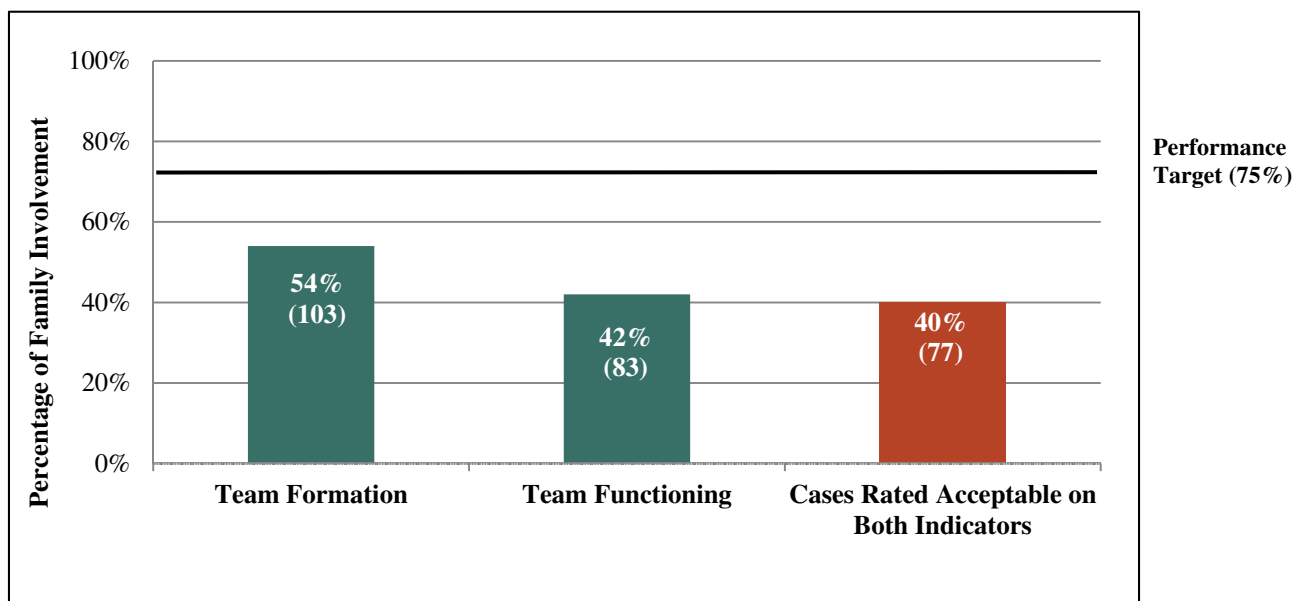
Performance as of December 31, 2015:

Overall results from the 191 cases reviewed from January to December 2015 using the QR process and protocol showed that 40 percent (77 of 191) of cases rated acceptable for Family Teamwork. Figure 7 below reflects the overall January to December 2015 findings: cases rated acceptable for *both* team formation and team functioning. Figure 7 also reflects that 54 percent

(103 of 191) of cases rated acceptable for team formation only and 42 percent (83 of 191) of cases rated acceptable for team functioning only.

DCF has not met the SEP performance target of 90 percent.

**Figure 7: Qualitative Review (QR) Cases Rates Acceptable on Family Teamwork
(January – December 2015)
(n=191)**



Source: DCF data

C. QUALITY OF CASE AND SERVICE PLANNING

The SEP incorporates the requirements related to case plans established in the MSA. In recognition of the state meeting the MSA requirement that a case plan be reviewed and modified every six months, SEP Section III.C.VI designated this measure as an outcome *To Be Maintained*. The remaining two measures – timeliness of the initial case plan and the quality of case planning – were designated as Outcomes *To Be Achieved*. The SEP measure related to quality of case planning reflects a change in the final performance target to require that 80 percent of case plans rate acceptable as measured by the QR. DCF reports publicly on case planning in its Commissioner’s Monthly Reports.

Timeliness of Case Planning – Initial Case Plans

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

Performance as of December 31, 2015

In June 2015, 288 (94%) out of a total of 307 initial case plans were completed within 30 days of a child entering placement. As shown in Table 6, between January and June 2015 the timely development of initial case plans ranged from 91 percent in January 2015 to 94 percent in June 2015. In December 2015, 267 (100%) out of 268 initial case plans were completed within 30 days of a child entering placement. Between July and December 2015, performance ranged from 88 percent in October 2015 to 100 percent in December 2015, with performance during three of the six months meeting or exceeding the final performance target.

DCF has met this performance measure three of the months between July and December 2015 and in the Monitor's judgment has partially met this performance measure.¹⁸³

¹⁸³ The Monitor reviews monthly performance data to determine if the performance target was met for each monitoring period.

**Table 6: Case Plans Developed within 30 and 60 days of Child Entering Placement
(January – December 2015)
Performance Target 95%**

	JANUARY		FEBRUARY		MARCH		APRIL		MAY		JUNE	
	#	%	#	%	#	%	#	%	#	%	#	%
Case Plans Completed in 30 days	250	91%	307	93%	362	93%	341	92%	296	93%	288	94%
Case Plans Completed in 31-60 days	24	9%	21	6%	23	6%	26	7%	20	6%	16	5%
Case Plans Not Completed after 60 days	2	<1%	4	1%	5	1%	4	1%	1	<1%	3	1%
Totals	276	100%*	332	100%	390	100%	371	100%	317	100%*	307	100%
	JULY		AUGUST		SEPTEMBER		OCTOBER		NOVEMBER		DECEMBER	
	#	%	#	%	#	%	#	%	#	%	#	%
Case Plans Completed in 30 days	330	95%	257	92%	355	93%	306	88%	228	96%	267	100%
Case Plans Completed in 31-60 days	15	4%	20	7%	23	6%	38	11%	9	4%	1	<1%
Case Plans Not Completed after 60 days	2	<1%	2	<1%	3	<1%	2	<1%	0	0	0	0
Totals	347	100%*	279	100%*	381	100%*	371	100%*	237	100%	268	100%*

Source: DCF data

*Percentage is greater or less than 100 due to rounding.

Timeliness of Case Planning-Every Six Months

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

Performance as of December 31, 2015:

The MSA required that 95 percent of case plans be reviewed and modified no less frequently than every six months. Because of the state's success in meeting this measure, the SEP designated it as *To Be Maintained* (SEP Section III.C). In June 2015, 95 percent of case plans had been modified as required; in December 2015, 97 percent of case plans met the SEP standard. From January through December 2015, between 95 and 98 percent of case plans were modified within the required six month timeframe. DCF continues to exceed the performance target of 95 percent for each month of the monitoring period.

Quality of Case Plans

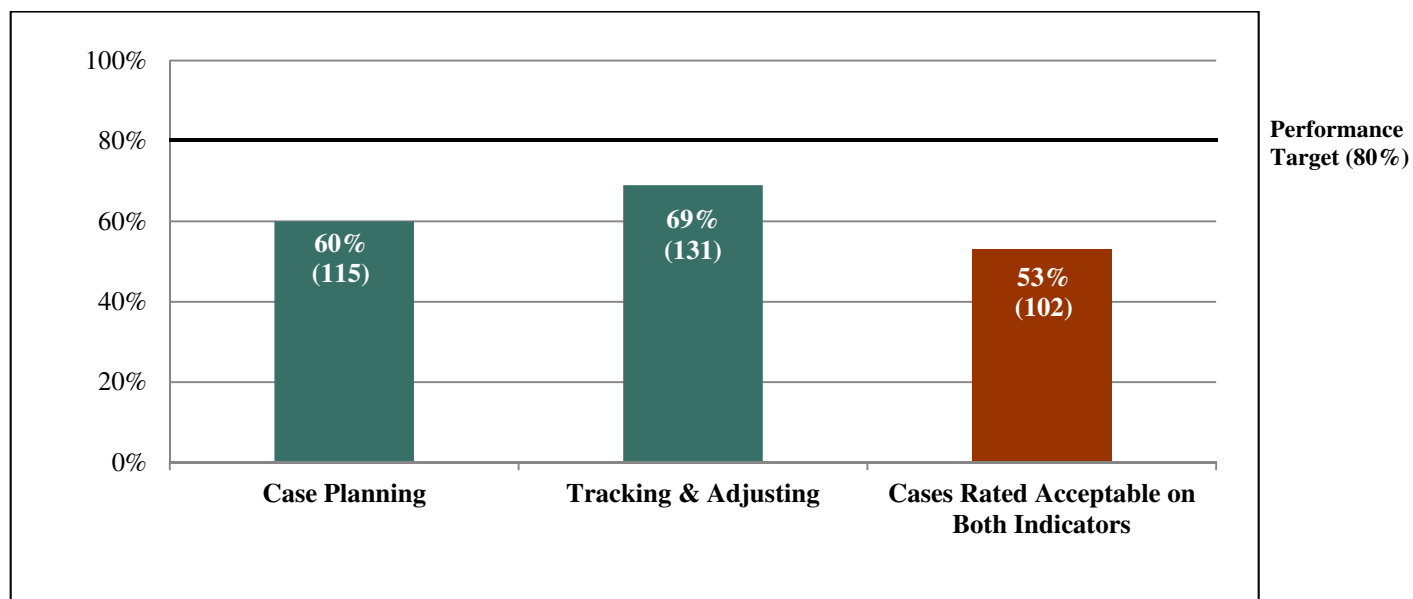
Quantitative or Qualitative Measure	23. <u>Quality of Case Plans</u> : The child's/family's case plan shall be developed with the family and shall be individualized and appropriately address the child's needs for safety, permanency and well-being. The case plan shall provide for the services and interventions 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.
Performance Target	80% of case plans rated acceptable as measured by the Quality Review (QR).

DCF policy and the SEP require family involvement in case planning, that plans are appropriate and individualized to the circumstances of the child/youth and family and that there is oversight of plan implementation to ensure case goals are being met and that plans are modified when necessary. Results from two QR indicators, case planning process and tracking and adjusting, are used to assess performance on this measure. Cases rated as acceptable demonstrate evidence that the child and families' 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.

Performance as of December 31, 2015:

Results from 191 cases reviewed from January to December 2015 indicate that 53 percent (102 of 191) of cases were rated acceptable on *both* the case planning and tracking and adjusting indicators.¹⁸⁴ From CY 2013 to CY 2014, there was notable improvement in the QR results for this measure.¹⁸⁵ Results remained relatively unchanged from CY 2014 to CY 2015 and DCF did not meet the SEP performance target. The QR process and findings are discussed in more detail in Section V.N.

Figure 8: Qualitative Review (QR) Cases Rated Acceptable for Quality of Case Plans and Components of Planning (January – December 2015) (n=191)



Source: DCF data

D. EDUCATION

The SEP requires that “children will be enrolled in school and DCF will have taken appropriate actions to ensure that their educational needs are being met,” and designates this performance measure as *To Be Maintained* (SEP Section III.G.11). The SEP requires that 80 percent of cases be rated acceptable on stability in school and learning and development as measured by the QR. Reviewers report on whether a child or youth is stable in their school placement and whether their educational needs are being met.

¹⁸⁴ From January to December 2015, 115 of 191 cases (60%) rated acceptable on case planning process indicator and 131 of 191 cases (69%) rated acceptable on tracking and adjusting indicator.

¹⁸⁵ In CY 2013, 78 of 192 (41%) cases rated acceptable on both the case planning process and tracking and adjusting QR indicators and in CY 2014, 92 of 180 (51%) cases rated acceptable on both the case planning process and tracking and adjusting QR indicators.

Quantitative or Qualitative Measure	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.
Performance Target	80% of cases will be rated acceptable as measured by the Quality Review (QR) in stability (school) and learning and development. The Monitor, in consultation with the parties, shall determine the standards for school stability and quality learning and development.

Performance as of December 31, 2015:

From January to December 2015, reviewers found that 86 percent (71 of 83) of children in applicable cases were stable in their education setting and having their learning and development needs met.¹⁸⁶

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

E. VISITATION

The ability of children in foster care to visit with their workers, parents and siblings is integral to the principles of the CPM and important to ensure children's safety, placement stability, maintain and strengthen family connections and increase children's opportunities to achieve permanency.

The SEP includes six measures related to visitation and include changes to either the final target or methodology from similar measures in the MSA. Two measures are designated as Outcomes *To Be Maintained* – 1) caseworker contacts with children newly placed or after a placement change and 2) caseworker contacts with children in placement. The remaining four measures are designated as Outcomes *To Be Achieved* – 1) caseworker contacts with parent when goal is reunification; 2) parent and child weekly visits; 3) parent and child bi-weekly visits; and 4) sibling visits. Each of these measures were modified in the SEP to specify that there are legitimate performance exclusions when 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. Monthly performance data on these measures are now provided on the Commissioner's Monthly Report.¹⁸⁷

Caseworker Visits with Children in State Custody

Both performance measures pertaining to caseworker visits with children in placement are Outcomes *To Be Maintained* in the SEP and required performance was maintained during this monitoring period.

¹⁸⁶ Children must be school-aged and in placement to be applicable for this measure.

¹⁸⁷ Currently, the Commissioner's Monthly Report reflects only instances where visits occurred and does not account for valid exclusions. Therefore, the data discussed in this section are different than those included in the Commissioner's Monthly Report.

Quantitative or Qualitative Measure	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.
Performance Target	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 November 30, 2015:

SEP citation III.F.9 requires that 93 percent of children 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 placement. Between January and November 2015, monthly performance ranged from 90 and 95 percent.¹⁸⁸

Quantitative or Qualitative Measure	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.
Performance Target	93% of children will have at least one caseworker visit per month in placement, for the remainder of placement.

Performance as of December 31, 2015:

SEP citation III.F.10 requires that during the remainder of a child's out-of-home placement, 93 percent of children have at least one caseworker visit per month in their placement. Between January and December 2015, monthly performance ranged between 95 and 97 percent each month, exceeding the target.

Caseworker Visits with Parents/Family Members

Quantitative or Qualitative Measure	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.
Performance Target	90% of families will have at least twice-per-month face-to-face contact with their caseworker when the permanency goal is reunification. ¹⁸⁹

Performance as of December 31, 2015:

In assessing performance for this measure, the Monitor conducted a review of a statistically significant sample of cases¹⁹⁰ requiring caseworker visits with parents in which documentation

¹⁸⁸ November 2015 was the most current data available at the time of writing of this report.

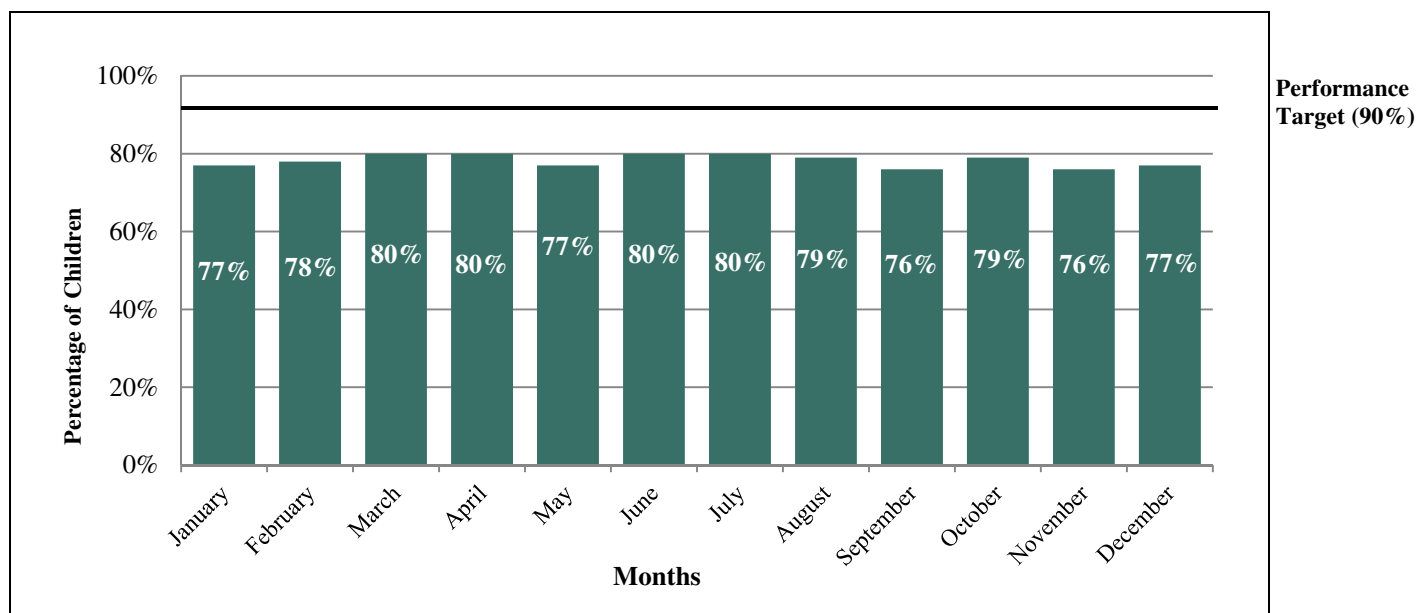
¹⁸⁹ The MSA final target for this measure was 95%. Current performance was calculated using findings from review of statistically significant sample of cases where exclusions were noted.

¹⁹⁰ 95% confidence level with +/-5% margin of error

indicated that the parent was unavailable or the visit was not required during the months of March, June and August 2015. These findings were shared with CP&P to verify the Monitor’s conclusion. Overall, the review determined that 88 percent of the cases¹⁹¹ had appropriate documentation that the visit requirement for that case should be excluded in the applicable timeframe. The Monitor uses that data to calculate the acceptable performance percentage for this report. As there is a five percent margin of error with the sample, the Monitor calculated performance conservatively by excluding from the universe of applicable cases 83 percent of the cases for which documentation indicated the parent was unavailable or the visit was not required.

Between January and December 2015, monthly performance on this measure ranged from 76 to 80 percent of applicable parents or other legally responsible family members were visited at least two times per month by a caseworker when the family’s goal is reunification (see Figure 9 below). For example, in December 2015, there were 2,979 children in custody with a goal of reunification for which an exclusion did not apply;¹⁹² the parents of 2,280 (77%) children were visited at least twice during the month and the parents of an additional 512 (17%) children had one contact in December. Current performance does not yet meet the level required by the SEP.

Figure 9: Percentage of Families who have at least Twice per month Face-to-Face Contact with Caseworker when the Goal is Reunification (January – December 2015)



Source: DCF data

¹⁹¹ 140 of the 160 cases reviewed.

¹⁹² In December 2015, there were a total of 3,180 children with a goal of reunification. Data from NJ SPIRIT indicated that the parents of 242 children had two or more events with unavailable parents or the visit was not required. The Monitor excluded from the universe 201 children or 83% of the 242. The universe of applicable children was 2,979 (3,180-201).

Visits between Children in Custody and their Parents

Quantitative or Qualitative Measure	29. <u>Weekly Visitation between Children in Custody and Their Parents:</u> Number/percent of children who have weekly visits with their parents when the permanency goal is reunification unless a court order prohibits or regulates visits or there is a supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.
Performance Target	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. ¹⁹³

Performance as of December 31, 2015:

Similar to the information detailed above for the previous measure, the Monitor conducted a review of a statistically significant sample of cases (95% confidence level with 5% margin of error) requiring parent visits with their children in which documentation indicated that the parent was unavailable or the visit was not required during the months of March, June and August 2015. These findings were shared with CP&P to verify the Monitor's conclusion. Overall, the review determined that 88 percent of the cases¹⁹⁴ had appropriate documentation that the visit requirement for that case should be excluded in the applicable timeframe. The Monitor uses that data to calculate the acceptable performance percentage for this report. As there is a five percent margin of error with the sample, the Monitor calculated performance conservatively by excluding from the universe of applicable cases 83 percent of the cases for which documentation indicated the parent was unavailable or the visit was not required.

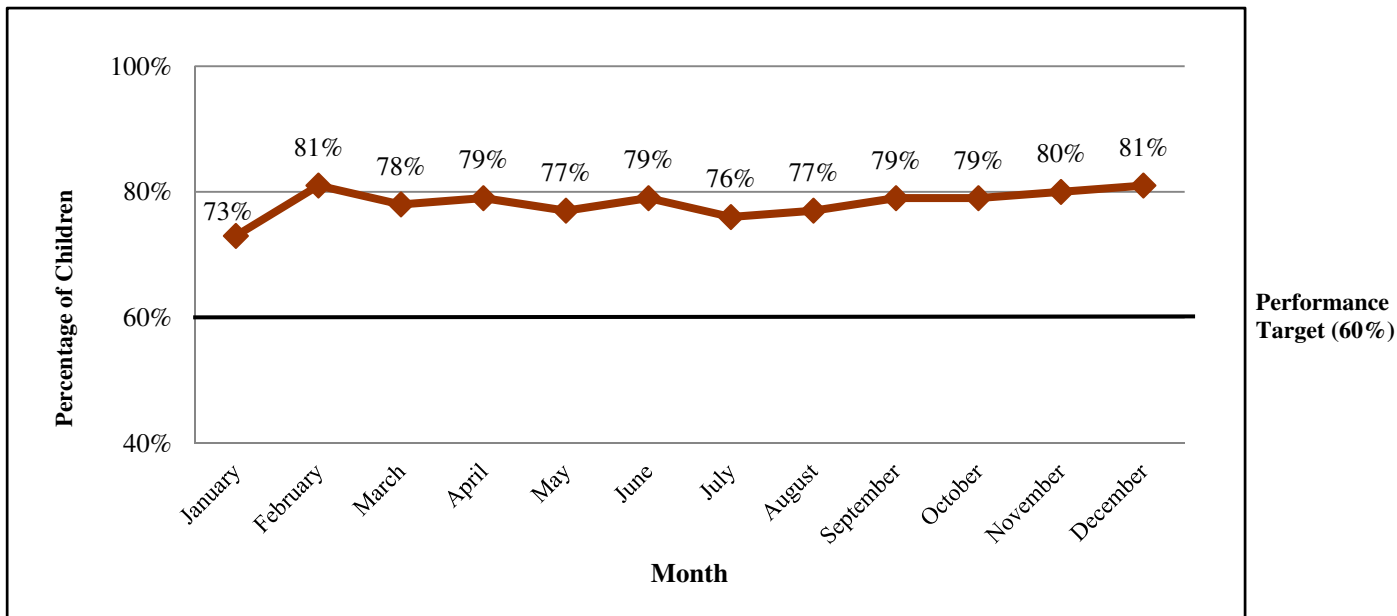
Between January and December 2015, a monthly range of 73 to 81 percent of children with a permanency goal of reunification had a weekly visit with their parents (see Figure 10 below). For example, for the four weeks in December 2015, there were an average of 2,616 children in placement with a goal of reunification that required weekly visits and an exclusion did not apply;¹⁹⁵ an average of 2,107 (81%) had a weekly visit. DCF met or exceeded the SEP required level of performance every month in CY 2015.

¹⁹³ The MSA final target for this measure was 60% and did not explicitly provide for the exclusions currently part of the SEP.

¹⁹⁴ 160 of the 181 cases reviewed.

¹⁹⁵ In December 2015, there was an average of 3,297 children each week that required visits with their parent. NJ SPIRIT data indicate that an average of 820 children did not require visits for an exclusion reason allowed by the SEP. The Monitor excluded from the universe 681 children or 83% of the 820. The universe of applicable children was 2,616 (3,297-681).

**Figure 10: Average Monthly Percentage of Children who had Weekly Visits with their Parent(s)
(January – December 2015)**



Source: DCF data

Quantitative or Qualitative Measure	30. <u>Bi-Weekly Visitation between Children in Custody and Their Parents:</u> Number/percent of children who have weekly visits with their parents when the permanency goal is reunification unless a court order prohibits or regulates visits or there is a supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.
Performance Target	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. ¹⁹⁶

Performance as of December 31, 2015:

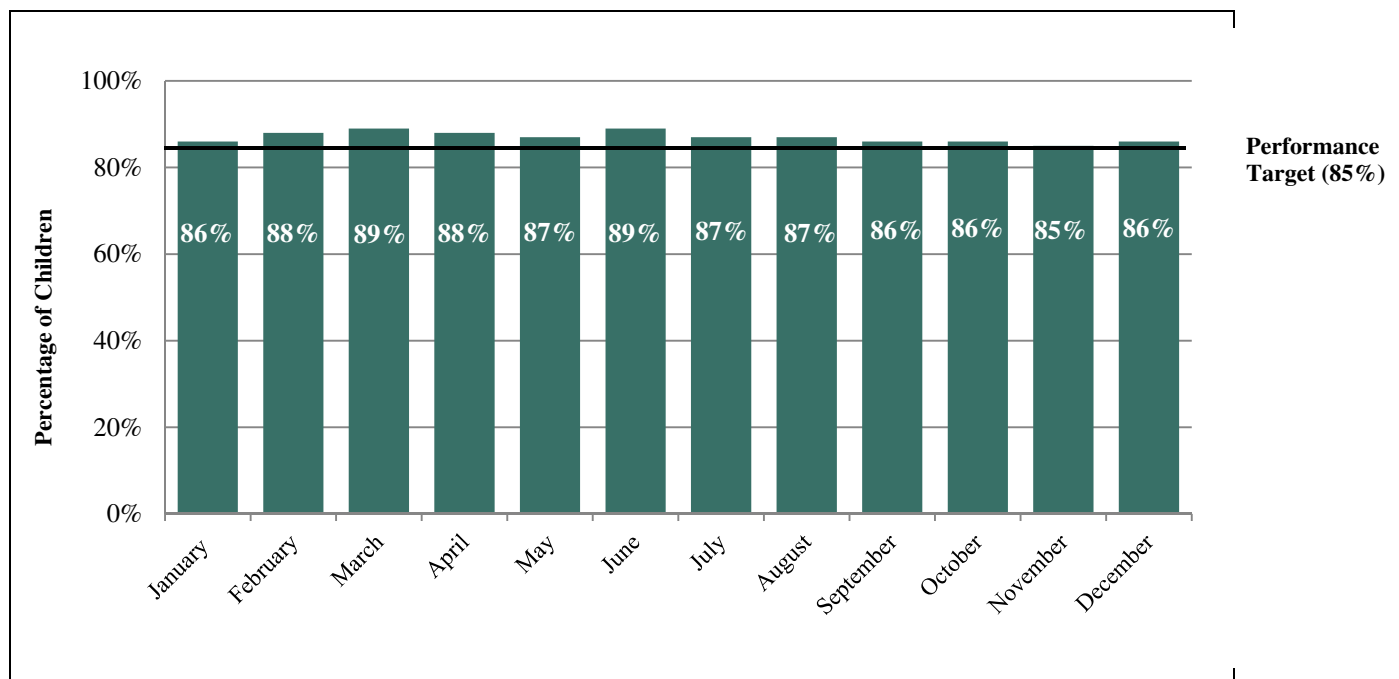
Performance was calculated for this measure using the same validation findings discussed above for weekly visits between parents and their children.

Between January and December 2015, a monthly range of 85 to 89 percent of children with a permanency goal of reunification had visits at least twice a month with their parents (see Figure 11 below). For example, during the month of December 2015, there were 2,850 children in

¹⁹⁶ The MSA final target for this measure was 85% and did not explicitly provide for the exclusions currently part of the SEP.

custody with a goal of reunification for which an exclusion did not apply;¹⁹⁷ 2,444 (86%) children had at least two visits during the month. DCF met the SEP required level of performance every month in CY 2015.

**Figure 11: Percentage of Children who had at least Twice Monthly Visits with their Parent(s)
(January – December 2015)**



Source: DCF data

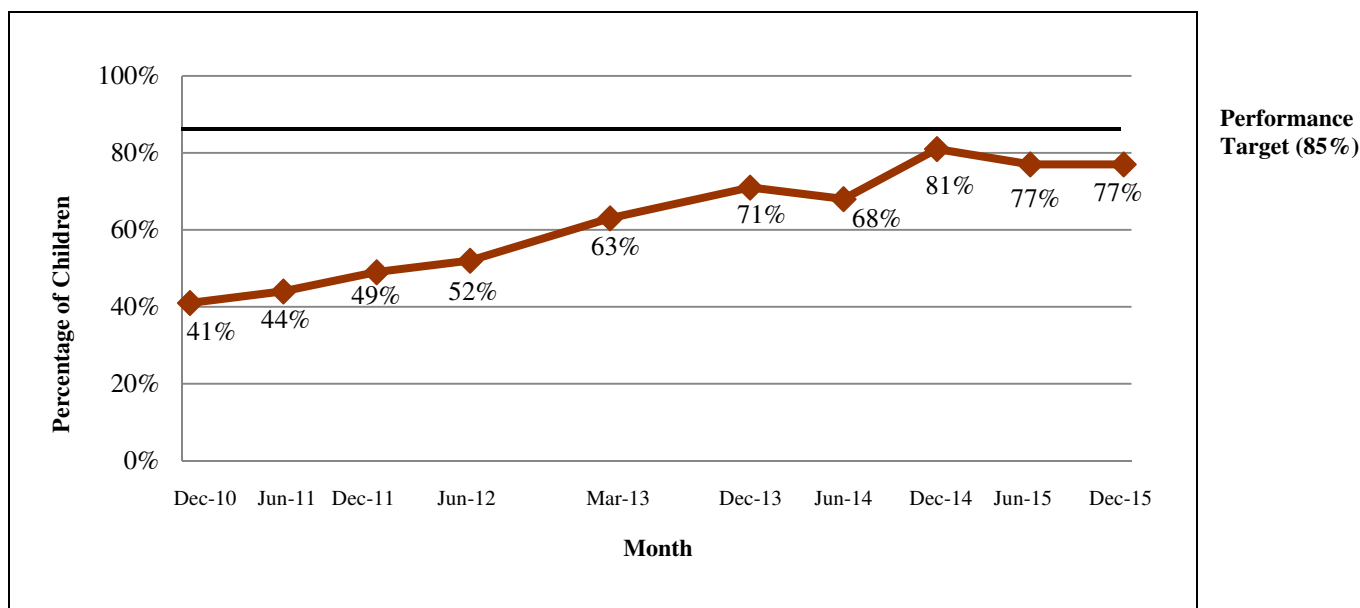
Visits between Children in Custody and Sibling Placed Apart

Quantitative or Qualitative Measure	31. <u>Visitation Between Children in Custody and Siblings Placed Apart:</u> Number/percent of children in custody, who have siblings with whom they are not residing shall visit with their siblings as appropriate.
Performance Target	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. ¹⁹⁸

¹⁹⁷ In December 2015, there were a total of 3,180 children with a goal of reunification. NJ SPIRIT data indicate that the parents of 398 children had two or more events with unavailable parents or children, the visit was not required or the child declined. The Monitor excluded from the universe 330 children or 83% of the 398. The universe of applicable children was 2,850 (3,180-330).

¹⁹⁸ The MSA final target for this measure was 85% and did not explicitly provide for the exclusions currently part of the SEP.

Figure 12: Percentage of Children in Custody who had at least Monthly Visits with Siblings, for Children not Placed with Siblings (December 2010 – December 2015)¹⁹⁹



Source: DCF data

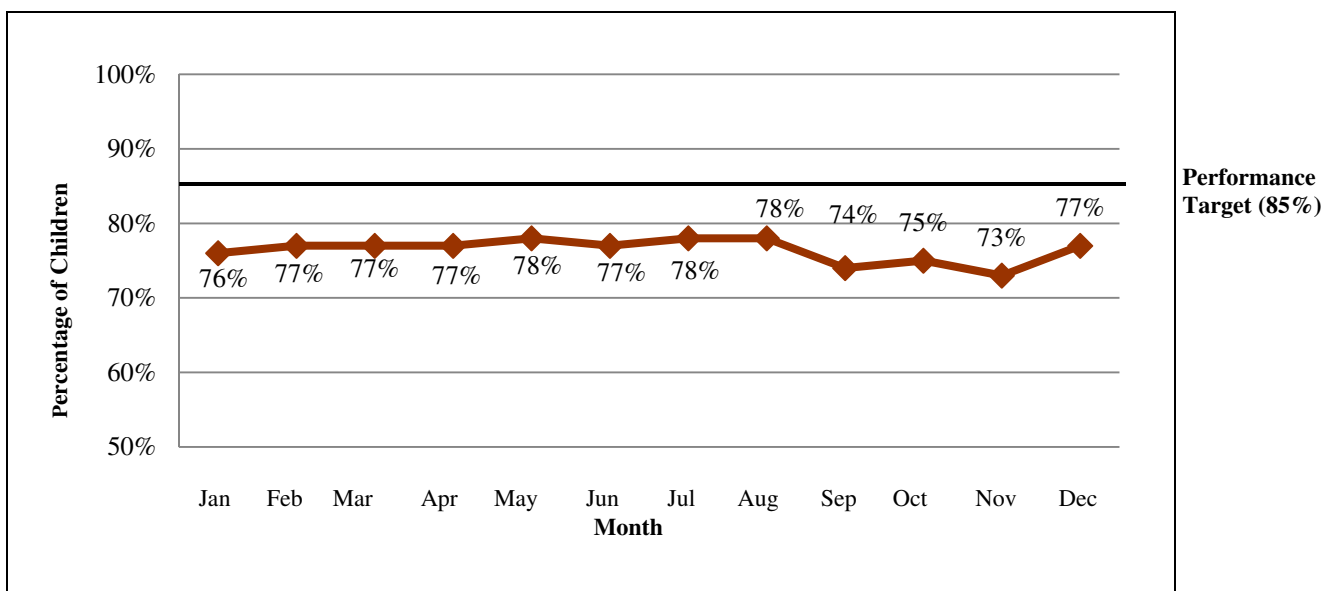
Performance as of December 31, 2015:

The SEP changed the previous MSA requirement to allow for exceptions to sibling visit requirements when 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. Thus, data on appropriate exclusions were not validated for this monitoring period, and actual performance is likely to be better than the data reported below.

Between January and December 2015, a monthly range of 73 to 78 percent of children had at least monthly visits with their sibling(s) when they were not placed together. For example, in December 2015 there were 2,231 children in placement who had at least one sibling who did not reside in the same household as them; 1,711 (77%) children had at least one visit with their siblings during the month.

¹⁹⁹ Reported performance understates actual performance because data do not exclude instances where a visit is not required. The Monitor will validate data for this measure during the next monitoring period and include the findings in the next monitoring report.

Figure 13: Percentage of Children in Custody who had at least Monthly Visits with Siblings, for Children not Residing with Siblings (January – December 2015)



Source: DCF data

F. PLACEMENT

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. The SEP includes three measures related to the placement of sibling groups (Sections IV.G. 32 – 34) and two measures related to placement stability (Sections 35 – 36), all of which are designated as *To Be Achieved* and discussed in further detail below.

The SEP requires that at least 80 percent of sibling groups of two or three children entering custody be placed together (SEP Section IV.G.32) and that for sibling groups of four or more, children will be placed with at least one other sibling in 80 percent of cases (Section IV.G.33). Finally, the SEP requires DCF to continue to recruit for resource homes capable of serving sibling groups of four or more (Section IV.G.34). As discussed below, DCF met each of the three performance measures related to sibling placements.

Multiple placement changes for children in foster care often create long term negative consequences: increasing social, emotional and behavioral problems; reducing school stability and achievement; and threatening children's overall mental health and stability. There are two performance measures in the SEP discussed below related to placement stability: one is similar to the MSA standard but changes the final target to require that at least 84 percent of children entering care will have no more than one placement change in the 12 months following entry into care (SEP Section IV.G.35). A second performance measure related to placement stability requires that 88 percent of children in care have no more than one placement change during the

13 to 24 months following their date of entry (SEP Section IV.G.36). DCF met one of the two performance measures pertaining to placement stability.

Performance data discussed below are the most recent data available and are analyzed by Hornby Zeller Associates with DCF.

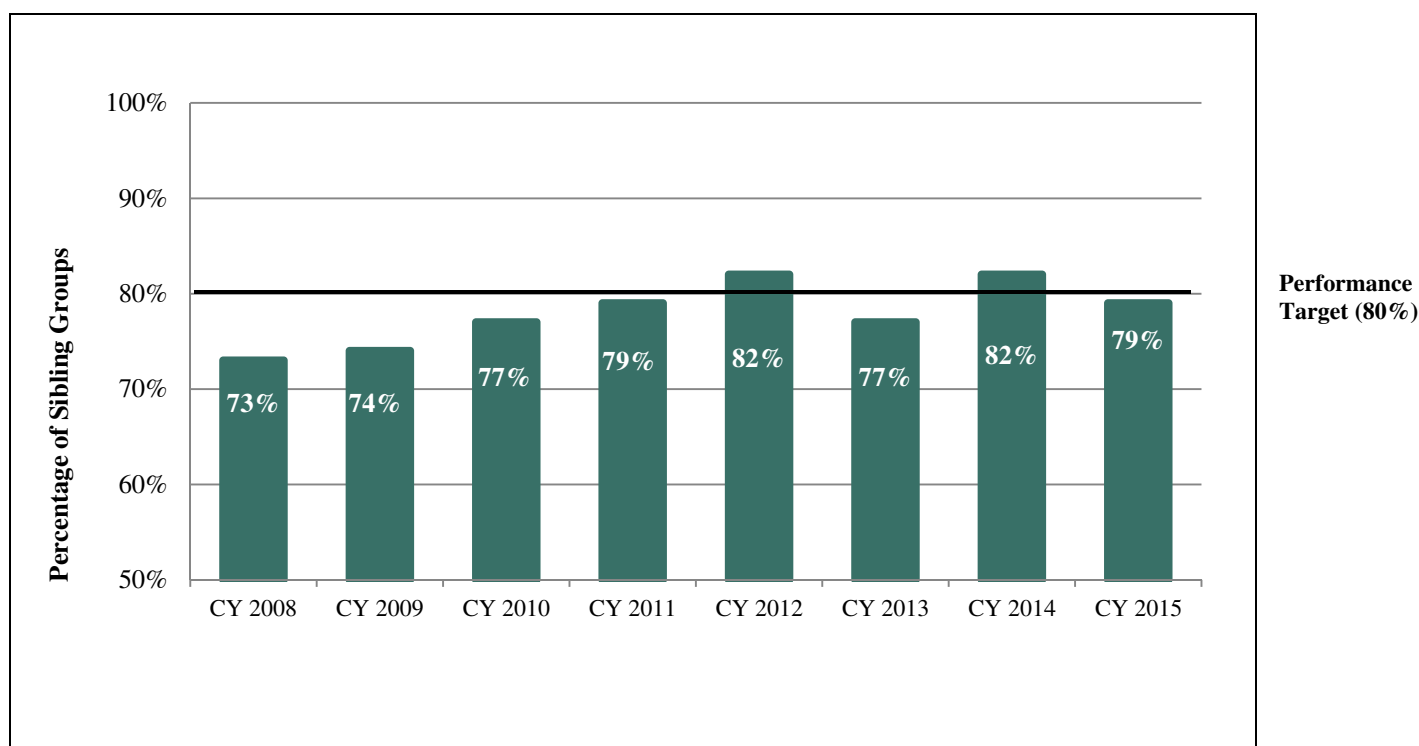
Placing Siblings Together

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

Performance as of CY 2015:

In CY 2015, there were 740 sibling groups that came into custody at the same time or within 30 days of one another; 637 (86%) sibling groups were comprised of two or three children. Of the 637 subset of sibling groups, 503 (79%) were placed together. In CY 2014, 82 percent of sibling groups of two or three were placed together. In the Monitor's judgment, DCF met the SEP standard.

Figure 14: Percentage of Sibling Groups of Two or Three Placed Together (CY 2008 – CY 2015)



Source: DCF NJ SPIRIT data analyzed by Hornby Zeller Associates.

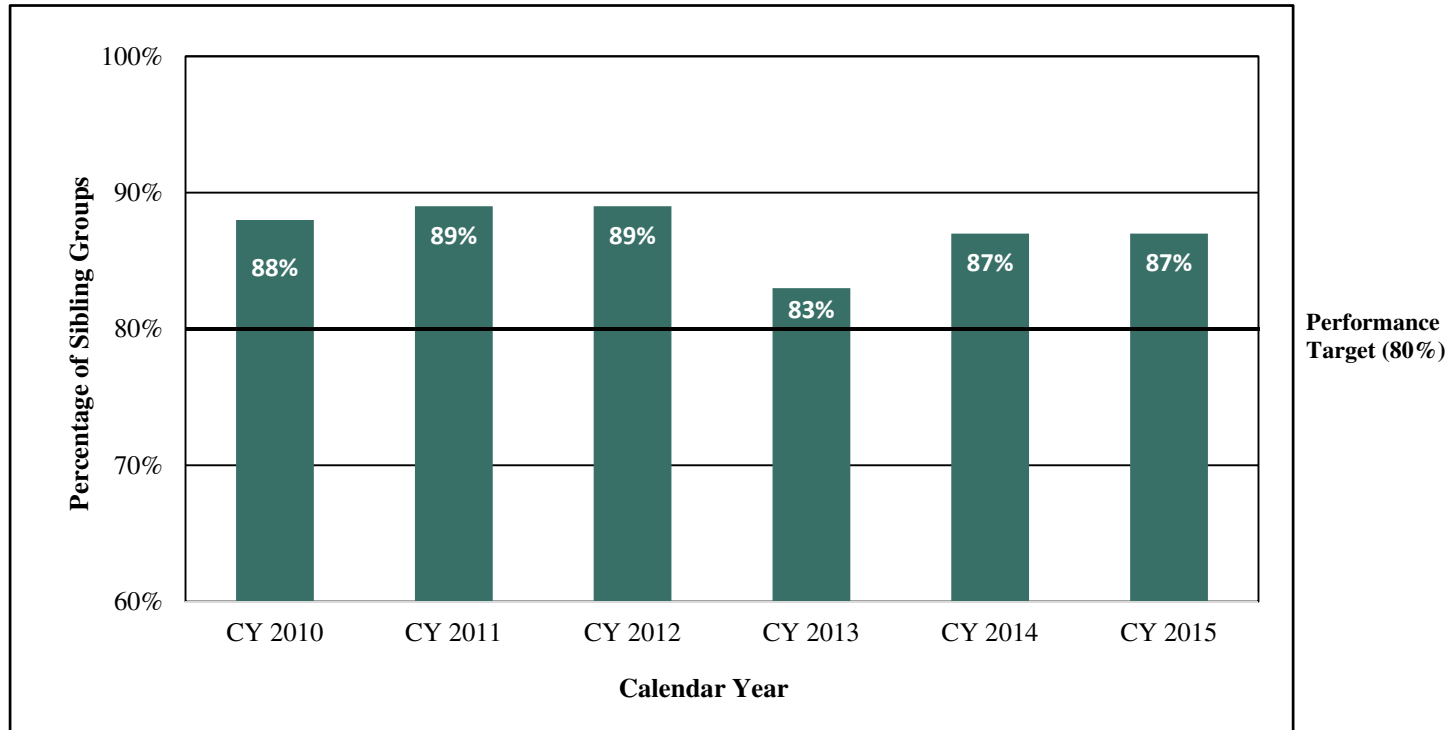
Placing Large Sibling Groups Together

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

Performance as of CY 2015:

In CY 2015, there were 476 children who were part of a sibling group of four or more children in placement. Of those 476 children, 413 (87%) were placed with at least one other sibling.²⁰⁰ DCF met and exceeded this performance measure for each of the previous six years.

**Figure 15: Percentage of Sibling Groups of Four or More Placed with at Least One Other Sibling
(CY 2010 – CY 2015)**



Source: DCF NJ SPIRIT data analyzed by Hornby Zeller Associates.

²⁰⁰ All performance data included in this Figure were calculated using the SEP methodology and are therefore different than previously reported data using the MSA methodology.

Recruitment of Sibling Groups of Four or More

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

SEP Section IV.G.34 requires the state to continue to recruit for resource homes capable of serving sibling groups of four or more children. As discussed in the Foundational Elements section of this report related to Appropriate Placements, the state is shifting its recruitment practice from an emphasis on the total number of homes licensed to a focus on recruitment for targeted needs, such as the need for more homes for large sibling groups. Part of this change in emphasis is a strategy to engage the existing pool of resource families about the need for homes that will accept large sibling groups. Additionally, DCF continues to use market segmentation to strategically identify and target geographic areas and local communities and venues where data show successful resource families tend to live. During this monitoring period, and to enhance existing networks in which to recruit families for large sibling groups, recruiters have expanded their relationships with faith-based communities around the state and with government entities, such as the Camden City Mayors Council, the Mercer County Council for Young Children and the Cumberland County Council for Young Children.

DCF continues to identify, recruit and license resource family homes with capacity to accommodate large sibling groups, termed “Siblings in Best Settings” or SIBS, which the state defines as homes with the capacity for five or more children or youth. DCF began and ended CY 2015 with a total of 24 SIBS homes: 16 SIBS homes were newly licensed during the calendar year and 16 SIBS homes left the program.²⁰¹

Stability of Placement

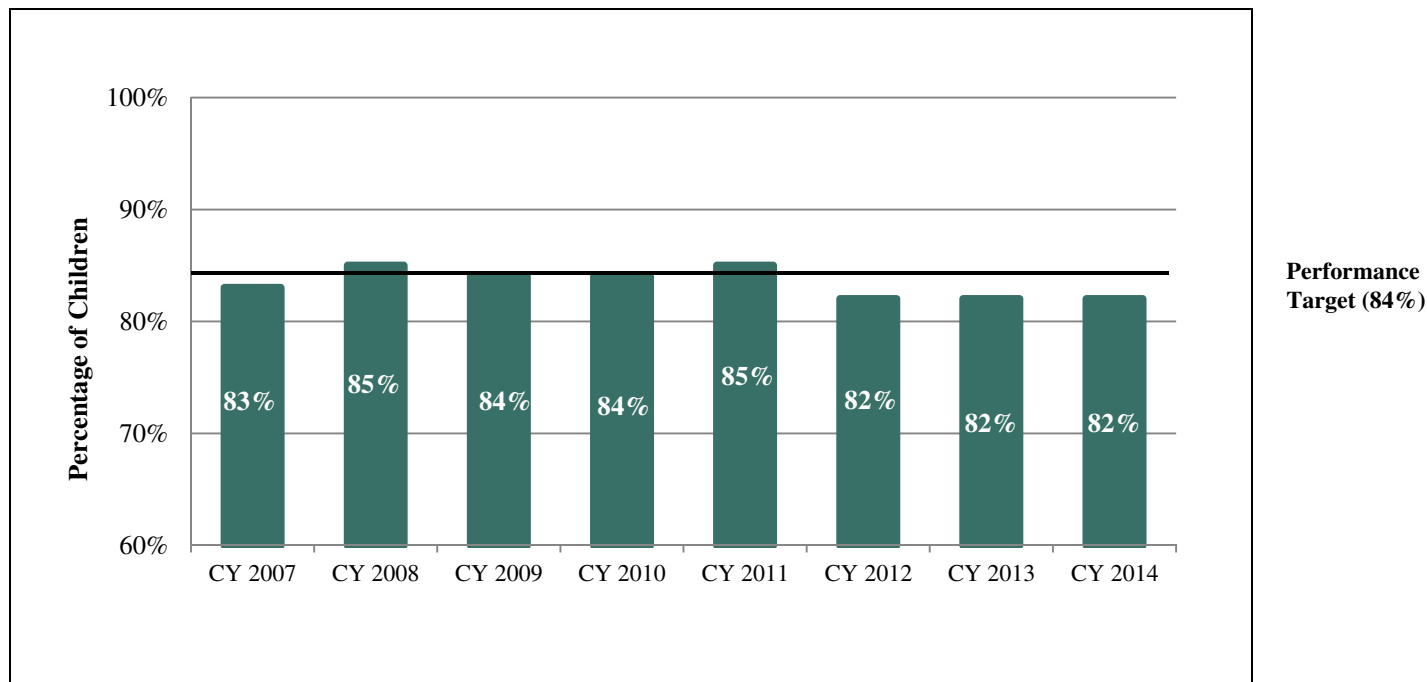
Quantitative or Qualitative Measure	35. <u>Stability of Placement</u> : The percentage of children entering out-of-home placement for the first time in a calendar year who have no more than one placement change during the 12 months following their date of entry.
Performance Target	At least 84% of children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

²⁰¹ Of the 16 homes that left the SIBS program, six homes closed when children were adopted or granted kinship legal guardianship; three homes closed when the children were reunited with their parents; one home closed when children were reunited with grandparents; one home closed as a result of action taken by DCF to close the home when children were left alone in a car; and five homes were downgraded due to children being placed with relatives or other personal reasons.

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

The most recent performance data assesses the 3,933 applicable children who entered care for the first time in CY 2014 and aggregates the number of placements each child experienced within one year of entry. For children entering care in CY 2014, 3,241 (82%) had no more than one placement change during the 12 months from their date of entry. This performance reflects no change from CY 2013 and remains below the SEP performance level.

Figure 16: Percentage of Children Entering Care who have No More Than One Placement Change during the 12 Months Following their Date of Entry (CY 2007 – CY 2014)



Source: DCF NJ SPIRIT data analyzed Hornby Zeller Associates.

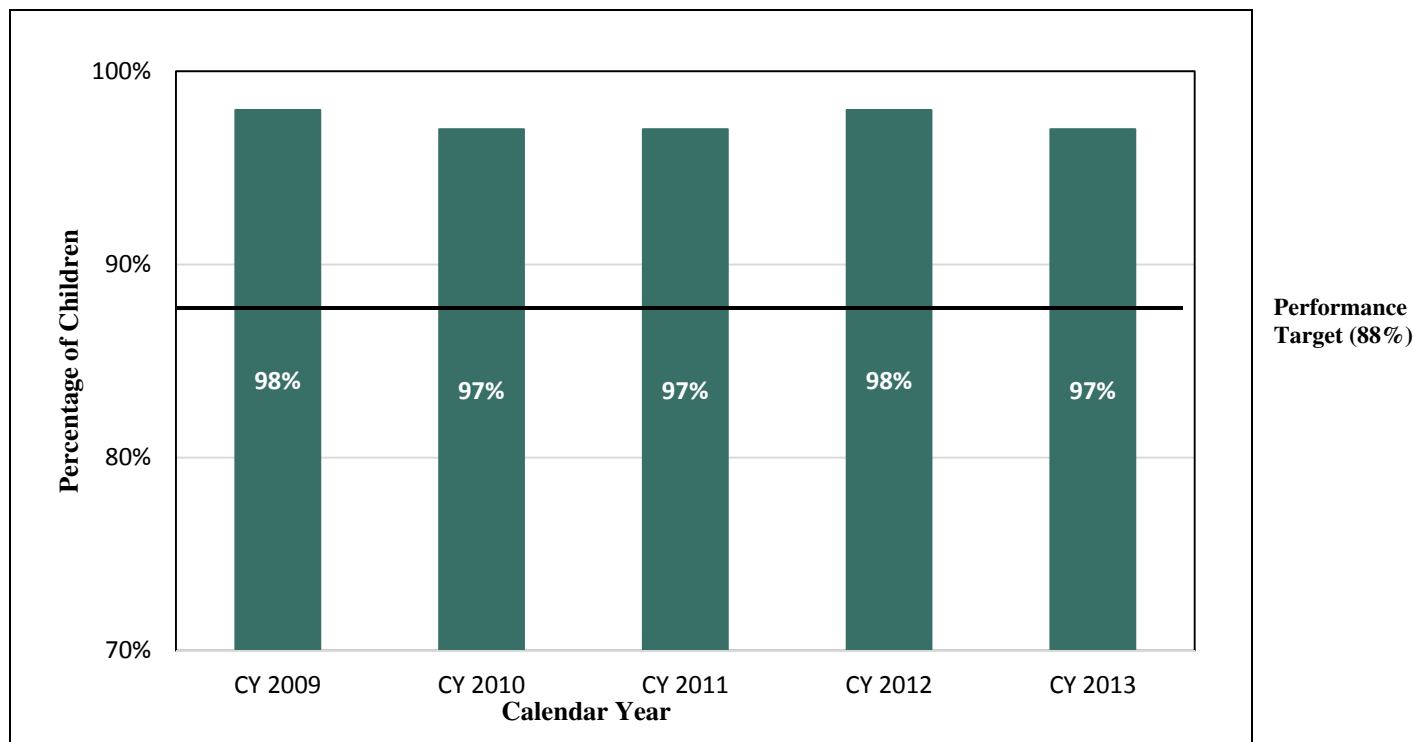
Quantitative or Qualitative Measure	36. <u>Stability of Placement</u> : The percentage of children in out-of-home placement who have no more than one placement change during the 13 to 24 months following their date of entry.
Performance Target	At least 88% of children in out-of-home placement will have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

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

The most recent performance data assesses the 1,913 applicable children who entered care for the first time in CY 2013 and aggregates the number of placements each child experienced in the second year of their removal period. For children entering care in CY 2013, 1,850 (97%) children had no more than one placement change during the 13 to 24 months following their date

of entry. DCF performance met and in fact surpassed the SEP final required target in CY 2013, the most recent data available.

Figure 17: Percentage of Children Entering Care who have No More than One Placement Change during the 13 to 24 Months Following their Date of Entry (CY 2009 – CY 2013)



Source: DCF NJ SPIRIT data analyzed Hornby Zeller Associates.

G. MALTREATMENT

The state is responsible for ensuring the safety of children who are receiving or have received services from CP&P. This responsibility includes ensuring the safety of children who are placed in resource family homes and congregate facilities and preventing future maltreatment. There are four performance measures included in this section.

The prior MSA measure related to abuse and neglect of children in foster care is designated as an Outcome *To Be Maintained* in the SEP. Specifically, SEP III.H.12 requires that no more than 0.49 percent of children will be victims of substantiated abuse or neglect by a resource parent or facility staff member.²⁰² Performance data for this measure for CY 2015 show that of the 11,822 children in care at any point in time during the year, 19 (0.16%) children were victims of substantiated abuse or neglect by a resource parent, relative placement provider or facility staff member. Current performance continues to meet the SEP requirement.

²⁰² This measure is unchanged from the MSA.

Three other SEP measures are designated as Outcomes *To Be Achieved*; they include repeat maltreatment for children who remain home after substantiation, maltreatment post-reunification and re-entry into care.²⁰³

Repeat Maltreatment (In-Home)

Quantitative or Qualitative Measure	37. <u>Repeat Maltreatment (In-Home)</u> : Of all children who remain in home after substantiation of abuse or neglect, the percentage who have another substantiation within the next 12 months.
Performance Target	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. ²⁰⁴

*Performance as of CY 2014 (Most Recent Calendar Year Available).*²⁰⁵

Reviewing this performance measure requires examination of the experiences of an entry cohort²⁰⁶ of children and following their experiences over the next 12 months. In these instances, the data are from a cohort of children with substantiated maltreatment in CY 2014, allowing for a full 12 months from the incident of maltreatment to determine if another substantiation occurs

In CY 2014, there were 7,135 children who were victims of a substantiated allegation of abuse and/or neglect and were not placed in out-of-home care; 492 (6.9%) of these children were the victims of a substantiated allegation of child abuse and/or neglect within 12 months of the initial substantiation. In-home repeat maltreatment rates have declined since CY 2013 and meet the requirement of no more than 7.2 percent of children.

Maltreatment Post-Reunification

Quantitative or Qualitative Measure	38. <u>Maltreatment Post-Reunification</u> : Of all children who are reunified during a period, the percentage who are victims of substantiated abuse or neglect within one year after the date of reunification.
Performance Target	Of all children who enter foster care in a 12-month period for the first time who are discharged within 24 months to reunification or living with relative(s), no more than 6.9% will be the victims of substantiated abuse or neglect within 12 months after reunification. ²⁰⁷

²⁰³ The target and methodology for repeat maltreatment for children who remain in home is unchanged from the MSA. The methodology used to measure performance for maltreatment post-reunification and re-entry into care were changed to provide for use of entry cohort data.

²⁰⁴ The SEP final target for this measure was not changed from the MSA.

²⁰⁵ Data for CY 2015 will not be available until early CY 2017.

²⁰⁶ An entry cohort is defined by the year they enter care (or enter a certain category) and follow all of the members of the cohort forward in time.

²⁰⁷ The MSA final target for this measure was 4.8% and examined of all children who reunified within a given calendar year, the percentage who were victims of substantiated child maltreatment within one year of reunification.

Performance as of CY 2012 (Most Recent Calendar Year Available).²⁰⁸

Similar to above, this measure analyzes the experience of children who enter and leave foster care within a certain year and to determine longitudinal performance on repeat maltreatment within 12 months of being reunified with their families. Since children within the entry cohort can be followed for up to 36 months after entering care, the most recent calendar year data available is from 2012.

In CY 2012, 2,298 children entered care for the first time and discharged to reunification or living with a relative within 24 months; 177 (7.7%) of these children were victims of a substantiated allegation of abuse and/or neglect within 12 months of their return home. Performance exceeds the performance expectation of no more than 6.9 percent and this does not meet the SEP requirement.

Re-entry to Placement

Quantitative or Qualitative Measure	39. <u>Re-entry to Placement</u> : Of all children who leave custody during a period, except those whose reason for discharge is that they ran away from their placement, the percentage that re-enter custody within one year of the date of exit.
Performance Target	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. ²⁰⁹

Performance as of CY 2013 (Most Recent Calendar Year Available).²¹⁰

This measure analyzes the experience of children who enter and leave foster care within a certain year and timeframe to determine longitudinal performance on re-entry. Since children within the cohort can be followed for up to 24 months after entering care, the most recent calendar year data available is from 2013.

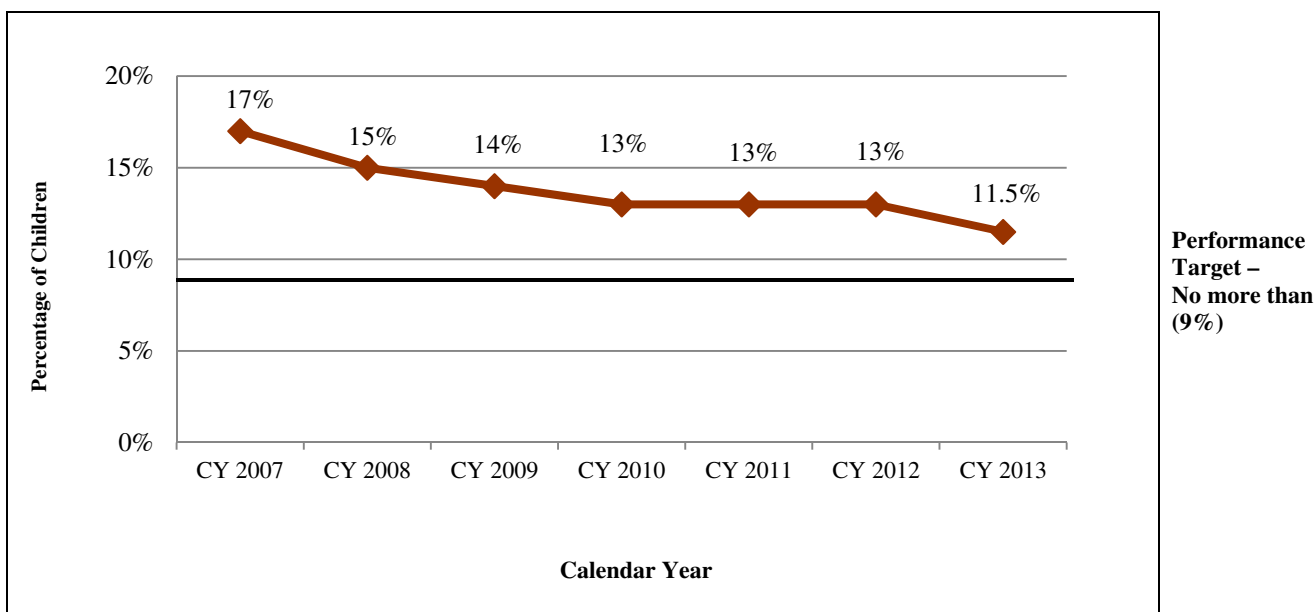
In CY 2013, 1,607 children entered care for the first time and discharged to reunification, living with relative or guardianship within 12 months; 185 (11.5%) children re-entered placement within 12 months of their discharge. As shown in Figure 19 below, DCF performance on this requirement has steadily improved but has not reached the level allowed by the SEP of no more than nine percent of children re-entering custody within 12 months of exit.

²⁰⁸ Data for CY 2013 will not be available until early CY 2017.

²⁰⁹ The SEP final target for this measure was not changed from the MSA.

²¹⁰ Data for CY 2014 will not be available until early CY 2017.

**Figure 18: Percentage of Children who Re-Entered Custody
within One Year of Date of Exit
(CY 2007 – CY 2013)**



Source: DCF NJ SPIRIT data analyzed by Hornby Zeller Associates.

H. TIMELY PERMANENCY

All children—regardless of age, gender, race or ethnicity—need and deserve a safe, nurturing family to protect and guide them. In child welfare work, this is called achieving “permanency” and can occur through a number of different avenues: safe family reunification is the preferred choice, but permanency also includes living with other relatives, kinship/guardianship and adoption.

The MSA included measures related to timely discharge from foster care to permanency as well as a number of specific adoption processes measures. The SEP now includes four permanency measures designated as *To Be Achieved* and all of these measures include a slight change in methodology from the MSA reflective of methodological advances in the field in recent years regarding more accurate methods to assess permanency, primarily through the use of entry cohorts of children. Performance data discussed below are from NJ SPIRIT as analyzed by Hornby Zeller Associates.

All of the measures discussed in this section are longitudinal measures and the most current performance available is discussed below. Additionally the foundational elements of the SEP include permanency and adoption practice which encompass elements of the CPM and requirements regarding freeing children for adoption, securing adoptive placements and developing child specific recruitment plans that were previously discussed in Section IV of this report.²¹¹

²¹¹ See Section IV of this report for discussion of the Foundational Elements.

Timely Permanency through Reunification, Adoption or Guardianship

Quantitative or Qualitative Measure	40. <u>Permanency within 12 months</u> : Of all children who entered foster care in a 12 month period, what percentage were discharged from foster care to permanency (reunification, living with relatives, guardianship or adoption) within 12 months of entering foster care.
Performance Target	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. ²¹²

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

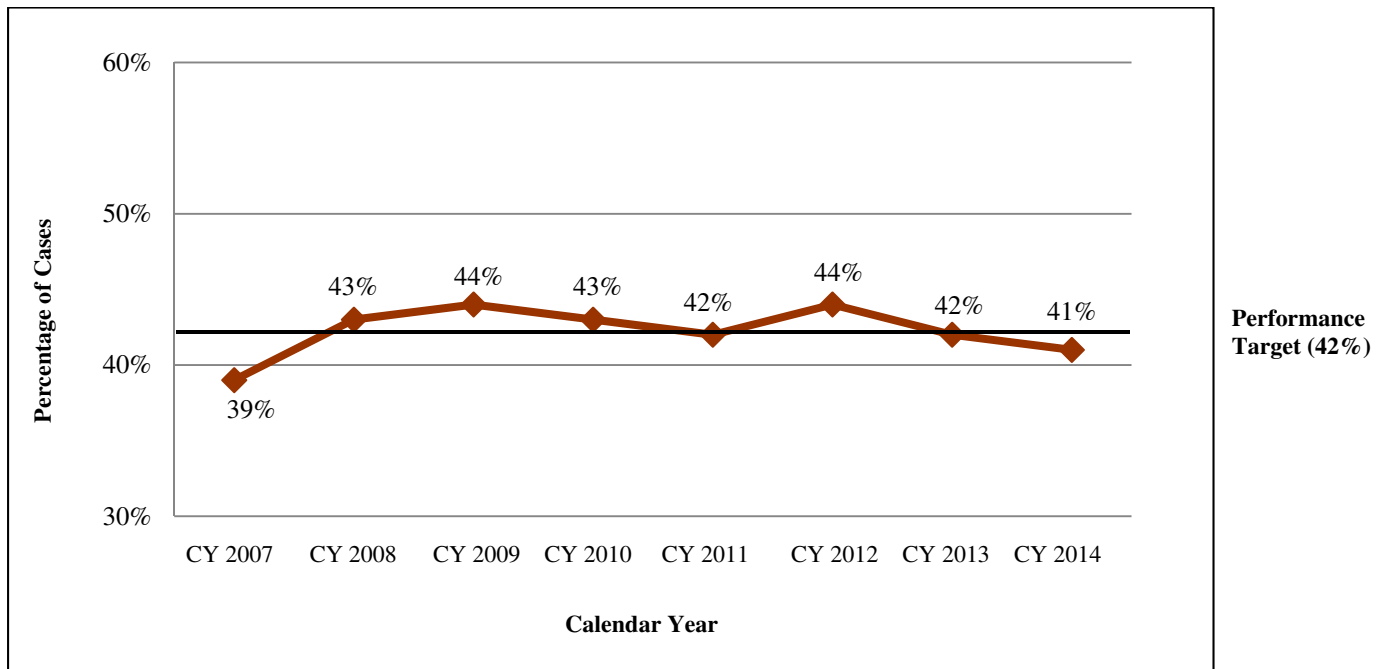
The most recent data available are for children who entered foster care in CY 2014.²¹³ Of the 4,378 children who entered foster care in CY 2014, 1,794 (41%) discharged to permanency within 12 months from their removal from their home. The current SEP performance measure was met in CY 2013.²¹⁴ Since current performance is within one percentage point, this measure, in the Monitor's discretion, has been met.

²¹² The MSA final target for this measure was 50% and the methodology only included initial entries into care. The SEP includes initial entries and re-entries.

²¹³ Data for CY 2015 will not be available until early CY 2017.

²¹⁴ The SEP designates this measure as *To Be Achieved*. However, it was actually met in CY 2013 prior to the finalization of the SEP. Since current performance is within one percentage point of the standard, this measure, in the Monitor's discretion, has been met.

Figure 19: Percentage of Children Who Entered Foster Care in a 12 Month Period Who Discharged to Permanency within 12 months of Entering Foster Care (CY 2007 – CY 2014)²¹⁵



Source: DCF NJ SPIRIT data analyzed by Hornby Zeller Associates.

Quantitative or Qualitative Measure	41. <u>Permanency within 24 months</u> : Of all children who enter foster care in a 12 month period, what percentage were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 24 months of entering care.
Performance Target	Of all children who enter foster care in a 12 month period, at least 66% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 24 months of entering care. ²¹⁶

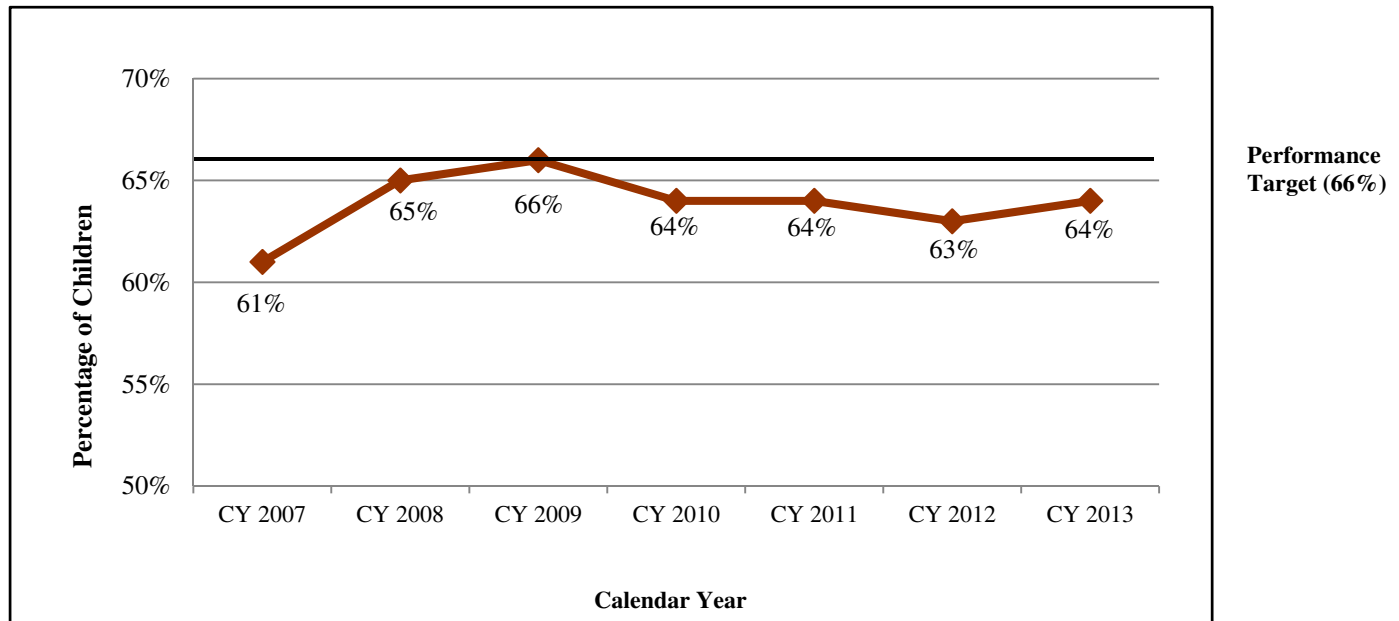
²¹⁵ All performance data included in this Figure were calculated using the SEP methodology and are therefore different than previously reported data using the MSA methodology.

²¹⁶ The MSA methodology for a similar measure did not use entry cohorts, which is now reflected in the SEP methodology.

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

The most recent data available for this measure are for children who entered foster care in CY 2013.²¹⁷ Of the 4,617 children who entered foster care in CY 2013, 2,968 (64%) discharged to permanency within 24 months from their removal from their home. Current performance is close but does not yet meet the SEP required target.

Figure 20: Percentage of Children Who Enter Foster Care in a 12 Month Period Who Discharged to Permanency within 24 months of Entering Foster Care (CY 2007 – CY 2013)²¹⁸



Source: DCF data analyzed by Hornby Zeller Associates.

Quantitative or Qualitative Measure	42. <u>Permanency within 36 months</u> : Of all children who enter foster care in a 12 month period, what percentage were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 36 months of entering care.
Performance Target	Of all children who enter foster care in a 12 month period, at least 80% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 36 months of entering care. ²¹⁹

²¹⁷ Data for CY 2014 will not be available until early CY 2017.

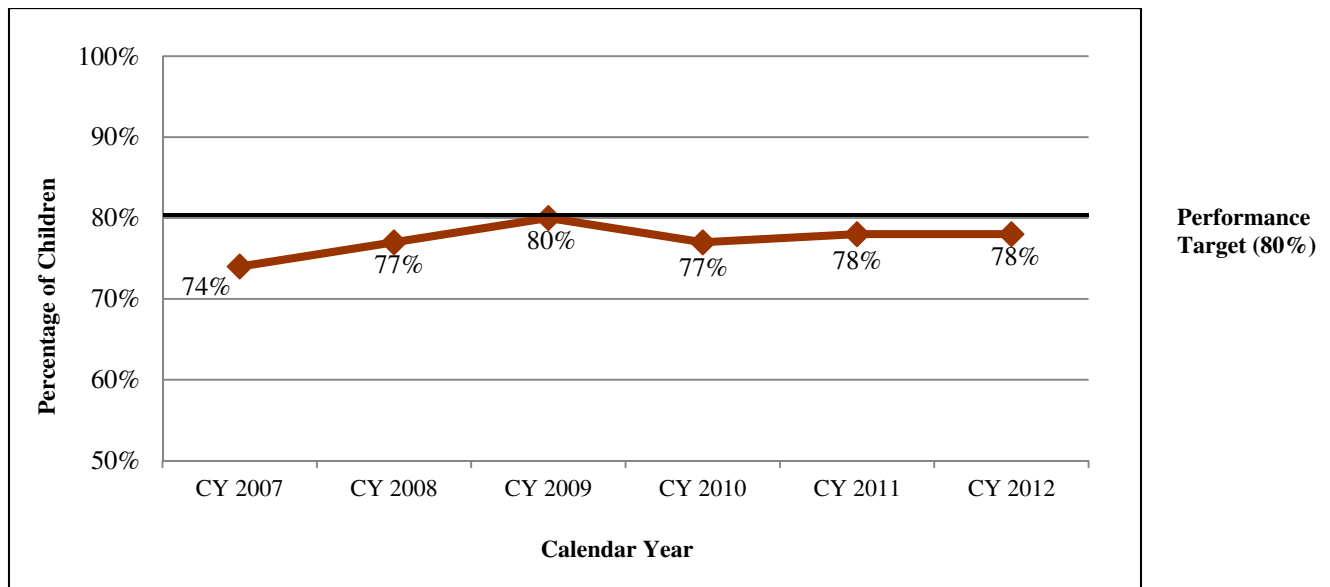
²¹⁸ All performance data included in this Figure were calculated using the SEP methodology and are therefore different than previously reported data using the MSA methodology.

²¹⁹ The MSA methodology for a similar measure did not use entry cohorts, which is now reflected in the SEP methodology.

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

The most recent data available for this measure are for children who entered foster care in CY 2012.²²⁰ Of the 4,704 children who entered foster care in CY 2012, 3,664 (78%) discharged to permanency within 36 months of the removal from their home. Current performance is close to but does not yet met the SEP required target.

Figure 21: Percentage of Children Who Enter Foster Care in a 12 Month Period Who Discharged to Permanency within 36 months of Entering Foster Care (CY 2007 – CY 2012)²²¹



Source: DCF data analyzed by Hornby Zeller Associates.

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

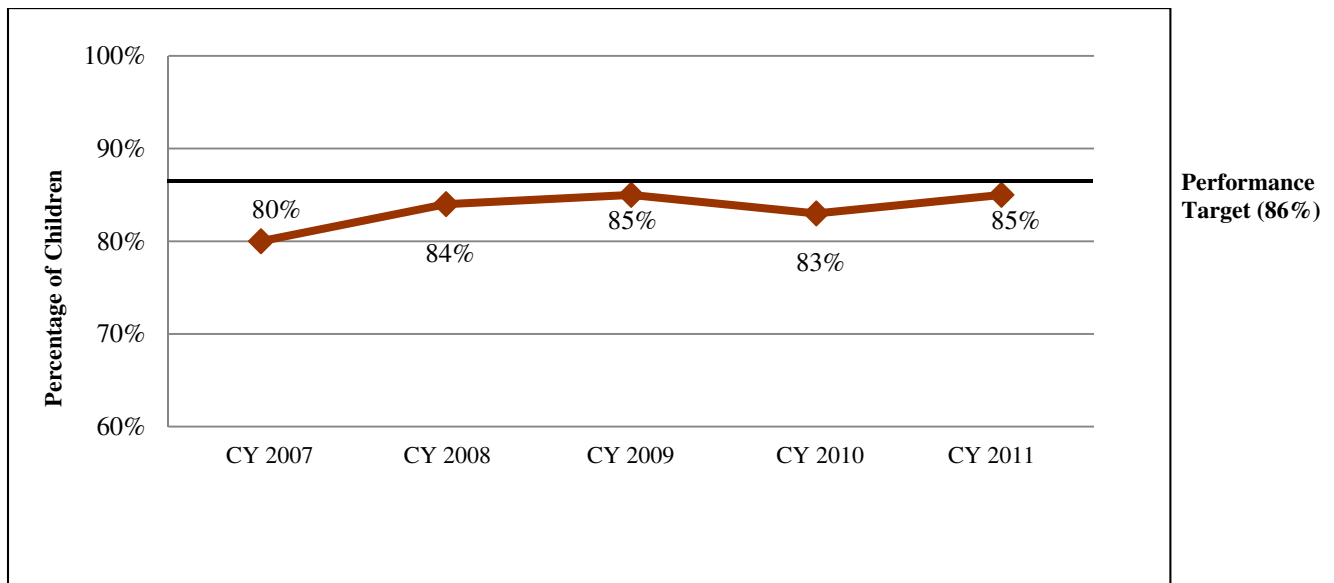
²²⁰ Data for CY 2013 will not be available until early CY 2017.

²²¹ All performance data included in this Figure were calculated using the SEP methodology and are therefore different than previously reported data using the MSA methodology.

Performance as of CY 2011 (Most Recent Calendar Year Available):

The most recent data available for this measure are for children who entered foster care in CY 2011.²²² Of the 4,245 children who entered foster care in CY 2011, 3,585 (85%) discharged to permanency within 48 months from their removal from their home. DCF has partially met the SEP required standard.

Figure 22: Percentage of Children Who Entered Foster Care in a 12 Month Period Who Discharged to Permanency within 48 months of Entering Foster Care (CY 2007– CY 2011)



Source: DCF data analyzed by Hornby Zeller Associates.

I. CHILD HEALTH UNITS

As part of the MSA Phase I requirement, DCF built Child Health Units to facilitate and ensure the timely provision of health care to children in CP&P custody. These units are operational in each CP&P Local Office and are staffed with a managing Clinical Nurse Coordinator, Nurse Health Care Case Manager (HCCM) 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.” Each child in a resource home continues to have a nurse assigned for health care case management. Since the developed of the Child Health Units, the Monitor has requested and received data to assess the staffing adequacy and has found the Child Health Units to generally be fully staffed.

²²² Data for CY 2012 will not be available until early CY 2017.

Quantitative or Qualitative Measure	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.
Performance Target	DCF will maintain adequate staffing levels in Local Offices.

Performance as of December 31, 2015:

As of June 30, 2015, DCF had 162 health care case managers (HCCM) and 84 staff assistants. As of December 31, 2015, DCF had 168 HCCM and 84 staff assistants. Of the 168 HCCM, 162 were available for coverage for a ratio of one HCCM to every 43 children in out-of-home care. A ratio of one HCCM to 50 children in out-of-home care or less is considered adequately staffed. This is a new SEP requirement that is being met.

J. OLDER YOUTH

The MSA included several measures related to older youth, including creating policies and providing continued support and services to youth aged 18 to 21, completing independent living assessments for youth aged 14 to 18 and ensuring youth who exit care without achieving permanency have housing and are employed or enrolled in an educational/vocational program. The SEP includes four measures designated as *To Be Achieved* related to older youth which are adapted from the MSA and discussed in further detail below.

Independent Living Assessments

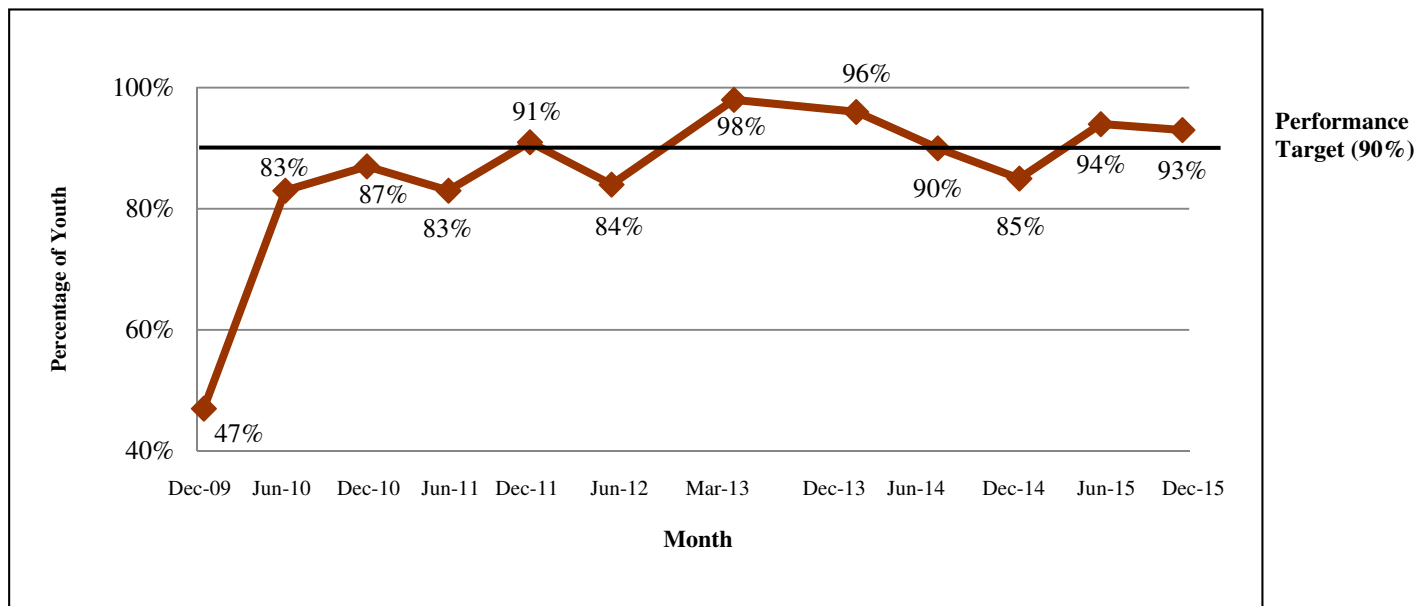
Quantitative or Qualitative Measure	45. <u>Independent Living Assessments</u> : Percentage of youth aged 14 and 18 with a completed Independent Living Assessment.
Performance Target	90% of youth ages 14 to 18 will have an Independent Living Assessment. ²²³

Performance as of December 31, 2015:

In the second quarter of 2015, there were 915 youth aged 14 to 18 in out-of-home placement for at least six months; 860 (94%) had an Independent Living Assessment (ILA) completed. In the fourth quarter of 2015, of the 870 youth ages 14 to 18 in out-of-home placement for at least six months, 808 (93%) had an ILA completed. DCF's performance has improved since the previous monitoring period and meets the SEP target (see Figure 23).

²²³ The MSA final target for this measure was 95%.

**Figure 23: Percentage of Youth Aged 14 – 18 with Independent Living Assessment
(December 2009 – December 2015)**



Source: DCF data

Quality of Case Planning and Services for Older Youth

Quantitative or Qualitative Measure	46. <u>Quality of Case Planning and Services</u> : DCF shall provide case management and services to youth between the ages 18 and 21 who have not achieved legal permanency.
Performance Target	75% of youth aged 18 to 21 who have not achieved legal permanency shall receive acceptable quality case management and service planning. ²²⁴

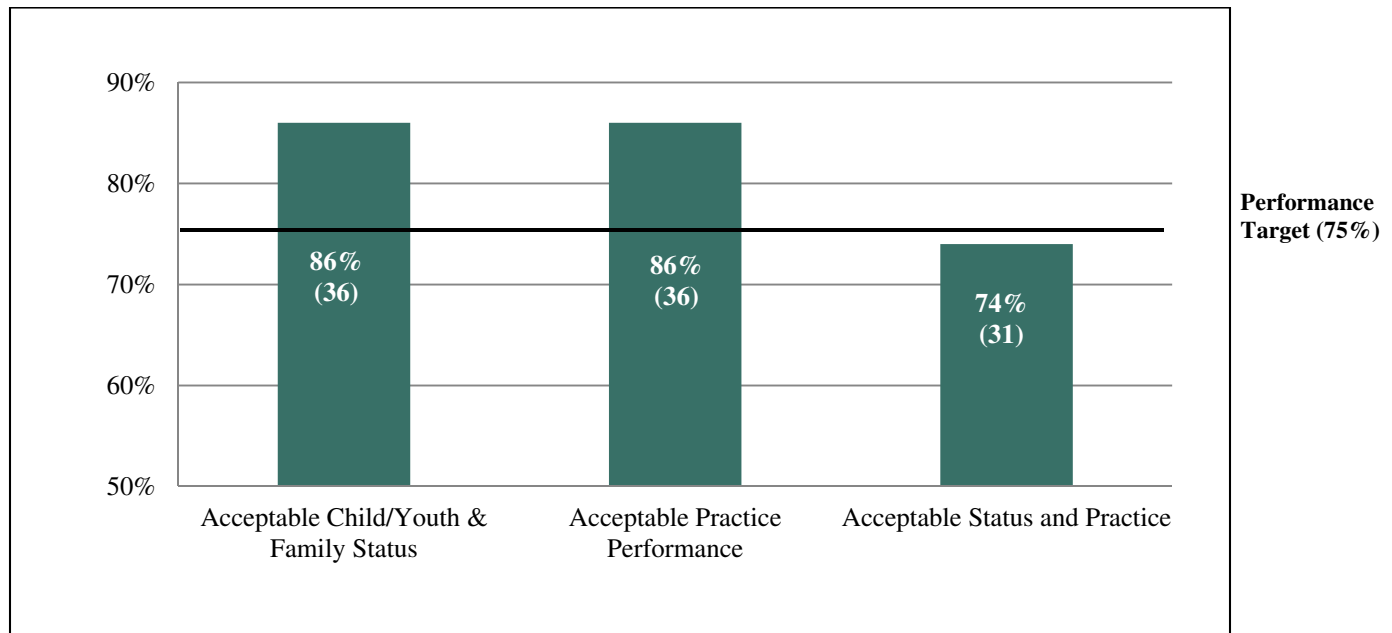
Performance as of December 31, 2015:

Performance data for this measure were collected through QRs conducted from January to December 2015 of 42 cases of youth ages 18 to 21. In rating these cases, reviewers use both the standard QR protocol and a list of additional considerations relevant to this population, such as DCF's efforts to plan and support youth who identify as LGBTQ, are victims of domestic violence, are expectant or parenting and/or are developmentally disabled.

Of the 42 cases reviewed, 31 (74%) cases were rated acceptable overall for *both* the Child (Youth)/Family Status and Practice Performance indicators. Looking at each area separately, 36 (86%) cases rated acceptable overall for Child (Youth)/Family Status and 36 (86%) cases rated acceptable for Practice Performance. Based on the small number of applicable cases, in the Monitor's discretion, DCF met the SEP final standard.

²²⁴ The MSA final target for this measure was 90%.

**Figure 24: Qualitative Review (QR) Cases Rated Acceptable for Services to Older Youth
(January – December 2015)
(n=42)**



Source: DCF data

Housing

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

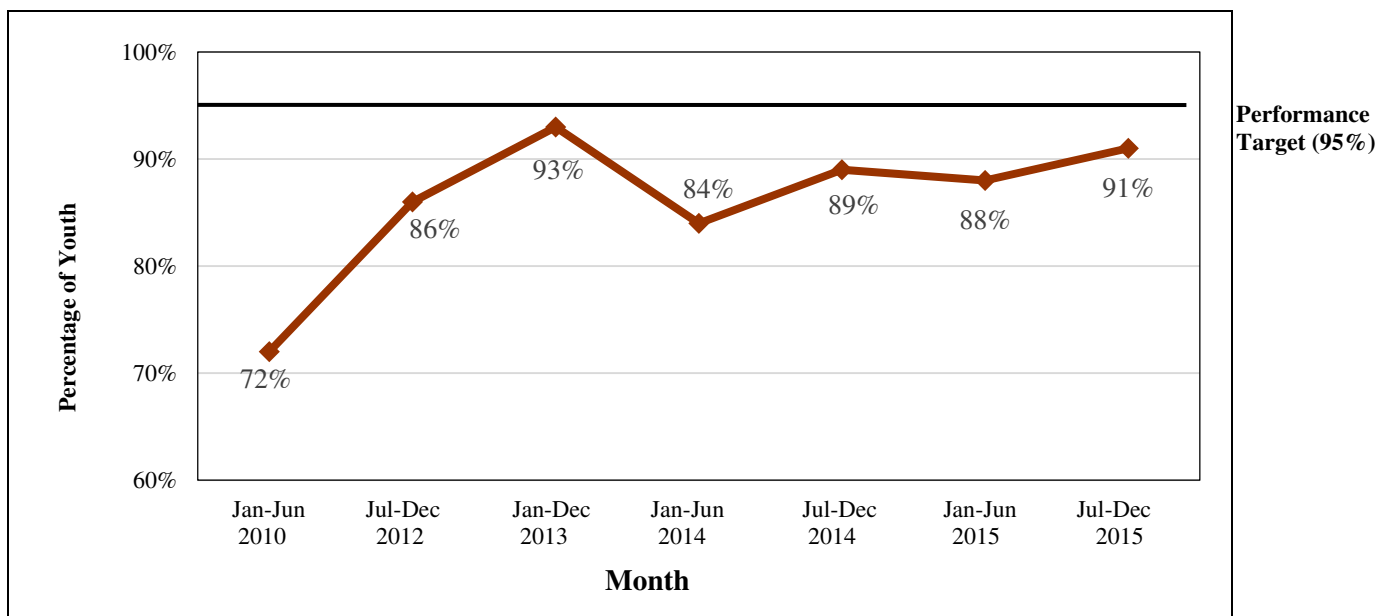
Performance as of December 31, 2015:

The Monitor and DCF conducted a case record review of the 81 youth who exited care without achieving permanency between January and June 2015; 77 youth were applicable²²⁵ to this measure and 68 (88%) youth had documentation of a housing plan upon exiting CP&P care. Another case record review was conducted of the 72 youth who exited care without achieving permanency between July and December 2015; 70 youth were applicable²²⁶ to this measure and 64 (91%) youth had documentation of a housing plan upon exiting care. DCF's performance showed improvement during the year and is near reaching the level required by the SEP.

²²⁵ Four youth were not applicable either because the youth declined to provide this information or, despite efforts by CP&P, the youth was unable to be located to confirm housing plan.

²²⁶ Two youth were not applicable either because the youth declined to provide this information or, despite efforts by CP&P, the youth was unable to be located to confirm housing plan.

**Figure 25: Youth Exiting Care with Housing
(January 2010 – December 2015)**



Source: Data from DCF and CSSP Case Record Reviews

Employment/Education

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

Performance as of December 31, 2015:

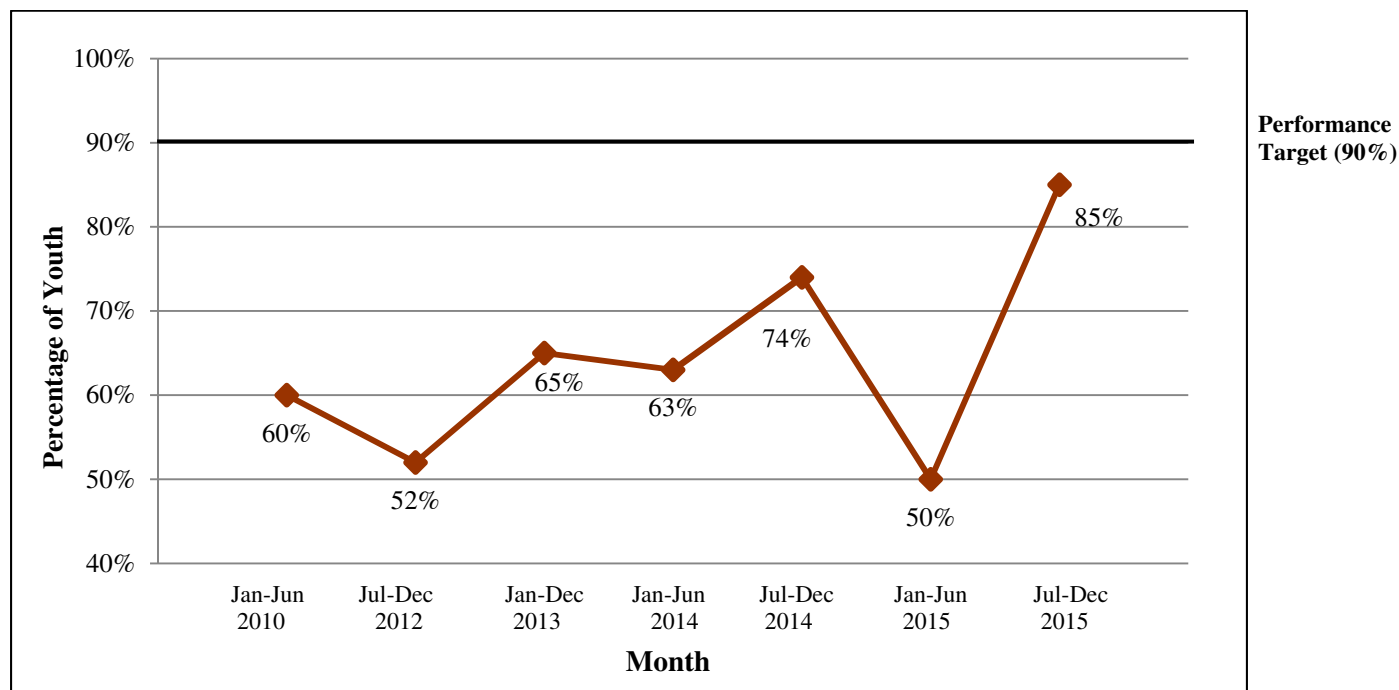
The Monitor and DCF conducted a case record review of the 81 youth who exited care without achieving permanency between January and June 2015; 72 youth were applicable²²⁷ to this measure and 36 (50%) youth were either employed or enrolled in education or vocational training programs. Another case record review was conducted of the 72 youth who exited care without achieving permanency between July and December 2015; 59 youth were applicable²²⁸ to

²²⁷ Nine youth were not applicable for one or more of the following reasons: youth was incarcerated, youth was missing, youth declined or not interested in employment or educational/vocational program, youth in the process of enrolling or youth had mental impairment which prevented employment or educational/vocational program.

²²⁸ Thirteen youth were not applicable for one or more of the following reasons: youth was incarcerated, youth was missing, youth declined or not interested in employment or educational/vocational program, youth had recently completed school or youth was in the process of enrolling.

this measure and 50 (85%) youth were either employed or enrolled in education or vocational training program. Performance has improved over the previous period but does not yet meet the SEP required level of performance.

Figure 26: Youth Exiting Care Who are Employed or Enrolled in Educational or Vocational Training Program (January 2010 – December 2015)



Source: Data from DCF and CSSP Case Record Reviews

K. SERVICES TO SUPPORT TRANSITION

Services to Support Transition

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

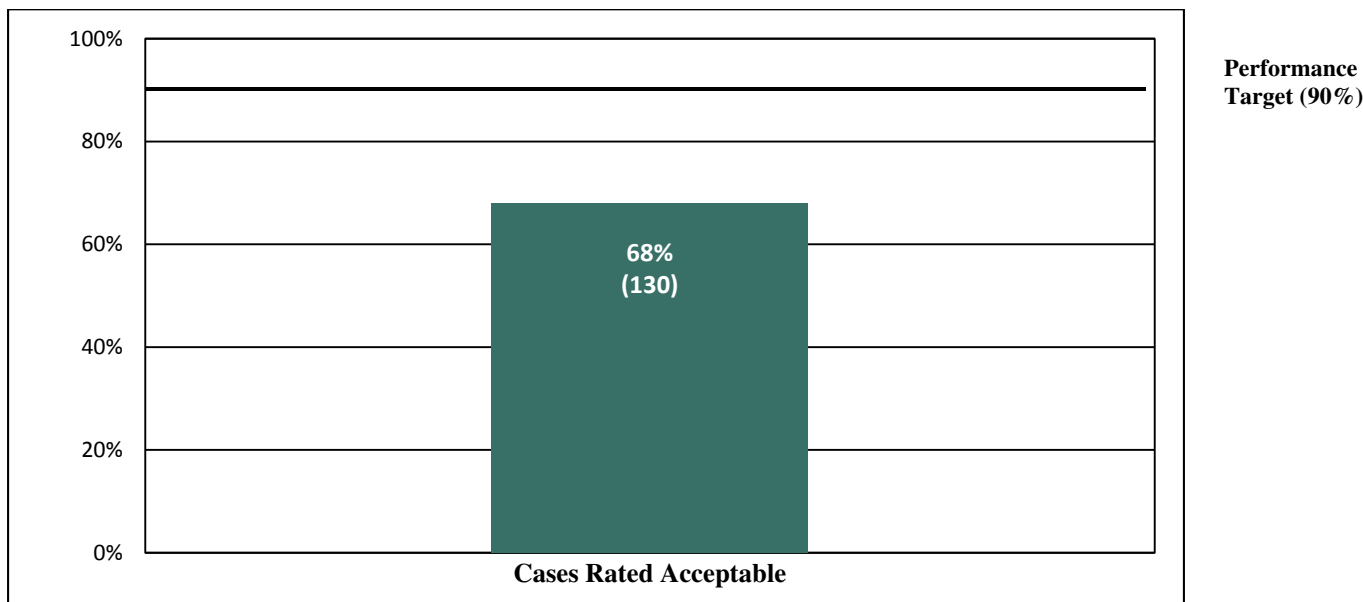
Performance as of December 31, 2015:

While involved with DCF, families and children may face several transitions, including changes in family relationships, living arrangements, service providers, or schools. Some transitions are more critical than others but all require recognition and often planning in order to be smooth and successful. DCF uses the QR process to measure case practice that supports families to make successful transitions. The SEP requires that 80 percent of cases be rated acceptable for

supporting transitions as measured by the QR (SEP Section IV.J. 44). Results from 191 cases reviewed from January to December 2015 indicate that 68 percent (130 of 191) of cases were rated acceptable for supporting transitions.

DCF has not met the required SEP performance target.

**Figure 27: Qualitative Review (QR) Cases Rated Acceptable for Services to Support Transitions
(January to December 2015)**



Source: DCF data

L. CASELOADS

Caseload compliance is measured by individual caseworker caseloads in each of the functional areas (Intake, Permanency, Adoption and IAIU) as well as office standards for CP&P Local Offices. Table 7 summarizes the caseload standards for individual workers.

The SEP includes eight measures related to caseloads and reflects changes to either the final target and/or methodology from similar measures in the MSA. Section III.B of the SEP includes four measures designated as *Outcomes To Be Maintained*: 1) Permanency office caseloads 2) Permanency individual worker caseloads, 3) IAIU investigators individual caseloads and 4) supervisory/worker ratio. The remaining four measures are designated as *Outcomes To Be Achieved*: 1) Intake office caseloads, 2) Intake individual worker caseloads, 3) Adoption office caseloads and 4) Adoption individual worker caseloads are within Section IV.E of the SEP.

Table 7: CP&P Individual Caseload Standards

Caseworker Function	Responsibility	Individual Caseload Standard (MSA Sections II.E and III.B.1)
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 12 open cases at any one time and no more than eight new referrals assigned in a month. No Intake worker with 12 or more open cases can be given more than two secondary assignments ²²⁹ per month.
Institutional Abuse Investigations Unit (IAIU)	Respond to allegations of child abuse and neglect in settings including correctional facilities, detention facilities, treatment facilities, schools (public or private), residential schools, shelters, hospitals, camps or child care centers that are required to be licensed, resource family homes and registered family day care homes.	IAIU staff workers are to have no more than 12 open cases at any one time and no more than eight new referrals 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 15 families and 10 children in out-of-home care at any one time.
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 15 children at any one time.

Source: DCF

Verifying Worker Caseloads

DCF caseload data are collected and analyzed through NJ SPIRIT. As in previous monitoring periods, the Monitor verifies caseload data supplied by DCF by conducting telephone interviews with randomly selected workers across the state. Telephone interviews were conducted for two six month periods in CY 2015. For each of the six month periods, 170 workers were randomly selected from a list of all active workers in June and December 2015, for a total of 340 workers in CY 2015. All 46 CP&P Local Offices were represented in the sample. The interviews were conducted during the months of July and August 2015 and January and February 2016. All 340 workers were called and information was collected from 257 workers (78% of the eligible sample).²³⁰

During the interviews, the Monitor asked each caseworker whether their caseloads met caseload standards during the applicable six month period; responses were compared to the caseload information from NJ SPIRIT on identified workers for the same period. Workers were also asked

²²⁹ 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.

²³⁰ Five workers were on extended leave during the period of the calls and were removed from the sample. Two additional workers refused to participate and two caseworkers newly assigned to the position for less than half of the monitoring period were also removed from the sample. The Monitor made at least three attempts to contact all other caseworkers.

to report their specific caseload size for the last month in the six month period and their reports were compared with NJ SPIRIT data. The caseload verification involves looking at workers in all areas in which previously the MSA and currently the SEP had set caseload standards: Intake, Permanency and Adoption. 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. Among the 257 workers who participated in the caseload verification interviews, 147 were Intake workers.

In CY 2015 and during the caseload verification process, the Monitor received reports from Intake workers in a small number of local offices citing concerns with the way in which high-intake caseload volumes are managed in their offices and irregularities with caseload assignment and data. The Monitor shared these concerns with DCF leaders. The Monitor's review did not identify how extensive these issues were but is assured that actions that may have been taken by a small number of staff are in no way sanctioned by DCF leadership. To the contrary, DCF leadership responded immediately and appropriately once the concerns were identified by outlining and implementing meaningful corrective action steps. Nevertheless, the Monitor has determined that 2015 intake caseload data cannot be validated by the Monitor and a report on intake-caseload data should wait until the next report, covering the first six months of CY 2016. DCF leaders have agreed with this decision.

DCF leaders have already initiated a robust internal process to assess the caseload data issues, including a comprehensive action plan focused on clarification of misconceptions with managers, supervisors and staff at all levels related to caseload standards; development of an internal caseload verification process to identify and address case assignment and data irregularities on an ongoing basis; and the creation of a safe space where workers can confidentially report caseload concerns about case assignment and data entries in NJ SPIRIT. Over the past year, DCF has also assigned additional FTE positions to the intake function. In the Monitor's view, DCF's response to these raised concerns appropriately targets early identification, remediation, and ongoing monitoring, and it demonstrates DCF's actions as a self-correcting organization.

It is important to emphasize that at the writing of this report, the Monitor's concerns are limited to Intake caseload data and do not extend to other categories of DCF data as included in the Monitoring Report, including the caseload data for permanency and adoptions workers. The Monitor will be working closely with DCF leadership as it implements corrective actions and will conduct an additional intake-caseload verification in the summer of 2016 with the expectation that any case assignment and data irregularities will have been resolved, and that verified intake caseload data can be included in the next monitoring report.

Intake

Quantitative or Qualitative Measure	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.
Performance Target	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.

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

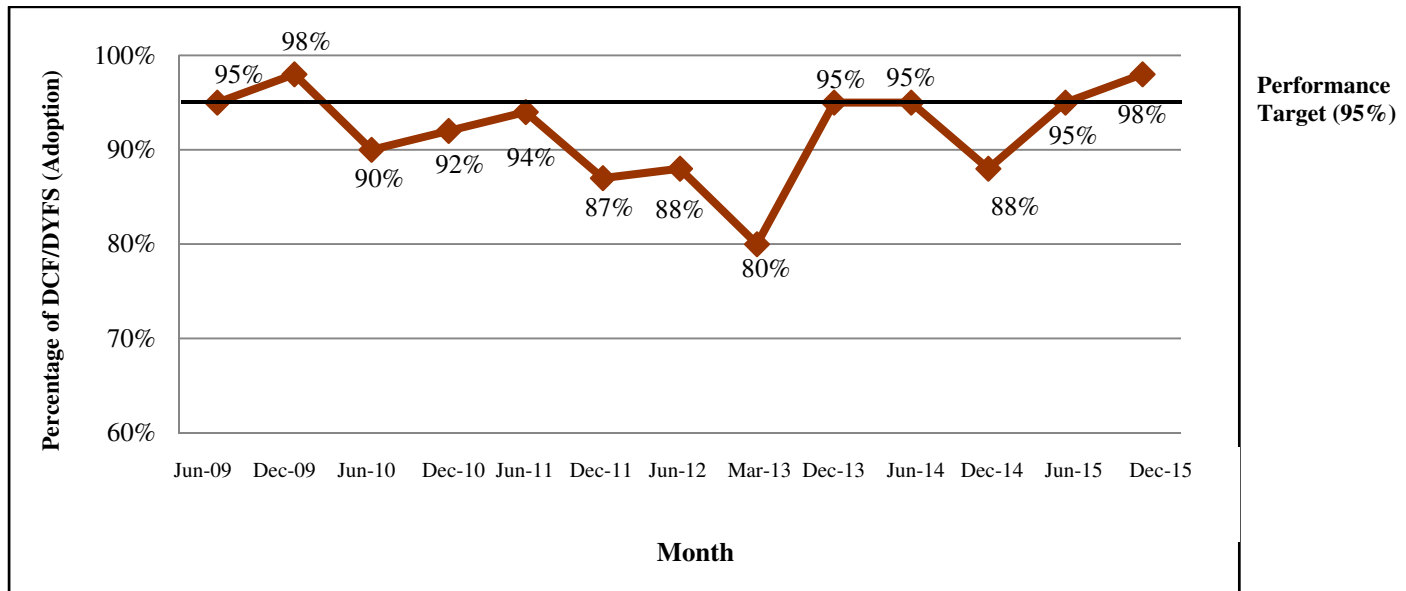
Performance of December 31, 2016:

Unable to determine; intake caseload data not verified.

Adoption

Quantitative or Qualitative Measure	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.
Performance Target	95% of Local Offices will have an average caseload of no more than 15 children per Adoption worker.

**Figure 28: Percentage of CP&P Local Offices Meeting Average Caseload Standards for Adoption Workers
(June 2009 – December 2015)**



Source: DCF data

Performance as of December, 31 2015:

Figure 28 summarizes performance on meeting average Local Office Adoption caseload standards. DCF has met this standard for the period of January through June 2015 and exceeded it for the period of July through December 2015.

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

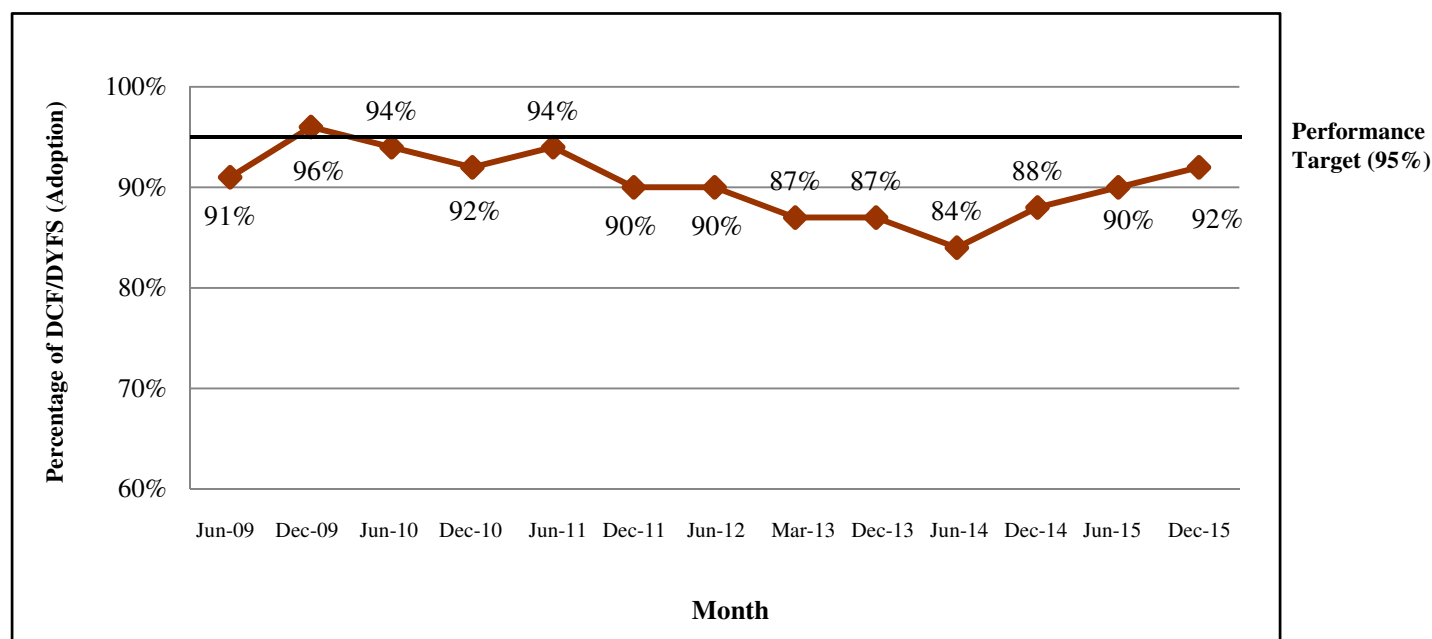
Performance as of December, 31 2015:

The state reported an average of 225 active Adoption workers between July and December 2015. Of the active Adoption workers, an average of 207 (92%) workers had caseloads that met the requirement during the monitoring period. Specifically in December 2015, individual worker caseload compliance for Adoption workers was at 94 percent. For the 13 Adoption workers who did not meet caseload requirements in December 2015, the highest caseload was 27 children. The individual worker caseload standard for Adoption workers of no more than 15 children was not met for the period of January through June 2015 nor was it met for the period of July through December 2015.

Data by Local Office indicate that during December 2015, performance ranged between 71 and 100 percent among offices and 33 of 43 (77%) Local Offices met the standard for this measure (see Appendix C-1).

Among the 257 workers who participated in the phone interviews conducted by the Monitor for caseload verification, 33 were Adoption workers. Four (12%) of the 33 workers interviewed reported going over caseload standards at least once between in CY 2015.

Figure 29: Average Percentage of Adoption Workers with Individual Caseloads at or Below the Applicable Individual Caseload Standards (June 2009 – December 2015)*



Source: DCF data

*The performance percentage shown on the last month of each monitoring period (June and December) is the average of the prior six month's performance in meeting individual caseload standards during that six month monitoring period. The performance percentage shown for March and December 2013 is the average of the prior nine month's performance in meeting individual caseload standards during that time.

Permanency

Quantitative or Qualitative Measure	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.
Performance Target	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.

Quantitative or Qualitative Measure	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.
Performance Target	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 December, 31 2015:

Performance July through December 2015 shows that 100 percent of Local Offices and 100 percent of individual workers met the permanency caseload standard. CP&P has met the standard for Permanency office and individual caseload standards for the period of January through June 2015 and July through December 2015.

Among the 257 workers who participated in phone interviews conducted by the Monitor for caseload verification, 60 were Permanency workers. One (2%) of the 60 Permanency workers interviewed reported exceeding the caseload standard of no more than 15 families and no more than 10 children in out-of-home placement in CY 2015.

Under the MSA, the Monitor reviewed these data semi-annually. The parties have agreed that in the future, these data will be updated and reported to the public monthly in DCF's Commissioner's Report currently available on the DCF website.

Institutional Abuse Investigation Unit (IAIU)

Quantitative or Qualitative Measure	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.
Performance Target	95% of individual IAIU workers shall have a caseload (a) no more than 12 open cases, and (b) no more than eight new case assignments per month.

Performance as of December, 31 2015:

DCF data shows 98 percent on individual workers met the IAIU caseload standard for the period of January through June 2015 and 100 percent of workers met the standard for the period of July through December 2015. Performance for this standard was met for the period of January through June 2015 and July through December 2015.

Under the MSA the Monitor reviewed these data semi-annually. The parties have agreed that in the future, these data will be reported monthly in DCF's Commissioner's Report currently available on the DCF website.

Supervisory Ratio

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

Performance as of December, 31 2015:

Supervision holds a critical role in child welfare; therefore, the SEP includes a standard for supervisory ratios that 95 percent of all offices should have sufficient supervisory staff to maintain a ratio of five workers to one supervisor (Section III.B). Performance between July and December 2015, shows that 97 percent of CP&P Local Offices had sufficient supervisors to have ratios of five workers to one supervisor. DCF has met this standard for the periods of January through June 2015 and July through December 2015.

The Monitor verified the state's reported information about supervisor/worker ratios by asking all 257 workers who participated in the phone interviews about the size of their units for the month of June 2015 and December 2015; 252 (98%) workers reported being in units of five or fewer workers with a supervisor.

Under the MSA the Monitor reviewed these data semi-annually. The parties have agreed that in the future, these data will be reported monthly to the public in DCF's Commissioner's Report currently available on the DCF website.

M. DAsG STAFFING

Section III.D of the SEP requires the state to continue to maintain adequate Deputy Attorney General (DAsG) staffing.

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

Performance as of December 31, 2015:

As of December 31, 2015, all 132 (100%) DAsG staff positions assigned to work with DCF were filled. Of those, seven DAsG are on full time leave. Thus, there are a total of 125 (95%) available DAsG. DCF reports that in addition to these positions, 3.9 DAsG outside of the DCF Practice Group have dedicated their time to DCF matters.

DCF continues to meet this measure.

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

QUALITATIVE REVIEW

New Jersey's Qualitative Review (QR) is an assessment of the status of children, the status of practice and the functioning of systems in each of the counties. The protocol and process used for the QR are aligned with DCF's CPM. Select QR results related to both Child (Youth)/Family Status and Practice Performance are also used to report on several SEP requirements included in this report. Between January and December 2015, DCF's Office of Performance Management and Accountability (OPMA) consulted with other states, national experts, the Monitor and outside community-based providers to update key portions of New Jersey's QR process and protocol. An important goal of this work was to create a more user friendly protocol with language that is consistent with DCF's other practice improvement efforts with the workforce. This reinforces the state's efforts to embed the CPM into everyday practice.

In order to conduct the reviews, the child's legal guardian is asked to give informed consent for participation in the QR. Trained review teams of two persons including DCF staff, community stakeholders and staff from the Monitor's office review CP&P case records and interview as many people as possible who are involved with the child and family. The team uses a standardized protocol to report findings. The results from reviews provide critical qualitative data on child and family status and system performance.

Since 2010, DCF has reviewed the cases of 12 children over a one week period in 16 of the 21 counties across the state annually. Immediately following the review in each county, areas of accomplishment and challenges for the system are identified and discussed to inform continued case practice improvement. Beginning in January 2016, DCF moved to conducting the QR in each county every other year. QRs will now be conducted in 10 or 11 counties each year. Using a sampling strategy based on the number of children served in each Local Office, 10 to 30 cases will be reviewed in each county. The sampling plan was also adjusted so that the demographic characteristics of case reviewed will overall better match the demographics of children and families served by DCF. The purpose behind staggering the reviews is to allow counties to develop and implement performance improvement plans between reviews. Supervisors and additional providers will be recruited to serve as reviewers. Findings from the QR will be incorporated into existing training and supervisory tools.

Between January and December 2015, DCF reviewed 191 cases from 16 counties.²³¹ Table 8 provides the gender and age of the 191 children. Fifty-three of the children were living with a parent at the time of the review and 138 of the children lived with a relative or non-relative resource parent.

²³¹ Qualitative Reviews were conducted in Somerset, Cumberland, Sussex, Hudson, Mercer, Union, Monmouth, Morris, Cape May, Bergen, Atlantic, Middlesex, Warren, Gloucester, Essex and Camden counties.

**Table 8: Qualitative Review Gender and Age Demographics
(January – December 2015)**

Gender	#	%
Male	99	52%
Female	92	48%
Total	191	100%
Age	#	%
4 years or less	71	37%
5-9 years	40	21%
10-13 years	29	15%
14 -17 years	21	11%
18-21 years	30	16%
Total	191	100%

Source: DCF data

Table 9 provides the racial and ethnic demographics of the 191 children whose cases was reviewed.

**Table 9: Qualitative Review Racial and Ethnic Demographics²³²
(January – December 2015)
(N=191)**

Race	#	%
White/Caucasian	115	45%
African American	89	35%
Hispanic	45	18%
Native Hawaiian	1	>0.01%
American Indian	0	0%
Asian	1	>0.01%
Unable to Determine/Unknown	4	>0.01%

Source: DCF data

The informants for the QR include CP&P and Child Health Unit staff, biological parents, others who the youth or parent identified as supportive, relative and non-relative resource parents, education providers, mental health and legal professionals, substance abuse treatment providers and children/youth.²³³ Reviewers evaluate the child and family's status on a range of indicators

²³² Percentages are calculated from a total of 191; some children are identified by more than one race.

²³³ Interviews are usually conducted individually with participants, either by phone or in person. All efforts are made to see children/youth in the setting in which they reside.

and rate whether the status was acceptable or unacceptable.²³⁴ See Table 10 for the results on each Child and Family Status indicator and overall Child and Family Status ratings for all cases. As shown in Table 10, the status of children was rated as acceptable in the majority of cases including key areas of safety, stability in school, living arrangement, learning and development and physical health of the child, a significant achievement.

**Table 10: Qualitative Review Child and Family Status Results
(January- December 2015)**

Child & Family Status Indicators	# of Applicable Cases	# of Acceptable Cases	% of Acceptable Cases
Safety at Home	191	187	98%
Safety in other Settings	191	187	98%
Stability at Home	191	156	82%
Stability in School	129	118	91%
Living Arrangement	191	183	96%
Family Functioning & Resourcefulness	188	138	73%
Progress towards Permanency	191	118	62%
Physical Health of the Child	191	184	96%
Emotional Well-Being	191	168	88%
Learning & Development, Under Age 5	71	71	100%
Learning & Development, Age 5 & older	120	107	89%
OVERALL Child & Family Status	191	180	94%

Source: DCF data

Table 11 shows the results of assessments of system and practice performance indicators from reviews conducted in CY 2015. As with the status indicators, reviewers evaluated whether performance was acceptable or unacceptable.²³⁵ The QR results identify where further work is needed to fully implement the CPM. Reviewers found acceptable Practice/System Performance in 72 percent (138 of 191) of cases. This is an increase from 2014 when reviewers found acceptable Practice/System Performance ratings in 66 percent (119 of 180) of cases.

The percentage of cases with acceptable Practice/System Performance in the majority of the indicators representing DCF's core CPM functions – engaging, teaming, assessing, planning, intervening and tracking and adjusting - also continues to increase. DCF expects that efforts to streamline the QR protocol, make the QR protocol more accessible to frontline staff, add supervisors to the pool of reviewers and connect QR results to other CQI efforts will positively impact performance reported each year through these reviews.

²³⁴ Cases are considered acceptable if the overall QR rating based on a standardized protocol is a 4, 5 or 6 and unacceptable if the overall rating is a 1, 2 or 3.

²³⁵ Ibid.

**Table 11: Qualitative Review Practice/System Performance Results
(January – December 2015)**

Practice Performance Indicators		# Cases Applicable	# Cases Acceptable	% Acceptable
Engagement	Overall	191	134	70%
	Child/Youth	114	93	82%
	Parents	141	73	56%
	Resource Family	117	94	80%
Family Teamwork	Formation	191	103	54%
	Functioning	191	83	43%
Assessment & Understanding	Overall	191	142	74%
	Child/Youth	191	159	83%
	Parents	141	68	48%
	Resource Family	116	98	84%
Case Planning Process		191	115	60%
Plan Implementation		191	134	70%
Tracking & Adjusting		191	131	69%
Provision of Health Care Services		191	184	96%
Resource Availability		191	175	92%
Family & Community Connections	Overall	103	89	86%
	Mother	85	73	86%
	Father	69	45	65%
	Siblings	57	48	84%
Family Supports	Overall	165	132	80%
	Parents	138	87	63%
	Resource Family	115	107	93%
Long Term View		191	124	65%
Transitions & Life Adjustments		191	130	68%
OVERALL Practice/System Performance		191	138	72%

Source: DCF data

O. NEEDS ASSESSMENT

SEP Section IV.C.21 requires the state to “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.” The Needs Assessment, designated in the SEP as *To Be Achieved*, is to be conducted on an annual, staggered basis “that assures that every county is assessed at least once every three years.” The state is required to “develop placements and services consistent with the findings of these needs assessments.”

Quantitative or Qualitative Measure	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.
Final Target	The State shall develop placements and services consistent with the findings of these needs assessments.

DCF, in partnership with the Institute for Families at Rutgers University School of Social Work, is in Phase III of developing a Needs Assessment process to identify the strengths and needs of children and youth at risk for and those already entering out-of-home placement.

Phase I of the DCF's Needs Assessment process involved a review of DCF internal reports and assessments completed by the Department and its partners from CY 2008 to CY 2014 to identify common needs across practice areas, including child maltreatment reporting as well as the provision of services for families with children in the home and in out-of-home placement. Phase I also involved the formation of an internal workgroup to inform the assessment process, to identify child and family needs and to prioritize service gaps. DCF published a detailed description of its Phase I activities in its *Needs Assessment: Interim Report* completed in December 2014 and available on DCF's website (See Table 1B).²³⁶ In sum, DCF determined from its Phase I activities that families that encounter the child welfare system have difficulty acquiring safe, stable housing and accessing consistent, affordable transportation, employment and vocational opportunities and affordable food. The report highlights the need for accessible substance abuse and mental health treatment statewide.

DCF published its Phase II activities and findings in its *DCF Needs Assessment 2015: Interim Report* on its website in April 2016 (See Table 1B).²³⁷ As part of Phase II, DCF used New Jersey's state administered child welfare information system, NJSPIRIT – the state's client level case management system --- to determine categories of need for children and families served by DCF from 2009 to 2013. The seven categories the state identified as areas of need are: caregiver mental health, caregiver substance abuse, child mental health, child substance abuse, poverty, housing and domestic violence.

Key findings of DCF's Phase II client level data analysis for the years 2009 to 2013 are:

- The areas of greatest need involve caregiver substance abuse and caregiver mental health.
- Caregiver substance abuse and mental health issues often co-occur with other needs, such as poverty, domestic violence and children's mental health needs.

²³⁶ DCF's Needs Assessment: Interim Report 2015 can be found here:

http://www.state.nj.us/dcf/childdata/continuous/DCF_Needs_Assessment_Interim-Report.pdf

²³⁷ DCF's Needs Assessment: Interim Report can be found here:

http://nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Interim.Report_3.16.pdf

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- Between 2011 and 2013 reports to DCF of domestic violence in homes with children increased by 22 percent.
 - Mental health issues and substance abuse among children decreased between 2009 and 2013.

DCF also analyzed the seven areas of need across counties in order to examine regional variation. County level data show, for example, that between 2009 and 2013 caregiver substance abuse was less likely to be identified in northeastern counties, with the exception of Essex and Hudson, and more likely to be prevalent in Sussex, Warren, Salem, Gloucester and Atlantic counties. DCF's *Needs Assessment 2015 Interim Report* provides an analysis of each of the seven identified categories of need, by county, for CY 2013.

Phase II of the Needs Assessment process also involved identifying secondary data on the current range of services available in the state. The three primary sources for determining the state's range of services are (1) the service modules in NJSPIRIT, (2) the Department's review of service provider contracts by Area Office, and (3) forms used with DCF's contract providers. DCF reports that there are limitations to its review of secondary data due to data entry issues and the generality of the information furnished by service providers about geographic areas served and types of services listed. The expectation is that DCF will be able to supplement its findings from Phase II with information obtained through the collection of primary data in Phase III.

In Phase III of the Needs Assessment process DCF will be examining primary qualitative data through focus groups and interviews with key internal and external stakeholders, including caseworkers, service providers and families. DCF will also continue to analyze client level data to better understand the needs of subpopulations of children, youth and families. DCF anticipates that it will complete Phase III on the Needs Assessment process in the fall of 2016.

P. FISCAL YEAR BUDGET

The Governor's proposed FY 2017 state appropriation for DCF, effective July 1, 2016, is \$1.12 billion in state funds, an increase of 0.6 percent over the FY 2016 adjusted appropriation of \$1.112 billion. With the addition of federal funding, the total DCF FY 2017 budget will be \$1.7 billion.

The budget includes approximately \$28.3 million of new state funding for CSOC based on projected increased utilization of behavioral health services, including \$12.7 million for out-of-home treatment services, \$8.4 million for intensive in-home behavioral assistance and \$6.1 million for Care Management Organizations.

DCF leadership has indicated that the FY 2017 budget provides sufficient funds to carry out the state's responsibilities for child protection; children's mental health; services to support children in their own homes and in out-of-home placement; and to achieve the SEP outcomes related to children's safety, permanency and well-being. The budget allows for 6,660 staff positions; reflecting an increase of 17 positions over FY 2016 to meet SEP requirements.

APPENDIX: A-1

Glossary of Acronyms Used in the Monitoring Report

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

APPENDIX B-1

Sustainability and Exit Plan

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF NEW JERSEY

CHARLIE AND NADINE H., et al.,

Hon. Stanley R. Chesler, U.S.D.J.

Plaintiffs.

Civ. Action No. 99-3678 (SRC)

v.

CHRISTOPHER J. CHRISTIE, as Governor of
the State of New Jersey, and ALLISON
BLAKE, as Commissioner of the New Jersey
Department of Children and Families.

Defendants.

SUSTAINABILITY AND EXIT PLAN (SECOND MODIFIED SETTLEMENT AGREEMENT)

PREAMBLE

This Second Modified Settlement Agreement (hereinafter the “Agreement”) supersedes all previous agreements, oral and written, and resolves all disputes in the case captioned Charlie and Nadine H., et al., v. Christie, et al., Civil Action Number 99-3678 (SRC) (the “Action”) including, without limitation, the claims of the named plaintiffs and the plaintiff classes as of the dates of (1) the September 2, 2003 Settlement Agreement, (2) the December 1, 2005 Motion for Contempt and Noncompliance, and (3) the July 18, 2006 Modified Settlement Agreement.

The United States District Court for the District of New Jersey has subject-matter jurisdiction over the claims set forth in the Amended Complaint filed in the Action, personal jurisdiction over parties to the Action, and the authority to approve and enter this Agreement as a fair, reasonable, and adequate settlement of the Action. Unless otherwise noted, the terms of this Agreement will not take effect until the Court approves and enters the Agreement. Unless otherwise noted, the terms of this Agreement referred to as the Sustainability and Exit Plan, will not take effect until the Court approves and enters the Agreement.

The United States District Court for the District of New Jersey will have continuing jurisdiction to enforce the terms of this Agreement, and any documents incorporated herein, until such time as the parties agree to terminate this Agreement or the Court terminates this Agreement.

This Agreement is not, nor will it be construed to be, an admission of liability on the part of Defendants, or any of them, as to the truth of any fact alleged or the validity of any claim which has or could have been asserted in the Action, or of the deficiency of any defense which has or could have been asserted in the Action or of any wrongdoing or liability whatsoever, nor will this Agreement be construed as an acknowledgment by Plaintiffs of the absence of such liability.

As set forth above, it is the intent of the parties to this Agreement that the Court retain jurisdiction over this Agreement and that this Agreement will be enforceable by the Court as provided herein. It is also the intent of the parties that, notwithstanding the preceding sentence, the parties will apply their best efforts to effectuate the purposes of this Agreement and make every reasonable effort to resolve disputes prior to seeking court intervention. Plaintiffs agree not to seek relief for isolated or minor violations, nor for violations relating solely to an individual child, unless that child is a named plaintiff in this litigation.

Unless otherwise specifically stated in a provision of this Agreement, all provisions of this Agreement will be enforceable as provided herein and will apply to all children in custody, regardless of whether they are in a placement made by the State or by a contract agency, and regardless of the type of placement.

All references to “the State” within this Agreement refer to and specifically apply to the Defendants, the Governor of the State of New Jersey as supervisor of the Department of Children and Families (“DCF”), and the Commissioner of DCF, acting in their official capacities.

I. PRINCIPLES OF THE SUSTAINABILITY AND EXIT PLAN

The interpretation of the provisions of this Agreement will be guided by the following principles:

A. Children in out-of-home care should be protected from harm.

1. Foster care should be as temporary an arrangement as possible, with its goal being to provide to children in out-of-home placements a safe, nurturing, and permanent home quickly.
2. If at all possible, children in out-of-home placements should be quickly and safely reunified with their biological families. If this cannot be accomplished, children need to be placed with an adoptive family, or in the permanent legal custody of an appropriate kinship family, in a timely fashion.
3. Families should be provided with the services they need to keep them together whenever possible. Families should be provided with the services they need to allow for safe and speedy reunification whenever possible.
4. In making determinations about plans and services, the child’s interests are paramount.
5. Children in out-of-home placement should be in the least restrictive, most family-like setting appropriate for their needs.
6. Children in out-of-home placement should be placed in settings that promote the continuity of critical relationships: together with their

siblings; with capable relatives whenever possible; and in their own communities.

7. Children in out-of-home placement should have stable placements that meet their needs, and should be protected from the harm caused by multiple placement moves.
 8. Children in out-of-home placement should have the services necessary to address their medical and psychological needs, including those services needed to address problems arising from the child's removal from his or her biological family.
 9. Children in out-of-home placement must have timely decision-making about where and with whom they will spend their childhood, and timely implementation of whatever decisions have been made.
 10. Children in out-of-home placement should be protected from abuse and neglect and, to this end, investigations of allegations of abuse and neglect in out-of-home placements should be timely, thorough and complete.
 11. Adolescents in out-of-home placements should be provided with the skills, opportunities, housing and permanent connections with caring adults they need to successfully make the transition to adulthood.
 12. The State shall make every effort to ensure that all children shall receive equal and appropriate access to services without regard to race, religion, sexual identity or ethnic origin.
- B. Decisions about children in out-of-home placement should be made with meaningful participation of their families and of the youth themselves to the extent they are able to participate.
- C. In order to protect children and support families, New Jersey's child welfare system should operate in partnership with the neighborhoods and communities from which children enter care.
- D. New Jersey's child welfare system should be accountable to the public; to other stakeholders; and to communities throughout the State.
- E. Services to children in care and their families should be provided with respect for and understanding of their culture. No child or family should be denied a needed service or placement because of race, ethnicity, or special language needs.
- F. New Jersey's child welfare system should have the infrastructure, resources, and policies needed to serve the best interests of the children in its care.

The list of principles outlined above is not intended to be exhaustive. Rather, the parties acknowledge that the shared goal of improving outcomes for children will require commitments to principles and outcome measures that are broader than the subject matter of this Action.

II. FOUNDATIONAL ELEMENTS

The Parties acknowledge that elements in this Section provide the foundation for a healthy child welfare system. 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. The elements in this category are enforceable if the Monitor determines that a foundational element has not been sustained.

A. DATA TRANSPARENCY

DCF will continue to maintain a case management information and data collection system that allows for the assessment, tracking, posting or web-based publishing, and utilization of key data indicators. The data indicators, including definitions and methodology will be developed in consultation and agreement with the Monitor. Published data will be made available on worker caseloads by worker type and office. DCF will ensure the accuracy of published data and will maintain its definitions and methodology. DCF will continue to collect and publish, at appropriate intervals determined in consultation with the Monitor, both process and outcome data related to the requirements of this Agreement.

B. CASE PRACTICE MODEL

DCF will continue to implement and sustain a Case Practice Model that is reflective of the principles of this Agreement and DCF's values. The model is a continuous set of activities that emphasizes quality investigation and assessment, including safety and risk assessment and risk 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.

C. STATE CENTRAL REGISTRY OPERATIONS

Investigations of alleged child abuse and neglect shall be received by the field in a timely manner and investigation commenced within the required response time as identified at SCR but no later than 24 hours.

D. APPROPRIATE PLACEMENTS

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. Children under age 13 shall not be placed in

shelters, and no child shall be placed out-of-state in a behavioral health facility without written approval of the Director of the Children's System of Care. The State shall maintain an adequate number and array of family-based placements to appropriately place children in family settings.

E. SERVICE ARRAY

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

F. MEDICAL AND BEHAVIORAL HEALTH SERVICES

The State will continue to provide medical care to children and youth including appropriate medical assessment and treatment, pre-placement and entry medical assessments under EPSDT guidelines, dental examinations, up to date immunizations, follow-up care and treatment and mental health assessment and treatment, where appropriate. The State will continue to provide behavioral health treatment in the least restrictive setting for children and youth.

G. TRAINING

DCF will maintain a comprehensive training program for child welfare staff and supervisors including specialized training for investigators and LAIU staff. The training shall minimally include: pre-service training covering such areas as the case practice model and permanency planning, including concurrent planning, and adoption and NJ SPIRIT training. Staff completing training shall demonstrate competency on required areas of training.

H. FLEXIBLE FUNDING

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.

I. RESOURCE FAMILY CARE SUPPORT RATES

The State will continue to adjust the resource family care support rates to maintain them at the USDA estimates for the cost of raising a child for the following State fiscal year. The State will continue to adjust the Independent Living Stipend considering the USDA estimate rates for raising an adolescent, the

HUD Fair Market Value for average rent in New Jersey, and IRS estimates for monthly food and household expenses.

J. PERMANENCY

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

K. ADOPTION PRACTICE

The process of freeing a child for adoption and seeking and securing an adoptive placement shall begin as soon as the child's permanency goal becomes adoption but no later than as required by federal law. The State will conduct 5- and 10-month placement reviews for children in custody. DCF shall commence the adoption process as soon as a diligent search process has been completed and has failed to identify the location of both parents or a suitable family placement. DCF shall develop a child specific recruitment plan for all children with a permanency goal of adoption needing the recruitment of an adoptive family.

III. TO BE MAINTAINED

This category will include all requirements within this Agreement for which the State has satisfied the outcomes and specified targets in this Agreement during at least the previous six-month period. If the State's performance for a review period falls below the designated outcomes and standards in this Agreement, the Monitor has discretion to advise the State, and the State will have the opportunity to propose corrective action. If the State's performance for a subsequent review period remains below the designated outcomes and standards in this Agreement, the Monitor will have the discretion to determine if the decline in performance is temporary, insubstantial and/or caused by reasonably unforeseen circumstances or that the State's corrective actions are sufficient to remedy the decline or to re-designate the standard as an "Outcome to be Achieved."

In reviewing the status of measures in the "To Be Maintained" category, the Monitor will first look to the data published by DCF. For any measures for which public data are not available and where necessary for verification, DCF will provide data to the Monitor so that the Monitor can verify performance and continued compliance with the standards in this Agreement for each review period. The Monitor shall have access to all information it deems necessary as provided in Section V. of this Agreement.

If either party objects to the Monitor's designation of a requirement into the "To Be Maintained" category, either party may trigger the dispute resolution process for re-designation of measures as described in Section VI, the Dispute Resolution section concerning re-designation of measures.

A. INVESTIGATIONS

1. 80% of IAIU investigations will be completed within 60 days.

B. CASELOADS

2. Supervisor/Worker Ratio: 95% of offices will have sufficient supervisory staff to maintain a 5 worker to 1 supervisor ratio.
3. IAIU Investigators: 95% of IAIU investigators will have (a) no more than 12 open cases, and (b) no more than eight new case assignments per month.
4. Permanency Workers (Local Offices): 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.
5. Permanency Workers: 95% of permanency workers will have (a) no more than 15 families, and (b) no more than 10 children in out-of-home care.

C. CASE PLANS

6. 95% of case plans for children and families will be reviewed and modified no less frequently than every six months.

D. DAsG STAFFING

7. The State will maintain adequate DAsG staff positions and keep positions filled.

E. CHILD HEALTH UNITS

8. The State will continue to maintain its network of child health units, adequately staffed by nurses in each local office.

F. VISITATION

9. Caseworker Contacts with Children – New Placement/Placement Change: 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.
10. Caseworker Contacts with Children in Placement: During the remainder of the placement, 93% of children shall have at least one caseworker visit per month, in the placement.

G. EDUCATION

11. Children will be enrolled in school and DCF will have taken appropriate actions to ensure that their educational needs are being met. 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.

H. MALTREATMENT

12. Abuse and Neglect of Children in Foster Care: No more than 0.49% of children will be victims of substantiated abuse or neglect by a resource parent or facility staff member.

IV. TO BE ACHIEVED

Measures in this category are those that remain to be achieved after execution of this Agreement. At the conclusion of each six-month monitoring period, the Monitor will determine whether DCF's performance during the monitoring period satisfies each measure. If it does, the Monitor will certify the measure as "To be Maintained"; if not, the Monitor will continue to designate the measure as "To be Achieved." In making that determination, the Monitor will have the discretion to determine that any variations in performance are insubstantial.

All measures in this category will be subject to monitoring pursuant to Section V of this Agreement. If plaintiffs or defendants object to the Monitor's designation of a measure, either party may trigger the dispute resolution process for re-designation of measures as described in Section VI, the Dispute Resolution section.

A. INVESTIGATIONS

13. Timeliness of Completion: 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.
14. Timeliness of Completion: 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.
15. Quality of Investigations: 85% of investigations shall meet the standards for quality investigations. The Monitor, in consultation with the parties, shall determine appropriate standards for quality investigations.

B. FAMILY TEAM MEETINGS

16. Initial FTM: 80% of children newly entering placement shall have a family team meeting before or within 45 days of placement.

17. Subsequent FTMs within 12 Months: 80% of children will have three additional FTMs within the first 12 months of the child coming into placement.
18. Subsequent FTMs after 12 Months – Reunification Goal: 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.
19. Subsequent FTMs after 12 Months – Other than Reunification Goal: 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.
20. Quality of Teaming: 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 team functioning. The Monitor, in consultation with the parties, shall determine the standards for quality team formation and functioning.

C. NEEDS ASSESSMENT

21. 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.

D. QUALITY OF CASE AND SERVICE PLANNING

22. Initial Case Plans: 95% of initial case plans for children and families shall be completed within 30 days.
23. Quality of Case Plans: 80% of case plans shall be rated acceptable as measured by the QR process. The Monitor, in consultation with the parties, shall determine the standards for quality case planning.

E. CASELOADS

24. Intake Workers (local offices): 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.
25. Intake Workers: 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.

- 26. Adoption Workers (local offices): 95% of local offices will have average caseloads for adoption workers of no more than 12 adoptive families per worker.
- 27. Adoption Workers: 95% of individual adoption worker caseloads shall be no more than 12 adoptive families per worker.

F. VISITATION

- 28. Caseworker Contacts with Family When Goal is Reunification: 90% of families will have at least twice-per-month, face-to-face contact with their caseworker when the permanency goal is reunification.
- 29. Parent-Child Visits – weekly: 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 supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.
- 30. Parent-Child Visits – bi-weekly: 85% of children in custody 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 supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.
- 31. Child Visits with Siblings: 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.

G. PLACEMENT

- 32. Sibling Placements: At least 80% of siblings groups of two or three children entering custody will be placed together.
- 33. Sibling Placements of four or more children: All children will be placed with at least one other sibling 80% of the time.
- 34. Recruitment for Sibling Groups of Four or More: DCF will continue to recruit for resource homes capable of serving sibling groups of four or more.
- 35. Placement Stability, First 12 Months in Care: 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.
- 36. Placement Stability, 13 – 24 Months in Care: At least 88% of these children will have no more than one placement change during the 13-24 month following their date of entry.

H. MALTREATMENT

- 37. Repeat Maltreatment (In-home): 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.
- 38. Maltreatment Post-Reunification: 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.
- 39. Re-entry to Placement: Of all children who enter foster care in a 12 month period for the first time who are discharged within 12 months to reunification, living with a relative(s), or guardianship, no more than 9 percent will re-enter foster care within 12 months of their discharge.

I. TIMELY PERMANENCY

- 40. Permanency within 12 Months: 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.
- 41. Permanency within 24 Months: 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.

42. Permanency within 36 Months: 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).
43. Permanency within 48 Months: 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.

J. SERVICES TO SUPPORT TRANSITION

44. 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.

K. OLDER YOUTH

45. Independent Living Assessments: 90% of youths age 14 to 18 will have an Independent Living Assessment.
46. Quality of Case Planning and Services: 75% of youth aged 18 to 21 who have not achieved legal permanency shall receive acceptable quality case management and service planning.
47. Housing: 95% of youth exiting care without achieving permanency shall have housing.
48. Employment/Education: 90% of youth exiting care without achieving permanency shall be employed, enrolled in or have recently completed a training or an education program or there is documented evidence of consistent efforts to help the youth secure employment or training.

V. MONITORING

- A. The parties agree that the Center for the Study of Social Policy, under the direction of Judith Meltzer, shall be the Monitor of the State's compliance with the goals and principles of this Agreement.
- B. The Monitor's duties shall be to confirm independently the data reports and statistics provided pursuant to this Agreement, including: conduct independent case record and other qualitative reviews; review all plans and documents agreed to be developed and produced by the State pursuant to this Agreement; and report on the State's progress in implementing the terms of this Agreement and the

achievement of the improved outcomes set forth herein. Among the Monitor's responsibilities, the Monitor shall review whether case practice reflects the components of the Case Practice Model referred to throughout this Agreement.

- C. The Monitor shall prepare reports that will address these issues and be released periodically, but no less than every six months, unless the parties and the Monitor agree otherwise. To avoid duplication and to build capacity within the agency, the Monitor will look first to the State's data and data analysis. Accordingly, the State shall provide the Monitor with copies of all regular data reports respecting measures contained in this Agreement. The State also agrees to provide all data and reports requested by the Monitor, whether or not that data is already compiled for use on the State's website or in any of its web-based or other publications, respecting measures contained in this Agreement.
- D. Respecting measures contained in this Agreement, notwithstanding the existence of State data, data analysis, and reports, the Monitor will have the authority to prepare new reports on outcome measures and all other enforceable measures contained in this Agreement.
- E. The State agrees to provide the Monitor with free access to all individuals within DCF and its Divisions, any successor agencies or divisions, and persons within the Executive Branch, as the Monitor chooses; to assist the Monitor in gaining free access to other stakeholders in the child welfare system (including but not limited to the staff of contract providers); and to provide the Monitor with free access to all documents and data the Monitor deems relevant to its work (including but not limited to documents and data from contract agencies). The Monitor agrees to respect the confidentiality of all information related to individually identifiable clients of the Department and its Divisions, subject to applicable law. The Monitor further agrees to respect the confidentiality of any documents that are in draft form or otherwise privileged, subject to applicable law.
- F. The reports of the Monitor shall be public documents, except that any individually identifiable information (as that term is understood under New Jersey law) and any other confidential information protected from disclosure by law, including without limitation any protected health information and/or individually identifiable health information (as those terms are understood under HIPAA) shall be redacted or otherwise removed from any public report. The Monitor shall have a sufficient, reasonable budget (the funding of which shall be the responsibility of the State), staff, and access to information, including access to State employees, that the Monitor deems necessary to fulfill his or her duties. Any such information received by the Monitor, unless already public, will not be made public without the State's prior written permission, except as incorporated into a public report of the Monitor.
- G. Plaintiffs shall have access, through the Monitor, to all information made available to the Monitor, and to all information related to ensuring compliance

with and enforcing this Agreement, subject to any confidentiality order(s) in effect in this case.

- II. The parties' intent is that the Monitor, in collaboration with the State, will develop a plan to transfer the primary monitoring function to DCF's Office of Performance Management and Accountability upon the termination of this Agreement, or at such earlier time as the parties may agree. The Monitor will work in collaboration with the State to build DCF's quality-assurance capacity and will reasonably ensure that monitoring is supportive of DCF's good-faith effort and need to absorb primary monitoring within DCF.
- I. The Monitor may periodically meet privately with the Court concerning issues related to this case, provided the parties are made aware of the occurrence of such a meeting.
- J. If at any point the Monitor can no longer serve, the parties shall agree on another Monitor, with input and recommendations from the outgoing Monitor.

VI. DISPUTE RESOLUTION

A. Dispute Resolution regarding Non-compliance

In the event that Plaintiffs believe that Defendants are not in substantial compliance with an enforceable provision of this Agreement:

- 1. Plaintiffs shall notify Defendants and the Monitor in writing of the compliance issue prior to seeking any judicial relief.
- 2. Within 10 calendar days of such notification, the State may respond in writing to Plaintiffs and the Monitor regarding the compliance issue raised and what actions, if any, it proposes to take with regard to the alleged issue of non-compliance.
- 3. Within 30 calendar days of the original notification, the parties shall meet with the Monitor, unless extended by agreement of the parties and the Monitor. The purpose of the meeting will be for the parties to engage in good-faith negotiations with the assistance of the Monitor to determine what, if any, actions are necessary to address the issues raised in the dispute. The parties shall engage in negotiations for a period not to exceed 30 calendar days, unless extended by mutual agreement of the parties and the Monitor.
- 4. At the conclusion of the dispute resolution, if the parties have not come to a resolution, the Monitor shall analyze the issues raised by Plaintiffs and the State's response and shall prepare and issue a written report with recommendations concerning the dispute. The Monitor's report shall be issued no later than 15 calendar days after the conclusion of dispute

resolution. The report shall be provided to the parties and the Court and shall be considered a public document.

5. If, at the conclusion of the dispute resolution process and following the receipt of the Monitor's report, Plaintiffs determine that judicial action is necessary, Plaintiffs may seek further relief from the Court.
6. If Plaintiffs believe that Defendants have violated this Agreement and the alleged violations have caused or are likely to cause immediate or irreparable harm to the well-being of children in the State's custody, they may seek judicial relief following an expedited dispute resolution process. Plaintiffs must provide Defendants and the Monitor with written notice with respect to any such harm, including documentation that Plaintiffs believe supports their decision to invoke the provisions of this paragraph. Defendants will respond to this notice, in writing, within 3 business days. The Parties and the Monitor will then engage in the mediation process outlined in sections 3 and 4 above, provided that the entire mediation process is completed within 10 business days of Defendants' response to Plaintiffs' notice, unless extended by mutual agreement of the parties and the Monitor.
7. In an action in federal court to remedy an alleged failure to comply with any terms of this Agreement, Plaintiffs shall have the burden to demonstrate that Defendants have failed to comply with the specific terms of the Agreement and that they are entitled to relief. Factors that may be considered by the Court, but are not dispositive, are:
 - a. Conclusions and findings in the independent monitoring reports;
 - b. Constraints, including legal constraints, upon Defendants' ability to comply;
 - c. The interests at stake; and
 - d. The progress that has been made towards achieving compliance with the specific terms in dispute.

B. Dispute Resolution regarding Re-designation of Measures

1. Concurrent with the Monitor's Report for each reporting period, the Monitor shall inform the parties of any measures that they will recommend to the Court be re-categorized as either an "Outcome to be Maintained" or an "Outcome to be Achieved."
2. If either party objects to the Monitor's designation of a measure as being categorized as either To Be Maintained or To Be Achieved, that party may invoke the dispute resolution procedure described in this section.
3. Within 10 calendar days of such notification, either party may provide written notification to the Monitor and to the other party that they disagree

with a recommendation for categorization and provide their reasons for such disagreement.

4. Within 15 calendar days of the Monitor's receipt of written notification of objection from either party, the Monitor will engage in discussions with both parties to understand the nature of any objections and the evidence for accepting/disputing the Monitor's recommendation.
5. Within 30 days of the Monitor's discussions with each party, the Monitor shall determine the category designation and provide both parties and the Court with a written statement of its decision and the evidence that supports it.
6. The Monitor's decision shall be final and binding on the parties.
7. Once a requirement has been included in the "Outcome to Be Maintained" category, it will remain in that category for the duration of court jurisdiction of this matter, unless the Monitor determines that the State's performance during the immediately preceding six-month period has fallen below the designated outcomes and standards in this Agreement. In making this determination, the Monitor shall have the discretion to determine whether the decline in performance is insubstantial, temporary and/or caused by reasonably unforeseen circumstances; or that the State's corrective action(s) are sufficient to remedy the decline; or to re-designate the measure as an "Outcome to Be Achieved."
8. If the performance fails to meet the performance standard for a subsequent period, the Monitor shall determine whether to re-designate the performance measure as an "Outcome to Be Achieved." In making this determination, the Monitor shall have the discretion to determine whether the decline is insubstantial or caused by reasonably unforeseen circumstances and/or whether there is evidence that the State's actions to remedy the decline demonstrate sound implementation of sufficient corrective action(s), CQI efforts to examine the effectiveness of the corrective action and progress toward meeting the designated performance measure.

VII. TERMINATION AND EXIT

- A. Defendants may seek a ruling from the Court terminating the Court's jurisdiction over this Agreement based on Defendants demonstrating that they have achieved compliance with this Agreement for a continuous period of at least 12 months. A determination by the Monitor that all provisions are in the "To Be Maintained" category and have remained in that category for at least 12 months is *prima facie* evidence that this standard has been met.
- B. Defendants may not, however, seek such a ruling if there are any pending motions before the Court, if there are then in effect any orders based on

noncompliance with any enforceable provisions of this Agreement, or there are any notices of non-compliance or action plans still in effect pursuant to the dispute resolution section of this Agreement. If, in response to such an application by Defendants, Plaintiffs can show that Defendants have failed to satisfy their burden outlined above, the Court shall retain jurisdiction. If Plaintiffs can show continued Court jurisdiction is necessary to accomplish the purposes of this Agreement the Court may also retain jurisdiction.

- C. During the first six months following the Court's entry of an order terminating the Court's jurisdiction over this Agreement pursuant to section VII.A, the State shall continue to publish accountability data and make additional data available to the Monitor if the Monitor requests it to validate continued performance. If there is a serious, systemic decrease in Defendants' performance that is not temporary or insubstantial, Plaintiffs have the right to file a motion seeking to vacate the order and restore Court jurisdiction based on that change in performance.
- D. Neither party may argue that any change in the exit standard from the Settlement Agreement of September 2, 2003, or the Modified Settlement Agreement of July 18, 2006, is intended to reflect agreement that there has been a substantive change to the legal standard applicable to the termination or modification of this agreement when the Settlement Agreement was first executed.

IN WITNESS WHEREOF AND INTENDING TO BE LEGALLY BOUND HEREBY, the parties, by and through their duly authorized representatives, execute this Agreement, intending that it will become effective upon its approval and entry by the Court as provided herein.

DATED:

Christopher J. Christie, Governor of the State of New Jersey

Allison Blake, Commissioner for Defendants

Marcia Robinson Lowry, for Plaintiffs

IT IS SO ORDERED:

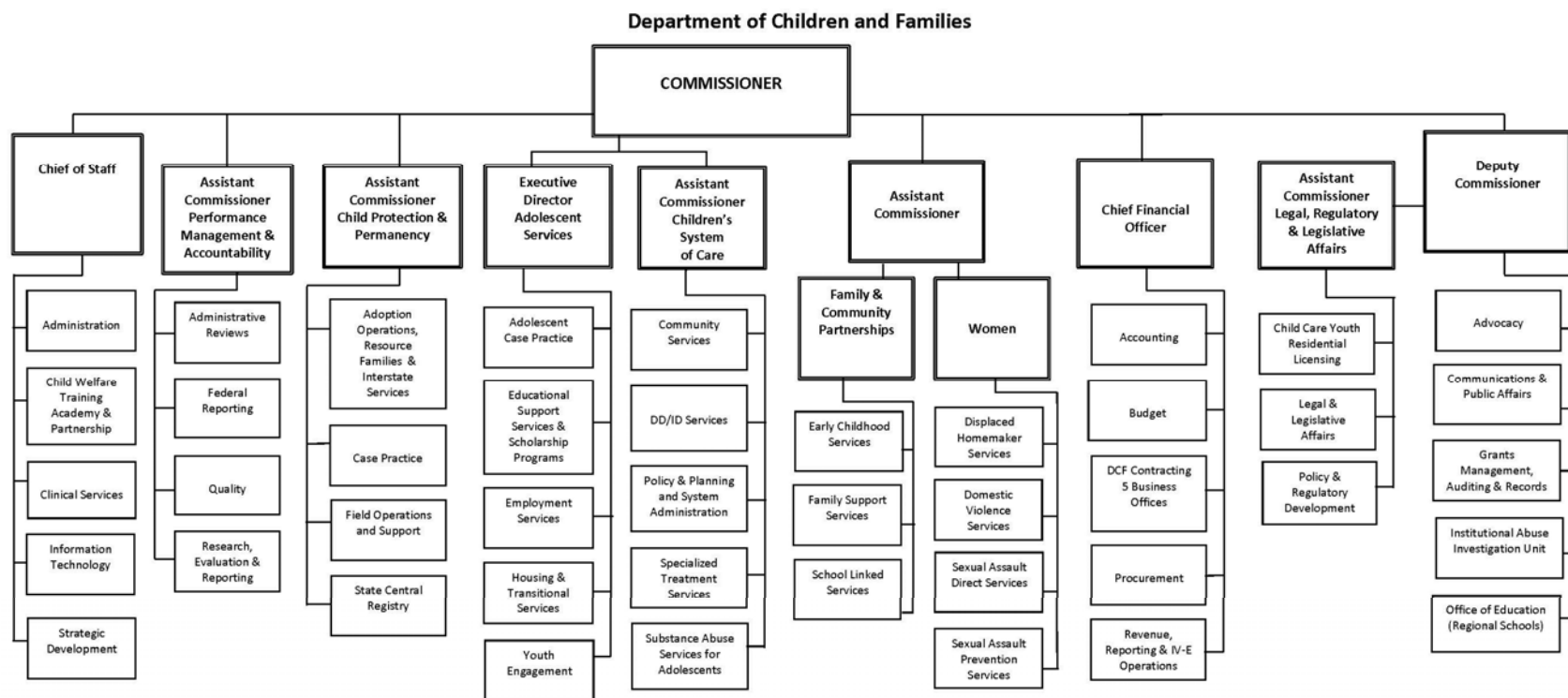
DATED: October __, 2015 _____

TABLE OF CONTENTS

	<u>Page</u>
I. PRINCIPLES OF THE SUSTAINABILITY AND EXIT PLAN.....	2
II. FOUNDATIONAL ELEMENTS	4
A. DATA TRANSPARENCY.....	4
B. CASE PRACTICE MODEL.....	4
C. STATE CENTRAL REGISTRY OPERATIONS	4
D. APPROPRIATE PLACEMENTS	4
E. SERVICE ARRAY	5
F. MEDICAL AND BEHAVIORAL HEALTH SERVICES.....	5
G. TRAINING	5
H. FLEXIBLE FUNDING.....	5
I. RESOURCE FAMILY CARE SUPPORT RATES	5
J. PERMANENCY	6
K. ADOPTION PRACTICE.....	6
III. TO BE MAINTAINED.....	6
A. INVESTIGATIONS	7
B. CASELOADS	7
C. CASE PLANS.....	7
D. DASG STAFFING	7
E. CHILD HEALTH UNITS	7
F. VISITATION.....	7
G. EDUCATION	8
H. MALTREATMENT.....	8
IV. TO BE ACHIEVED.....	8

A.	INVESTIGATIONS	8
B.	FAMILY TEAM MEETINGS.....	8
C.	NEEDS ASSESSMENT	9
D.	QUALITY OF CASE AND SERVICE PLANNING.....	9
E.	CASELOADS.....	9
F.	VISITATION	10
G.	PLACEMENT.....	11
H.	MAI/TREATMENT	11
I.	TIMELY PERMANENCY	11
J.	SERVICES TO SUPPORT TRANSITION.....	12
K.	OLDER YOUTH	12
V.	MONITORING.....	12
VI.	DISPUTE RESOLUTION.....	12
VII.	TERMINATION AND EXIT	12

Appendix: C-1 **DCF Organizational Chart** **Department of Children and Families**



October 2015