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CHARLIE AND NADINE H. V. MURPHY

PROGRESS OF THE NEW JERSEY
DEPARTMENT OF CHILDREN AND FAMILIES

January 1 – June 30, 2021



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

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Charlie and Nadine H. v. Murphy
Progress of the New Jersey Department of Children and Families
For the Monitoring Period January 1 – June 30, 2021

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I. INTRODUCTION

The Center for the Study of Social Policy (CSSP) was appointed in 2006 by the Honorable Stanley R. Chesler of the United States District Court for the District of New Jersey as Federal Monitor of the class action lawsuit *Charlie and Nadine H. v. Murphy*, aimed at improving outcomes for children, youth and families served through New Jersey's child welfare system. As Monitor, CSSP has been charged with independently assessing New Jersey's compliance with the goals, principles and outcomes of the Court Order entered in 2003; the Modified Settlement Agreement (MSA) entered in July 2006; and the Sustainability and Exit Plan (SEP) entered on November 4, 2015, which supersedes the MSA. This monitoring report includes performance data and measures progress under the SEP for the period January 1 through June 30, 2021, and has been prepared by court-appointed independent Monitor Judith Meltzer, with assistance from Monitor staff Martha L. Raimon, Elissa Gelber, Lisa Mishraky-Javier, and Ali Jawetz.¹ It is presented to U. S. District Judge Chesler, parties to the lawsuit, and the public.

The SEP's requirements pertain to the approximately 3,700 children and youth in foster care and 31,000 children whose families are served through New Jersey's in-home child protective services (as of the end of 2020). The Department reports progress in reducing the use of family separation as a tool of the child protection system;² the census of children and families involved with child welfare services has decreased significantly since the end of 2019, from 4,400 children in foster care and 44,000 families served in-home.

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

In assessing progress, the Monitor first looks to the state's data and validates its accuracy. The Monitor also retains the authority to engage in independent data

¹ Copies of all Monitoring Reports can be found at: <https://cssp.org/our-work/projects/our-projects/class-action-litigation-new-jerseys-department-of-children-and-families/>

² To see DCF's Race Equity webpage, go to: <https://www.nj.gov/dcf/equity.html>

³ The exceptions to this time frame were Monitoring Period XIII, which covered July 1, 2012 through March 31, 2013; Monitoring Period XIV, which covered April 1 through December 31, 2013; and Monitoring Period XVII, which covered January 1 through December 31, 2015.

collection and analysis where needed. In the past several years, DCF has expanded the data available on its public website,⁴ as well as on its publicly accessible New Jersey Child Welfare Data Hub,⁵ which was developed in collaboration with Rutgers University.⁶ During the monitoring period, the Children's System of Care (CSOC) and the Office of Research, Evaluation and Reporting (RER) collaborated with Rutgers to launch the CSOC data dashboard for the Data Hub.^{7,8}

Please see Appendix B for a list of other reports DCF publishes on its website, as well as specific activities undertaken by the Monitor to assess DCF's progress this monitoring period.

Structure of the Report

Section II provides an overview of the state's accomplishments and challenges during this monitoring period, a time that remains challenging due to the ongoing COVID-19 pandemic. Section III provides summary performance data on each of the outcomes and performance measures required by the SEP. Section IV provides information related to the SEP Foundational Elements.⁹ Section V provides more detailed data and discussion of performance on *SEP Outcomes To Be Maintained* and *Outcomes To Be Achieved* in the following areas:

- Investigations of alleged child maltreatment (Section V.A);
- Implementation of DCF's Case Practice Model; including Family Team Meetings, case planning, and visits (Sections V.B, V.C & V.E);
- Educational engagement for children in out-of-home care (Section V.D);
- Placement of children in out-of-home settings (Section V.F);
- Rates of maltreatment and re-entry to placement (Section V.G);
- Efforts to achieve permanency for children either through reunification with family, legal guardianship, or adoption (Section V.H);

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

⁵ The Data Hub, launched in November 2016, allows users to create customized charts and graphs using New Jersey's child welfare data, and incorporates information from the formerly produced quarterly DCF Demographics Report.

⁶ To see the New Jersey Child Welfare Data Hub, go to: <https://njchilddata.rutgers.edu/#home>

⁷ To see the data map reports, go to: <https://njchilddata.rutgers.edu/map#>

⁸ To see the Press Release about the CSOC Data Dashboard, go to: <https://www.insidernj.com/press-release/nj-dcf-rutgers-university-launch-new-data-dashboard/>

⁹ The Foundational Elements requirements of the SEP intentionally recognize the state's accomplishments in early implementation of the MSA. At the Monitor's discretion, based on a concern that a Foundational Element has not been sustained, the Monitor may request additional data. If the data demonstrate a persistent problem, in the Monitor's discretion, the state will propose and implement corrective action (SEP.II).

- Provision of health care services to children and youth (Section V.I);
- Services to older youth (Section V.J);
- Services to support transitions (Section V.K);
- Caseloads (Section V.L);
- Deputy Attorneys General Staffing (Section V.M);
- Accountability through the Qualitative Review and the production and use of accurate data (Section V.N);
- Needs Assessment (Section V.O); and
- Fiscal Year 2020 budget (Section V.P).

II. SUMMARY OF PERFORMANCE DURING JANUARY THROUGH JUNE 2021

This report provides specific data and information regarding the state's progress on each of the Sustainability and Exit Plan (SEP) requirements between January and June 2021. It is the third report that reflects multiple challenges imposed by the COVID-19 pandemic and the policy and practice changes that DCF has made in order to meet its obligations to children and families during the pandemic. Despite these challenges, DCF has continued to maintain its commitments under the *Charlie and Nadine H.* lawsuit and pursue planned efforts towards improving services and supports for the children, youth, and families of New Jersey.

As the danger to infection from COVID-19 decreased, and following Governor Murphy's April 2020 plan to re-open New Jersey, DCF resumed certain operations in July 2020, including in-person contact with children, youth, and families. Because Local Offices remained closed, however, some visits that would have otherwise occurred in offices took place outdoors or in large public places, and supervision, staff meetings, and other administrative functions continued virtually. DCF directed providers of some services to resume in-person service delivery and in July 2020 released a guide for CP&P staff and providers on safe in-person parent-child and sibling visits.¹⁰ In-person contact continued throughout the monitoring period covered by this report despite the renewed spike in COVID-19 infections, with DCF making adaptations as needed. Following the Governor's mandate that all state employees be vaccinated or undergo weekly testing, by October 2021 staff began to return to offices with pre-COVID-19 schedules.

Prior to the COVID-19 pandemic, DCF had achieved and was sustaining progress in the majority of areas of service for children, youth, and families as required by the *Charlie and Nadine H.* lawsuit, and was on a trajectory toward meeting the remaining mandates of the lawsuit. Despite the continued challenges presented by the surge of the virus nationwide and in New Jersey between January and June 2021, DCF again sustained progress on most of the areas already achieved and again ended the monitoring period having met 44 of the 48 performance measures.¹¹ DCF also

¹⁰ To see New Jersey DCF's July 6, 2020 Guide for Supporting In-Person Visitation during the COVID-19 Pandemic, go to: <https://www.nj.gov/dcf/news/COVID19-Guidance.for.CPP.and.Providers.on.Family.Visits.pdf>

¹¹ These measures include: Institutional Abuse Investigations Unit (IAIU) (III.A.1to); Supervisor/Worker Ratio (III.B.2); IAIU Investigators Caseload (III.B.3); Permanency Workers (Local Offices) Caseload (III.B.4); Permanency Workers Caseload (III.B.5); Timeliness of Current Plans (III.C.6); Adequacy of DAsG Staffing (III.D.7); Child Health Units (III.E.8); Caseworker Contacts with Children – New Placement/Placement Changes (III.F.9); Caseworker Contact with Children in Placement (III.F.10); Educational Needs (III.G.11); Abuse and Neglect of Children in Foster

maintained performance with respect to each of the SEP Foundational Elements in such important areas as manageable caseloads for workers, staff training, and providing specialized services for particular populations, such as LGBTQ+ youth and domestic violence survivors.

In addition to maintaining performance on the Foundational Elements, the data contained in the report reflect that DCF continues to maintain similar performance levels – with a few exceptions in select months – as prior to the onset of the pandemic, including measures relating to the development of initial case plans and Family Team Meetings (FTMs). This performance demonstrates the extensive effort DCF undertook to set up virtual meetings and visits, as well as the continued emphasis on engaging with family despite the limits to in-person contact due to the pandemic.

Three of the remaining four *SEP Outcomes To Be Achieved* are measured by New Jersey's Qualitative Review (QR) process: Quality of Case Plans (SEP IV.D.23); Quality of Teaming (SEP IV.B.20); and Services to Support (SEP IV.J.44). The data required for determining performance for these three SEP outcomes have historically been collected and reported annually. Due to the pandemic, QRs were suspended and have not been resumed, and data for these measures are not included in this report. DCF has decided not to resume the QR process which had been used as a practice improvement process as well as a means of measuring some of the lawsuit outcomes. Instead, DCF has been redesigning its CQI processes to integrate its Solution Based Casework approach and the Child and Family Service Review (CFSR) results with its Case Practice Model. The Monitor, DCF, and Plaintiffs are negotiating a proposed alternative to measuring performance for those areas previously

Care (III.H.12); Timeliness of Investigation Completion (60 days) (SEP IV.A.13); Timeliness of Investigation Completion (90 days) (SEP IV.A.14); Quality of Investigations (SEP IV.A.15); Initial Family Team Meeting (SEP IV.B.16); Subsequent FTMs within 12 months (SEP IV.B.17); Subsequent FTMs after 12 months – Reunification Goal (SEP IV.B.18); Subsequent FTMs after 12 months – Other than Reunification Goal (SEP IV.B.19); Needs Assessment (SEP IV.C.21); Initial Case Plans (SEP IV.D.22); Intake Workers (Local Offices) (SEP IV.E.24); Intake Workers (SEP IV.E.25); Adoption Local Office Caseload (SEP IV.E.26); Adoption Workers (SEP IV.E.27); Parent-Child Visits – weekly (SEP IV.F.29); Parent-Child Visits – bi-weekly (SEP IV.F.30); Sibling Visits (SEP IV.F.31); Placing Siblings Together (SEP IV.G.32); Placing Siblings Together for Four or More Children (SEP IV.G.33); Recruitment of Placements for Sibling Groups of Four or More (SEP IV.G.34); Placement Stability for first 12 months in care (SEP IV.G.35); Placement Stability 13-24 Months in Care (SEP IV.G.36); Repeat Maltreatment (In-home) (SEP IV.H.37); Maltreatment Post-Reunification (SEP IV.H.38); Re-entry to Placement (SEP IV.H.39); Permanency within 12 Months (SEP IV.I.40); Permanency Within 24 Months (SEP IV.I.41); Permanency within 36 months (SEP IV.I.42); Permanency within 48 months (SEP IV.I.43); Independent Living Assessments (SEP IV.K.45); Quality of Case Planning and Services (SEP IV.K.46); Housing for Older Youth Exiting to Non-Permanency (SEP IV.K.47); and Employment/Education for Older Youth Exiting to Non-Permanency (SEP IV.K.48).

captured with QR data.¹² Thus, these measures are not newly addressed in this report covering January to June 2021.

The fourth outstanding *Outcome To Be Achieved* – that workers visit parents twice monthly when a child is in the state’s custody with a permanency goal of reunification (SEP IV.F.28) – has not yet met the SEP’s standard and remains steady at pre-pandemic levels below the established target.

DCF has continued to move forward with the goals outlined in its Strategic Plan¹³ despite setbacks resulting from the pandemic. Highlighted below are updates on specific areas of practice and policy and current DCF initiatives.

Enhancing Child Protection Practice Model to Improve Quality

Between January and June 2021, DCF continued planning and implementation of Solution Based Casework (SBC) in New Jersey. SBC is an evidence-based child welfare practice model that has been shown to impact quality of case practice outcomes as measured by the federal Child and Family Services Review (CFSR). DCF views Solution Based Casework as an operational enhancement to its Case Practice Model. DCF’s work to implement SBC included improving communication among internal and external stakeholders and staff and aligning SBC with its existing Case Practice Model (CPM). In addition, DCF continued developing the skills of its “SBC Champions,” comprised of one staff member from every Local Office, two staff members from CP&P Central Office, and six trainers from the Office of Training and Professional Development (OTPD). In February 2021, the SBC Champions began a 14-week intensive train the trainer program, which consisted of learning that required practical exercises: each SBC Champion was paired with a frontline worker with whom to practice essential SBC skills, supervision, and case consultation. In June 2021, the SBC Champions participated in a three-day intensive training intended to assess their skills and to prepare them to train their assigned staff cohorts. Also in June, DCF launched the SBC statewide training with 84 cohorts and 1,300 trainees. DCF expects that the full implementation of SBC will support workers’ skill

¹² For example, DCF participated in the federal Child and Family Services Review (CFSR) during 2020, which measured practice from June 2019-August 2020, and met or exceeded its Performance Improvement Plan (PIP) targets for 7 out of the 8 domains under review. Performance is based on case reviews completed from September-November 2020. The Children’s Bureau (CB) determined the state met the PIP measurement goals for Risk and Safety Assessment and Management; Stability of Foster Care Placement; Reunification, Guardianship, Adoption or Other Planned Living Arrangement; Needs and Services of Child, Parents, and Foster Parents; Child and Family Involved in Case Planning; Caseworker Visits with Child; and Caseworker Visits with Parents. The PIP target not yet met is Permanency Goal for Child.

¹³ For information about New Jersey’s Strategic Plan, go to: <https://www.nj.gov/dcf/about/strategic.html>

development and success in working with families to support behavior change linked to improved child safety, permanency, and well-being.

Focus on Race Equity

Over the past two years, DCF has prioritized examining the role disproportionality and disparities has played in the lives of Black and Brown families in New Jersey served by DCF. This work began with the creation of the Race Equity Steering Committee (RESC) and a new Office of Diversity, Equity, and Inclusion. During the monitoring period, DCF launched a new race equity webpage,¹⁴ which provides a summary of how the work on race equity fits within its strategic goals, actions taken to further those goals, and a listing of other resources, articles, and webinars.

During the monitoring period, DCF engaged national experts to train its workforce on issues related to race equity. In March 2021, DCF partnered with Stockton University to provide a four-part training on implicit bias to all 6,500 staff and 200 DCF stakeholders. DCF also began facilitated discussions with staff about the history of racism in child welfare, the impact of trauma, and the data demonstrating disproportionate outcomes for children of color in New Jersey. DCF continued its partnership with the Administrative Office of the Courts (AOC), the statewide Children in Court Advisory Committees (CICACs), and the Children in Court (CIC) Race Equity Leadership Team to increase the number of children of color who are placed with and achieve permanency with relatives.

Designing a Primary Prevention Model

As part of efforts to increase availability and accessibility of prevention services and to ultimately reduce the number of children, youth, and families involved with child welfare, DCF began planning for two new leadership offices in the Department: the Office of Housing and the Office of Family Preservation and Reunification. The creation of these two offices is intended to improve internal communication, increase oversight, and strengthen relationships with key external partners and stakeholders in order to build a statewide Primary Prevention Model. The Office of Family and Community Partnerships (FCP) will house these offices – as well as the Office of Early Childhood Services and the Office of Family Support Services – to better integrate primary, secondary, and tertiary prevention programs and services. As part of its efforts to increase the accessibility of primary prevention services, between January

¹⁴ To see DCF's new Race Equity webpage, go to: <https://www.nj.gov/dcf/equity.html>

and June 2021, DCF and its partners chose the Central Jersey Family Health Consortium to provide evidence-based home visiting services to address postpartum needs of families in a pilot program in Mercer County.

Between January and June 2021, DCF expanded its Peer Recovery Support Services (PRSS) program. Peer recovery support services are designed and provided to parents and caregivers by peers with practical experience in the process of recovery and how to sustain it. Although PRSS efforts were suspended because of COVID-19, hiring for PRSS staff resumed during the monitoring period, and virtual and/or in-person PRSS are currently available in all Local Offices through referrals from CP&P staff or the Certified Alcohol and Drug Counselors.

DCF conducted an internal evaluation of PRSS during the monitoring period to better understand participation and access to the supports and resources necessary to initiate and maintain recovery. The evaluation demonstrated that of the 1,376 parents referred to PRSS from July 2018 to December 2020, 50 percent enrolled in the program. Seventy-eight percent of enrollees were female, with an average age of 34 years old, and most had a child welfare goal of maintaining children at home. Services and supports provided by PRSS included crisis management, connections to community resources, relapse prevention skills, and job skills. Parents who successfully completed PRSS were engaged with the program for a median of 11.3 months, while those who left the program were engaged for 3.07 months. Sixty-one percent of participants engaged in substance use treatment, and 33 percent of discharged participants successfully completed treatment while enrolled in PRSS.

Prioritizing Safety

DCF continues its partnership with Collaborative Safety, LLC, a national organization that helps states implement a “safety science” approach to child welfare to reduce the frequency of critical and life-threatening incidents. Between January and June 2021, DCF held monthly multi-disciplinary team meetings with leadership and frontline staff to share information and insights that influence case practice and play a role in critical incidents. DCF also began planning with the Child Fatality and Near Fatality Review Board (CFNFRB) to strengthen collaboration and determine processes for sharing information about cases that are reviewed by the Critical Incident Review Unit in DCF’s Office of Quality (OOQ) using the Collaborative Safety approach. DCF continued to strategize with the National Partnership for Child Safety

(NPCS), a national quality improvement collaborative whose mission is to improve child safety and prevent child maltreatment fatalities.

An important focus of DCF efforts, especially important during the pandemic, is to focus on health, well-being, and morale of staff. Through its new Office of Staff Health and Wellness (OSHW),¹⁵ DCF continued its efforts to improve staff well-being, and leadership met with DCPD Local Office staff to hear directly about their experiences working in the field during the COVID-19 pandemic. Each DCF division identified “wellness ambassadors” who will receive guidance on interventions and activities to share with their colleagues. In June 2021, to assist DCF in identifying practical resources for staff, the OSHW initiated “DCF Real Talk” to provide opportunities for staff to have candid conversations about personal and professional life challenges. OSHW also circulates a monthly calendar with wellness tips, self-guided activities, and maintains a dedicated email address for staff to express needs and concerns.

Integrating Family Voice

Between January and June 2021, DCF’s Youth Council – part of the Office Family Voice (OFV) – met regularly with leadership, external agencies, and stakeholders to ensure that the voices of youth are integral to the development of DCF policies and programs. In addition, the three Youth Council subcommittees implemented the recommendations provided to leadership in the previous monitoring period:

- the *Aging Out and Communications Subcommittee* partnered with units within DCF to update the design and content of the New Jersey Resource Spot – DCF’s website with up-to-date information on resources for young people in New Jersey – to make it more appealing and accessible to young people;
- the *Resource and Kin Parent Training Subcommittee* concluded its review of the Parent Resource for Information, Development and Education (PRIDE) curriculum that is used for pre-service training for new resource parents; and
- the *Sibling and Advocacy Subcommittee* helped to finalize a Request for Proposals (RFP), issued in February 2021, for a Peer-to-Peer (P2P) program that will pair young people entering care with someone with experience in foster care for advice and guidance. In May 2021, DCF and the subcommittee selected three P2P providers. The subcommittee also continued its work with the Office of Communications and the Office of Policy and Regulatory Affairs to finalize a Sibling Bill of Rights.

¹⁵ For more about the Office of Staff Health and Wellness, go to: <https://www.nj.gov/dcf/oshw.html>

Members of the DCF Youth Council presented their accomplishments from the first two years of work on a public briefing in Fall 2021 and announced recruitment for the next cohort of 20-25 youth who will take on leadership positions next year.

Additionally, DCF's *Fatherhood Engagement Committee* (FEC) – which includes fathers, service providers, and stakeholders – continued meeting throughout the monitoring period. The FEC subcommittee of fathers with lived experience from eight New Jersey counties, which expanded its membership to include fathers from Essex County during the monitoring period, also continued meeting virtually and participating in statewide conferences. In May and June 2021, OFV, the FEC, and the subcommittee worked to finalize recommendations on improving engagement with fathers involved with DCF. Some of the key recommendations were (1): updating policies regarding contact between fathers and their children; (2) expanding and/or creating prevention programs for fathers; and (3) ending the collection of child support from parents whose children are in CP&P custody.

Improving New Jersey's Children's System of Care and Addressing Adverse Childhood Experiences (ACEs)

Work to redesign New Jersey's System of Care (CSOC), which provides access to mental and behavioral health services for all of New Jersey's children and youth, continued during the monitoring period. The COVID-19 pandemic delayed the release of the report that was the result of the task force that convened in December 2019 – consisting of the Center for Health Care Strategies (CHCS), CSOC and sixteen stakeholders from across New Jersey – to design ways to better integrate behavioral and physical health services for children and youth. In August 2021, DCF convened a stakeholder advisory group meeting to outline FY 2022 priorities for CSOC and to review the final report.¹⁶ Key priorities include: (1) collaborating with partners in health and early childhood services to coordinate services focused on early identification of children at risk of or experiencing developmental delays, trauma, and addressing other social determinants of health; (2) increasing the availability of evidence-based and best practice interventions and services; and (3) improving access to CSOC services and supports by addressing disparities across racial, socioeconomic, linguistic, and cultural lines, as well as access for children with intellectual and developmental disabilities.

¹⁶ To view DCF's CSOC Task Force materials and final report, go to:
https://www.nj.gov/dcf/about/divisions/dcsc/csoc_taskforce.html.

Working with an external consultant over the course of several monitoring periods, DCF has been revising the CSOC rate structure so that it is based on the market costs of services delivery. Through this rate increase, DCF aims to support the development of service capacity to meet demand, assist agencies to provide competitive wages, and encourage quality service. In August 2021, the federal Centers for Medicare and Medicaid Services (CMS) approved the DCF new rate setting method, allowing DCF to implement the increased rates. The rate increase, which is retroactive to January 1, 2021, represents a 20 percent increase in the annualized budget authority across the CSOC Medicaid State Plan and waiver services, much of which had not been adjusted in over 15 years. New Jersey's FY 2022 state budget provided for \$108 million to support the rate increase.

For the past two years, DCF has been pursuing work supported by a federal Substance Abuse and Mental Health Services Administration (SAMHSA) grant entitled a *Promising Path to Success*. This grant, which continues through December 2022, supports ongoing training in the Nurtured Heart Approach and its Six Core Strategies.¹⁷ The Nurtured Heart Approach is a strengths-based behavior management strategy based on positive reinforcement and fair and consistent boundaries for “high intensity” children, particularly those with ADHD, Reactive Attachment Disorder, or Autism Spectrum Disorder. The goal of the grant is to provide trauma-informed coaching in *Promising Path to Success* to CP&P and CSOC staff, DCF's Office of Education (OOE) staff and OOE schools, licensed resource and kinship families, 15 Care Management Organizations (CMOs), 15 Family Support Organizations (FSOs), 15 Mobile Response and Stabilization Services (MRSS) providers, and 21 county-based Children's Interagency Coordinating Councils (CIACC). The grant is anticipated to improve engagement with at least 60,000 youth and young adults over the course of the four-year grant period.

Between January and June 2021, the *Promising Path to Success* work continued, providing virtual coaching and training to staff and DCF partners. Rutgers University Behavioral Healthcare coaches continued their coaching and training with the partnered organizations listed above as well as three out-of-home treatment schools. DCF also partnered with the DOE to bring trauma-informed and Nurtured Heart Approach resources, training, and support to certain New Jersey public schools. In total, during the monitoring period the *Promising Path to Success* team provided

¹⁷ To read about the Nurtured Heart Approach, go to: <https://childrenssuccessfoundation.com/about-nurtured-heart-approach/>

coaching and training and Nurtured Heart Approach resources to almost 3,000 individuals, including resource families and CP&P staff.

DCF also continued its work to address Adverse Childhood Experiences (ACEs) and how they impact children, youth, and families in New Jersey.¹⁸ DCF's training curriculum, called "Connections Matter," which was adapted to a virtual platform between March and June 2020, stresses the importance of fostering healthy connections to develop healthy brains, supportive relationships and thriving communities. Between January and June 2021, DCF and the Connections Matter training network reached 546 people.

Beginning in June 2020, funded by the New Jersey ACEs Funders Collaborative, DCF has hosted a national expert on ACEs who has led the Office of Resilience (OOR), tasked with developing and implementing a statewide strategy to address the impact of ACEs.¹⁹ Between January and June 2021, the OOR began implementing New Jersey's ACEs Action Plan, released to the public in February 2021.²⁰ The Action Plan outlines five core strategies to address the impact of ACEs in New Jersey: (1) achieve trauma-informed and healing-centered state designation; (2) conduct an ACEs public awareness and mobilization campaign; (3) maintain community-driven policy and funding priorities; (4) provide cross-sector ACEs training; and (5) promote trauma-informed/healing-centered services and supports. In addition, the OOR increased efforts to engage and expand connections to communities across the state. During the monitoring period OOR also launched the ACEs Awareness Campaign, Actions4ACEs,²¹ a new statewide campaign to increase understanding of ACEs and to raise awareness of available resources and encourage trauma-informed trainings.²² OOR and DCF leadership also participated in multiple virtual webinars, press releases, and roundtable discussions about ACEs and New Jersey's efforts to expand engagement in healing-centered practices among service providers, educators, and law enforcement.

Between January and June 2021, OOR and the New Jersey Education Association provided monthly presentations about ACEs to various stakeholders to create a common language and to further understanding statewide about the impact of

¹⁸ For more about ACEs go to: <https://www.nj.gov/dcf/news/publications/aces.html>

¹⁹ A partnership among the Burke Foundation, the Nicolson Foundation, the Turrell Fund, and DCF.

²⁰ For more information on the Office of Resilience and New Jersey's 2021 Statewide Action Plan, go to: <https://www.nj.gov/dcf/documents/NJ.ACEs.Action.Plan.2021.pdf>

²¹ A collaboration of the Burke Foundation, the Nicolson Foundation, the Turrell Fund, New Jersey Education Association, DCF and the Office of Resilience.

²² For more information on Actions4ACEs, go to: <https://actions4aces.com/>

childhood trauma. Finally, OOR worked with New Jersey's indigenous populations to address ACEs, including meeting with New Jersey's Ramapough Lenape Nation and the Native American Commission.

Increasing Kinship Placement and Maintaining an Adequate Pool of Resource Homes

Between January and June 2021, DCF continued to pursue its ambitious target of placing 60 percent of children who enter care with kin within the first seven days of removal from their homes, and 80 percent of children placed with kin by the first 30 days. During this period, CP&P placed 68 percent of children entering care with kin within 30 days, a notable achievement. DCF's resource family pilot in Ocean and Monmouth counties to increase placement with kin and strengthen supports to resource and kin parents, which began in February 2020, concluded in June 2021. Prompted by findings from the Ocean and Monmouth pilots that specialized functions were a benefit to staff to organize workflow and maximize staffs' skill set, leadership subsequently conducted a statewide staffing analysis of its resource units and concluded that resource units with specialized functions should be established statewide. The new resource unit model consists of four specialized functions: (1) resource family support workers who meet regularly with kinship and non-relative caregivers; (2) resource family trainers, located in each area office to facilitate more efficient training schedules; (3) resource family home study writers; and (4) resource family engagement specialists – an expansion of the resource family facilitator function – who facilitate placements, help with licensing kinship families, and generally support the Local Office in family finding and assisting resource families. The rollout of those units is expected to begin in January 2022.

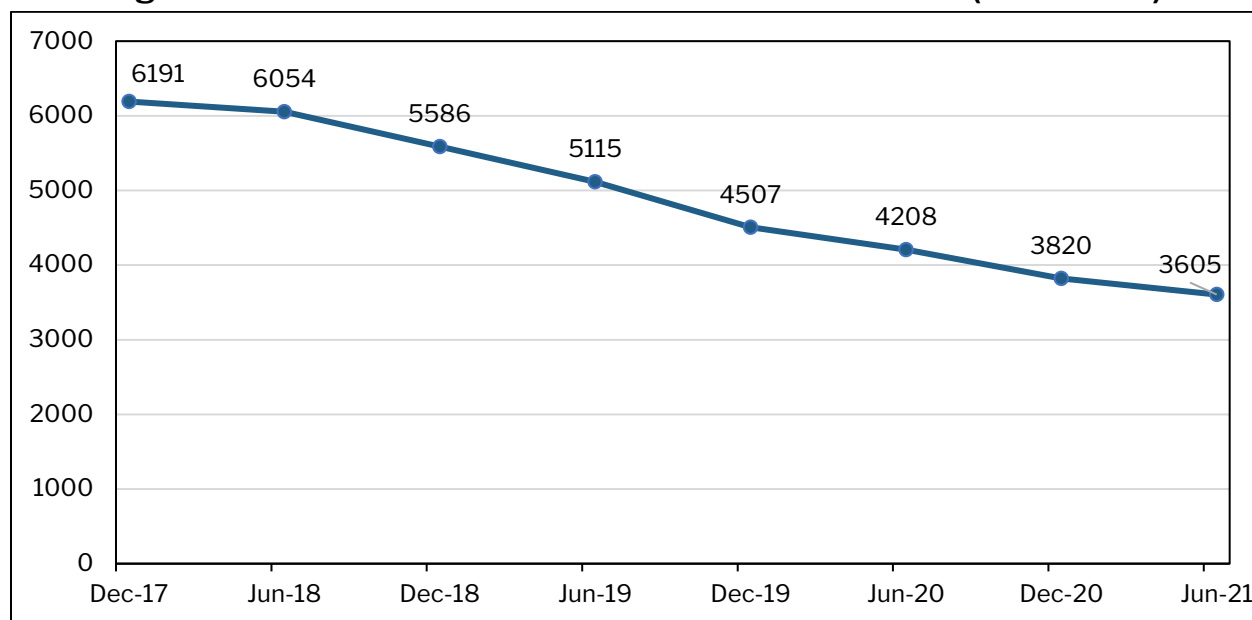
As part of its work to promote and support kinship placement, DCF and Focus Child, a national child welfare consultant, provided additional training and tools to staff. This training is expected to become part of the foundational courses for all new staff. In June 2021, 26 CP&P and the Office of Training and Professional Development (OTPD) staff were trained; these staff will in turn conduct statewide trainings, which are anticipated to be completed in 2022.

In November 2020, to better facilitate interstate kinship placements for children and youth in state custody living in New York and New Jersey, DCF announced a new interstate agreement whereby each state could initiate temporary emergency placement referrals and, within seven days, complete temporary home assessments,

local background checks, and FTM planning. This agreement, which went into effect in April 2021, is applicable to New Jersey counties of Bergen, Essex, Hudson, Middlesex, and Union, and the New York counties of Bronx, Kings, New York, Queens, and Richmond. The receiving state coordinates supervision and services and the sending state is responsible for medical and financial supports or subsidies. Once the emergency placement is complete, a full Interstate Compact on the Placement of Children (ICPC) is processed. A twelve-month pilot is underway to evaluate the success of the agreement and to make any necessary adjustments to operations. A similar border agreement is being discussed by representatives from Philadelphia, PA and DCF.

Despite challenges brought about by the COVID-19 pandemic, DCF continues to maintain an adequate pool of placement resource homes and group settings to meet the needs of children in out-of-home care. As of June 30, 2021, 3,605 children ages birth to 23 were in out-of-home placement, continuing the decline in foster care census over the last few years (see Figure 1).²³

Figure 1: Number of Children in Out-of-Home Placement (2017-2021)



Source: DCF data

²³ During the pandemic, DCF placed a moratorium on automatically closing youths' cases at age 21 so that young adults could continue to receive assistance and services beyond their 21st birthday. The initial extension affected young adults turning 21 after March 1, 2020 and was extended through December 31, 2021. To read more information, go to: https://www.nj.gov/dcf/news/press/2020/approved/201116_fundsforfosteryouth.html

Of the 3,605 children in out-of-home placement, 3,267 (91%) were placed in family-like settings: 1,648 (46%) in unrelated resource family homes, and 1,619 (45%) in kinship homes. The ten percent of children not residing in family-like settings consisted of 276 children (8%) in group and residential settings facilities, and 62 children (2%) in independent living programs.

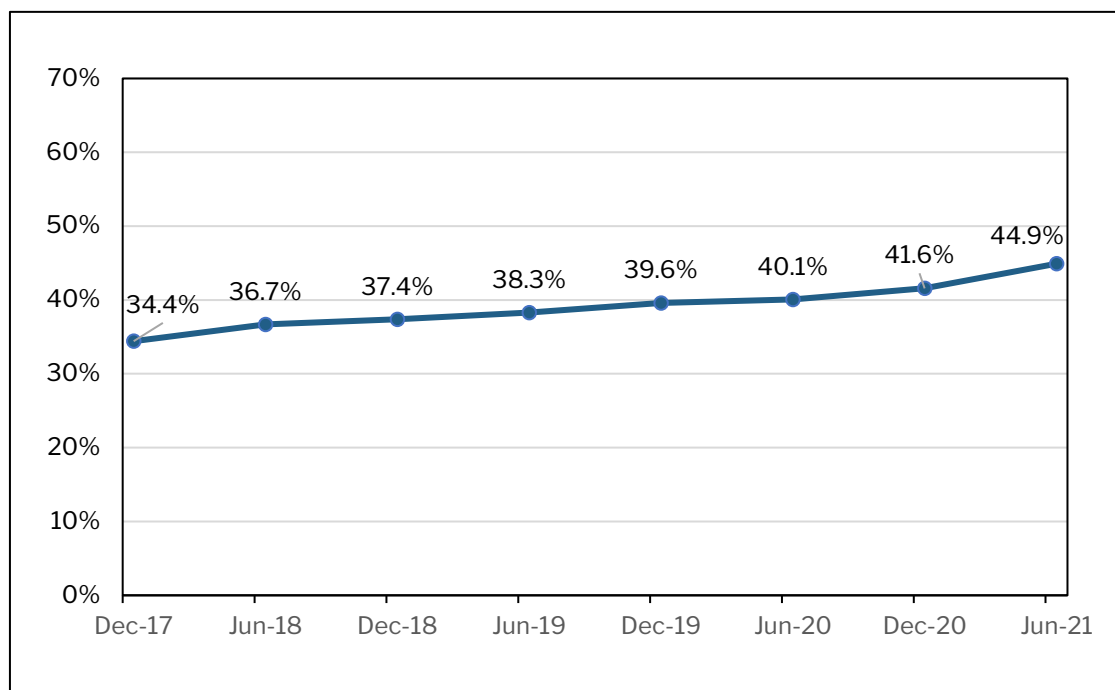
Recruitment and licensing of new resource homes were suspended in March 2020 due to the COVID-19 pandemic. In July 2020, DCF renewed licensing operations, and non-kin recruitment resumed in May 2021. While DCF continues to report the availability of enough resource homes to meet the need, challenges remain with finding homes for large sibling groups, adolescents, and children with special medical, developmental, and behavioral health needs.

As of June 30, 2021, there were a total of 3,990 licensed resource family homes in the state, with a total bed capacity for 8,864 children. Of the total number of resource family homes, 1,396 (35%) were kinship homes and 2,594 (65%) were non-kinship homes. As described above, DCF continues to be committed to dramatically increasing the number of kinship homes available in the state and devoting resources to supporting the success of those placements.

Between January and June 2021, DCF licensed 394 new family homes (both kinship and unrelated); this is compared with 347 newly licensed resource homes in the previous monitoring period.

Of the newly licensed resource family homes in this monitoring period, 107 (27%) were kinship homes – approximately half as many as were licensed in the previous monitoring period – and 287 (73%) were unrelated foster homes. To compare with the period from January to June two years ago, before the onset of the COVID-19 pandemic, over 350 (58%) of the newly licensed homes were kinship homes. However, even though the proportion of newly licensed kin homes is lower than in the past, the percentage of children in out-of-home care placed with kin continues to rise, as seen in Figure 2.

Figure 2: Percentage of Children in Kinship Placements out of All Children in Out-of-Home Care (2017-2021)



Source: DCF data

Between January and June 2021, 614 resource family homes were closed: 314 (51%) were kinship homes and 300 (49%) were unrelated foster homes. The primary reasons for resource home closures were provider's health or age circumstances (32%), adoption finalization (23%), relative placement no longer needed (20%);²⁴ kinship legal guardianship finalized (7%).

DCF also continues to focus on recruiting homes for large sibling groups as described further in Section V.F *Placement*.

²⁴ The "relative placement no longer needed" category includes instances where children are reunified and the foster parents (usually a relative or family friend) request to voluntarily close their home. This category can also include other specific instances, such as an interstate change of placement, a court-ordered change of placement, or when a home with an administratively restricted license closes when the children are reunified or leave for another placement.

Accomplishments and Challenges in Specific Areas of Practice Related to SEP Outcomes

Family Team Meetings (FTMs)

FTMs remain an integral component of DCF's case practice and are an essential process for bringing families, youth, providers, and formal and informal supports together to exchange information, participate in case planning, coordinate and follow up on services, and examine and track progress toward accomplishing case plan goals. During the COVID-19 pandemic, many FTMs occurred virtually, though for the purposes of SEP monitoring, virtual FTMs were considered and counted as if they were in-person.²⁵ Performance on all FTM requirements have largely rebounded to pre-pandemic levels this monitoring period. Performance on the requirement to hold an initial FTM within 45 days of a child entering foster care (SEP IV.B.16), the requirement to hold three additional FTMs within the first 12 months of a child entering placement (SEP IV.B.17), and the requirement to hold two subsequent FTMs after the first 12 months of placement for children with a permanency goal other than reunification (SEP IV.B.19) each dipped in compliance in one or two months, but performance in other months remained consistently high.

Maintaining Contact with Family Through Visits

Maintaining bonds and contact through visits between children in foster care and their workers, parents, and siblings, an essential element of successful child welfare practice, continued to be challenging as the COVID-19 pandemic posed concerns for in-person contacts. In-person visits resumed during this monitoring period, though some visits still occurred virtually, in compliance with the federal Children's Bureau guidelines.²⁶ Performance on all visit requirements have largely rebounded to pre-pandemic levels this monitoring period. Performance with respect to the requirement that workers visit with parents twice monthly when a child is in the state's custody with a permanency goal of reunification (SEP IV.F.28) continues to remain below the SEP's standard as an *Outcome To Be Achieved*, even when accounting for exceptions to the visits requirement and the allowance of virtual

²⁵ DCF's SACWIS data system does not typically specify whether an FTM was held in person or virtually. As a result, any estimate of virtual FTMs is likely to be an undercount. See Section B. *Family Team Meetings*.

²⁶ DCF reported that across all measures and all months of the monitoring period, an average of 90% of visits were conducted in person.

visits.²⁷ The requirement that siblings not placed together visit each other at least once monthly (SEP IV.F.31) improved from the prior monitoring period, when it was not met in any month. Over the course of this monitoring period, children in custody visited their siblings with whom they are not residing at least monthly between 83 and 87 percent of the time (the standard is 85%).

Services to Older Youth

DCF has taken numerous steps to support the young adult population throughout the COVID-19 pandemic, including extending the moratorium on case closure for youth in foster care who reached the age of 21 through September 30, 2021 (which was previously extended from December 2020 to March 2021), and extending contracted housing and life skills services for those youth. During the monitoring period, DCF launched a public awareness campaign focused on the services and supports available to 18-27 year-olds through the federal government's Supporting Foster Youth and Families through the Pandemic Act.²⁸

Between January and June 2021, as a result of listening sessions with the Youth Council, contracted adolescent providers, and CP&P staff, DCF decided to provide payments to assist young people with supplemental federal funds. Youth ages 18-22 with an open CP&P case received a one-time payment of \$700, youth ages 18-22 with a recently closed CP&P case received a one-time payment of \$1,000, and youth ages 22-27 received a one-time payment of up to \$1,000 for identified needs.

In early 2020, DCF was awarded matching funds through Youth Villages, a national non-profit, to implement the evidence-based LifeSet program, an intensive case management and life skills service for older youth in foster care. In October 2020, four agencies – Acenda, Care Plus, Catholic Charities Diocese of Metuchen, and Preferred Behavioral Health – began serving young people. LifeSet specialists carry caseloads of 8 to 10 young people with whom they meet weekly and hold sessions about increasing independent living skills and navigating the transition to adulthood. Services are highly individualized and intended to suit the strengths and meet the needs of each young person. As of September 2021, 65 young people have completed the program, and 187 young people have been served in some capacity. The evaluation of the contract is in progress.²⁹

²⁷ Valid exceptions are determined using a review of a sample from the universe of all visits in one month. Examples of valid exceptions include: the visit is not required due to a court order, the parent is missing for more than 6 months despite worker efforts to locate, or the parent has moved out of state and an in-person visit is not geographically feasible to arrange.

²⁸ Division X of P.L. 116-260

²⁹ To learn more about New Jersey's LifeSet program, go to: <https://www.nj.gov/dcf/adolescent/lifaset.html>

As part of the federal John H. Chafee Foster Care Program for Successful Transition to Adulthood, the Chafee Advisory Group continued to meet and obtain feedback on the Chafee 2020-2024 Strategic Plan.^{30,31}

Continuous Quality Improvement

At the onset of COVID-19, DCF suspended many of its former Continuous Quality Improvement (CQI) activities, including its Qualitative Reviews and ChildStat sessions, and has begun the planning for and the implementation of new CQI processes. Perhaps slowed down by the pandemic, these new processes are largely still in the planning stage. The new CQI processes are intended to (1) be informed by implementation science; (2) occur at the local, area and division level; and (3) benefit from rapid cycle information sharing informed by actionable data. Key to the new CQI processes is the use of Solution Based Case Planning, a case management approach to assessment, case planning, and ongoing casework, a strategy that helps staff work with families to develop case plans that are customized, behavior-focused and family centered. In addition, various targeted reviews are planned, including its bi-annual Investigations Review and a review of its Institutional Abuse and Investigation Unit planned for September 2022.

DCF launched its Office of Monitoring in July 2021, whose purpose is to improve DCF's monitoring of its network of contracted services.³² The office is expected to function independently from DCF's program offices (CSOC, Family and Community Partnerships, and Division on Women) to develop and implement protocols to assess and enhance the quality of services delivered by DCF's contracted providers. The Office of Monitoring will also be separate from the Office of Contract Administration, which will be the sole office responsible for administering contracts and monitoring compliance with State and Federal administrative requirements and compliance with contractual requirements (such as expenditure reports, fiscal audits, maintenance of required staffing patterns, etc.). The goals for the new Office of Monitoring are to (1) ensure clear performance standards for DCF's array of contracted public services; (2) build transparent, mixed-methods monitoring approaches such as interviews, site visits, record reviews, and analysis of performance metrics; (3) create and maintain consistent feedback pathways between providers, constituents, and communities;

³⁰ To see New Jersey's 2020-2024 John H. Chafee Foster Care Program for Successful Transition to Adulthood Plan, go to: <https://www.nj.gov/dcf/adolescent/NJ-Chafee-Plan-final.pdf>

³¹ To see meeting agendas and minutes, go to: <https://www.nj.gov/dcf/providers/boards/chafee.html>

³² To read DCF's concept paper "Quality Service, Strong Outcomes" about the new Office of Monitoring, go to: <https://www.nj.gov/dcf/providers/contracting/DCF-monitoring-concept-paper-7.7.2021.pdf>

and (4) more effectively deploy DCF resources based on information gathered through monitoring activities using CQI processes.

More details on DCF's CQI processes are described in Section V.N, *Accountability Through Qualitative Review and the Production and Use of Accurate Data*.

Budget

Governor Murphy's FY 2022 budget for DCF, approved on June 29, 2021 and effective July 1, 2021, totals \$1.259 billion, an increase of \$40 million or 3.3 percent over the FY 2021 adjusted appropriation of \$1.219 billion. The budget represents an additional \$62.8 million for CSOC to rebalance out-of-home and in-community service rates to better serve children with emotional and behavioral health care needs.³³ In August 2021, CSOC received approval from the Centers for Medicare and Medicaid Services (CMS) for its State Plan amendment, which represents a 20% increase in annualized budget authority across CSOC Medicaid State Plan and waiver services. DCF reports the funding will stabilize CSOC, support the development of capacity to meet demand, and ensure that agencies can provide competitive wages for staff and provide quality services. The State's additional support for the Children's System of Care is especially critical in the aftermath of the COVID-19 pandemic because all national indicators suggest an increase in need and demand for mental and behavioral services for children and youth. The FY 2022 budget also represents an additional \$6 million in domestic violence services and \$6 million in sexual violence related services.

More on the budget is described in Section V.P *Budget*.

This report provides specific data and the Monitor's observations and conclusions as to each of the SEP requirements. As demonstrated by the data included herein, DCF continues its steady march toward meeting the requirements of the SEP and the needs of children, youth, and families in New Jersey.

³³ To read the DCF appropriation in the FY 2022 State Budget, go to:
<https://www.nj.gov/treasury/omb/publications/22budget/pdf/FY22GBM.pdf>

III. CHILD AND FAMILY OUTCOMES AND CASE PRACTICE PERFORMANCE MEASURES

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

Many of the measures are assessed through a review of data from NJ SPIRIT³⁴ and SafeMeasures,³⁵ and, in some areas, these data continue to be independently validated by the Monitor. Data are also provided through DCF's work with Rutgers University, which assists with data analysis. With few exceptions, performance data provided in this report are as of June 2021.

³⁴ NJ SPIRIT is New Jersey's Statewide Automated Child Welfare Information System (SACWIS), a case management and financial system designed to support the daily work of caseworkers and supervisors within DCF.

³⁵ SafeMeasures is a data warehouse and analytical tool that allows tracking of critical child welfare indicators by worker, supervisor, Local Office, county and statewide. It is used by different levels of staff to track, monitor and analyze performance and trends in case practice and targeted measures and outcomes.

**Table 1: *Charlie and Nadine H.* Child and Family Outcome and Case Practice Performance Measures
(Summary of Performance as of June 30, 2021)**

Table 1A: To Be Achieved					
SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ³⁶	June 2021 Performance ³⁷	Requirement Fulfilled (Yes/No) ³⁸
<i>Family Teaming</i>					
Quality of Teaming (IV.B.20)	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.	62% of cases rated acceptable for the QR indicator <i>teamwork and coordination</i> (CY 2019).	CY 2020 data not available. QRs suspended during the COVID-19 pandemic.	CY 2021 data not available. QRs suspended during the COVID-19 pandemic.	Unable to Determine ³⁹

³⁶ In some instances where the Monitor does not have December 2020 data, the most recent data available are included.

³⁷ In some instances where the Monitor did not report mid-year data, the most recent annual data available are included.

³⁸ “Yes” indicates that, in the Monitor’s judgment, based on presently available information, DCF has fulfilled its obligations regarding the SEP standard. “No” indicates that, in the Monitor’s judgment, DCF has not fulfilled its obligation regarding the SEP standard.

³⁹ The qualitative review process was suspended in March 2020 and as a result there are no new data for Educational Needs (III.G.11); Quality of Case Plans (SEP IV.D.23); Quality of Teaming (SEP IV.B.20); Services to Support Transitions (SEP IV.J.44), and Quality of Case Planning and Services (SEP IV.K.46).

Table 1A: To Be Achieved					
SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ³⁶	June 2021 Performance ³⁷	Requirement Fulfilled (Yes/No) ³⁸
Case and Service Planning					
Quality of Case Plans (IV.D.23)	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.	58% of cases rated acceptable for both QR indicators <i>child and family planning process</i> and <i>tracking and adjusting</i> (CY 2019). ⁴⁰	CY 2020 data not available. QRs suspended during the COVID-19 pandemic.	CY 2021 data not available. QRs suspended during the COVID-19 pandemic.	Unable to Determine ⁴¹
Visits					
Caseworker Contacts with Family When Goal is Reunification (IV.F.28)	90% of families will have at least twice-per-month, face-to-face contact with their caseworker when the permanency goal is reunification.	46% of applicable parents of children in custody with a goal of reunification had at least two face-to-face visits with a caseworker in June. Monthly range during January – June 2020 monitoring period: 27 to 82%.	83% of applicable parents of children in custody with a goal of reunification had at least two face-to-face visits with a caseworker in December. Monthly range during July – December 2020 monitoring period: 49 to 83%.	83% of applicable parents of children in custody with a goal of reunification had at least two face-to-face visits with a caseworker in June. Monthly range during January – June 2021 monitoring period: 82 to 86%. ^{42,43}	No

⁴⁰ From January to December 2019, 58% (112 of 193) of applicable cases reviewed were rated acceptable for both the *child and family planning process* and the *tracking and adjusting* indicators; 62% (120 of 193) of cases were rated acceptable for *child and family planning process*; 73% (141 of 193) of cases were rated acceptable for *tracking and adjusting*.

⁴¹ The qualitative review process was suspended in March 2020 and as a result there are no new data for Educational Needs (III.G.11); Quality of Case Plans (SEP IV.D.23); Quality of Teaming (SEP IV.B.20); Services to Support Transitions (SEP IV.J.44), and Quality of Case Planning and Services (SEP IV.K.46).

⁴² Monthly performance for this measure is as follows: January, 82%; February, 84%; March, 86%; April, 85%; May, 83%; June, 83%. Reported performance accounts for exceptions to the visits requirement.

⁴³ DCF validated a sample of cases from March 2021 and found that exceptions were appropriately applied and documented in 74% of cases. Thus these data reflect exclusions from the universe of instances in which exceptions to the requirement for worker visits with parents were appropriately applied and documented. The Monitor did not independently validate this sample.

Table 1A: To Be Achieved					
SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ³⁶	June 2021 Performance ³⁷	Requirement Fulfilled (Yes/No) ³⁸
<i>Services to Support Transition</i>					
Services to Support Transition (IV.J.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.	74% of cases rated acceptable for the QR indicator <i>successful transitions</i> (CY 2019). ⁴⁴	CY 2020 data not available. QRs suspended during the COVID-19 pandemic.	CY 2021 data not available. QRs suspended during the COVID-19 pandemic.	Unable to Determine ⁴⁵

⁴⁴ From January to December 2019, 74% (63 of 85) of applicable cases reviewed were rated acceptable for the *successful transitions* indicator.

⁴⁵ The qualitative review process was suspended in March 2020 and as a result there are no new data for Educational Needs (III.G.11); Quality of Case Plans (SEP IV.D.23); Quality of Teaming (SEP IV.B.20); Services to Support Transitions (SEP IV.J.44), and Quality of Case Planning and Services (SEP IV.K.46).

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
<i>Investigations</i>					
Institutional Abuse Investigations Unit (IAIU) (III.A.1)	80% of IAIU investigations will be completed within 60 days.	85% of IAIU investigations in June were completed within 60 days.	78% of IAIU investigations in December were completed within 60 days.	84% of IAIU investigations in June were completed within 60 days.	Yes
Timeliness of Investigation Completion (60 days) (IV.A.13)	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.	81% of all investigations in May were completed within 60 days. Monthly range during December 2019 – May 2020 monitoring period: 81 to 93%.	89% of all investigations in November were completed within 60 days. Monthly range during June – November 2020 monitoring period: 85 to 92%.	86% of all investigations in May were completed within 60 days. Monthly range during December 2020 – May 2021 monitoring period: 86 to 90%. ^{49,50}	Yes

⁴⁶ In some instances where the Monitor did not report mid-year data, the most recent annual data available are included.

⁴⁷ In some instances where the Monitor does not have December 2020 data, the most recent data available are included.

⁴⁸ “Yes” indicates that, in the Monitor’s judgment based on presently available information, DCF has fulfilled its obligations regarding the requirement under the SEP. The Monitor has also designated “Yes” for a requirement where DCF has met or is within one percentage point of the SEP standard or there are a small number of cases causing the failure to meet the SEP standard.

⁴⁹ Due to the time lag of this measure, the Monitor and DCF have altered the period of review, so December 2020 data are included for this period and June 2021 data will be included in the next monitoring report.

⁵⁰ Monthly performance for this measure is as follows: December, 90%; January, 90%; February, 90%; March, 88%; April, 89%; May, 86%.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance⁴⁶	June 2021 Performance⁴⁷	Requirement Maintained (Yes/No)⁴⁸
Timeliness of Investigation Completion (90 days) (IV.A.14)	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.	94% of all investigations in May were completed within 90 days. Monthly range during December 2019 – May 2020 monitoring period: 94 to 97%.	97% of all investigations in November were completed within 90 days. Monthly range during June – November 2020 monitoring period: 96 to 97%.	96% of all investigations in May were completed within 90 days. Monthly range during December 2020 – May 2021 monitoring period: 96 to 97%. ^{51,52}	Yes
Quality Investigations (IV.A.15)	85% of investigations shall meet the standards for quality investigations. The Monitor, in consultation with the parties, shall determine appropriate standards for quality investigations.	91% of investigations met quality standards in a February 2020 review of a statistically significant sample of investigations completed in October 2019.	The next review will be conducted in early 2022 for investigations completed in October 2021.	The next review is anticipated to be conducted in March 2022 for investigations completed in October 2021. ⁵³	N/A

⁵¹ Due to the time lag of this measure, the Monitor and DCF have altered the period of review, so December 2020 data are included for this period and June 2021 data will be included in the next monitoring report.

⁵² Monthly performance for this measure is as follows: December, 97%; January, 96%; February, 97%; March, 96%; April, 97%; May, 96%.

⁵³ DCF's Investigation Case Record Review is typically conducted every two years.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
<i>Family Teaming</i>					
Initial Family Team Meeting (IV.B.16)	80% of children newly entering placement shall have a family team meeting before or within 45 days of placement.	64% of children newly entering placement in June 2020 had a FTM within 45 days. Monthly range during January – June 2020 monitoring period: 58 to 94%.	82% of children newly entering placement in December 2020 had a FTM within 45 days. Monthly range during July – December 2020 monitoring period: 82 to 91%.	69% of children newly entering placement in June 2021 had a FTM within 45 days. Monthly range during January – June 2021 monitoring period: 69 to 89%. ⁵⁴	Yes ⁵⁵
Subsequent FTMs within 12 months (IV.B.17)	80% of children will have three additional FTMs within the first 12 months of the child coming into placement.	72% of children who entered placement in June 2019 had three or more additional FTMs within the first 12 months. Monthly range during January – June 2020 monitoring period: 65 to 93%.	80% of children who entered placement in December 2019 had three or more additional FTMs within the first 12 months. Monthly range during July – December 2020 monitoring period: 76 to 85%.	86% of children who entered placement in June 2021 had three or more additional FTMs within the first 12 months. Monthly range during January – June 2021 monitoring period: 75 to 93%. ⁵⁶	Yes ⁵⁷

⁵⁴ Monthly performance for this measure is as follows: January, 85%; February, 87%; March, 86%; April, 89%; May, 87%; June, 69%. Reported performance accounts for valid exceptions to the FTM requirement. The Monitor and DCF reviewed all 24 cases in which there was documentation of an exception to the FTM requirement and excluded from these data all instances (for each month) in which they determined that an exception was appropriately used.

⁵⁵ The Monitor considers the decline in performance to be temporary and/or insubstantial.

⁵⁶ Monthly performance for this measure is as follows: January, 83%; February, 93%; March, 90%; April, 77%; May, 75%; June, 86%. Reported performance accounts for valid exceptions to the FTM requirement. The Monitor and DCF reviewed all 30 cases in which there was documentation of an exception to the FTM requirement and excluded from these data all instances (for each month) in which they determined that an exception was appropriately used.

⁵⁷ The Monitor considers the decline in performance to be temporary and/or insubstantial.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
Subsequent FTMs after 12 months – Reunification Goal (IV.B.18)	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.	74% of children who entered placement before June 2019 (but still have a goal of reunification) had three or more additional FTMs in the most recent 12 months. Monthly range during January – June 2020 monitoring period: 63 to 87%.	96% of children who entered placement before December 2019 (but still have a goal of reunification) had three or more additional FTMs in the most recent 12 months. Monthly range during July – December 2020 monitoring period: 44 to 97%.	88% of children who entered placement before June 2020 (but still have a goal of reunification) had three or more additional FTMs in the most recent 12 months. Monthly range during January – June 2021 monitoring period: 85 to 95%. ⁵⁸	Yes ⁵⁹
Subsequent FTMs after 12 months – Other than Reunification Goal (IV.B.19)	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.	89% of children who entered placement before June 2019 (and have a goal other than reunification) had two or more FTMs in the most recent 12 months of placement. Monthly range during January – June 2020 monitoring period: 81 to 96%.	88% of children who entered placement before December 2019 (and have a goal other than reunification) had two or more FTMs in the most recent 12 months of placement. Monthly range during July – December 2020 monitoring period: 84 to 88%.	88% of children who entered placement before June 2020 (and have a goal other than reunification) had two or more FTMs in the most recent 12 months of placement. Monthly range during January – June 2021 monitoring period: 86 to 94%. ⁶⁰	Yes

⁵⁸ Monthly performance for this measure is as follows: January, 95%; February, 85%; March, 92%; April, 93%; May, 87%; June, 88%. There was only one documented exception to the FTM requirement of this measure during the monitoring period. Based on the joint review of exceptions, that exception was not deemed valid, and thus no exclusions to the universe were applied to this measure.

⁵⁹ The universe for this measure is small and thus more susceptible to fluctuations.

⁶⁰ Monthly performance for this measure is as follows: January, 93%; February, 92%; March, 91%; April, 86%; May, 94%; June, 88%. Reported performance accounts for valid exceptions to the FTM requirement. DCF reviewed all 4 cases in which there was documentation of an exception to the FTM requirement and excluded from these data all instances (for each month) in which they determined that an exception was appropriately used.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
Needs Assessment					
Needs Assessment (IV.C.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.	DCF received the first group of New Jersey counties' reports using the new needs assessment process in September and October 2020. The second group of reports are due by the end of 2020.	Both groups of county HSACs (from all 21 counties), with technical assistance from DCF, completed their reports, including results from surveys, focus groups, and key informant interviews. The priorities most identified were housing, behavioral health and mental health services for adults and children, and substance use disorder services.	In August 2021, DCF released the Human Services Advisory Council (HSACs) Needs Assessment Synthesis Report, ⁶¹ in which the Institute for Families at Rutgers School of Social Work synthesizes the HSACs needs assessment reports from all 21 counties.	Yes

⁶¹ The HSAC Needs Assessment Synthesis Report can be found at <https://www.nj.gov/dcf/news/HSAC.Synthesis.Report-June.2.2021.pdf>

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
Case and Service Planning					
Initial Case Plans (IV.D.22)	95% of initial case plans for children and families shall be completed within 30 days.	84% of children entering care in June 2020 had case plans developed within 30 days. Monthly range during January – June 2020 monitoring period: 84 to 96%.	87% of children entering care in December 2020 had case plans developed within 30 days. Monthly range during July – December 2020 monitoring period: 84 to 96%.	85% of children entering care in June 2021 had case plans developed within 30 days. Monthly range during January – June 2021 monitoring period: 85 to 98%. ⁶²	Yes ⁶³
Timeliness of Current Plans (III.C.6)	95% of case plans for children and families will be reviewed and modified no less frequently than every six months.	97% of case plans in June 2020 were reviewed and modified as necessary at least every six months. Monthly range during January – June 2020 monitoring period: 92 to 97%.	97% of case plans in December 2020 were reviewed and modified as necessary at least every six months. Monthly range during July – December 2020 monitoring period: 93 to 97%.	99% of case plans in June 2021 were reviewed and modified as necessary at least every six months. Monthly range during January – June 2021 monitoring period: 97 to 99%. ⁶⁴	Yes
Caseloads					
Supervisor/ Worker Ratio (III.B.2)	95% of offices will have sufficient supervisory staff to maintain a 5 worker to 1 supervisor ratio.	100% of Local Offices have sufficient supervisory staff.	100% of Local Offices have sufficient supervisory staff.	100% of Local Offices have sufficient supervisory staff.	Yes

⁶² Monthly performance for this measure is as follows: January, 97%; February, 93%; March, 98%; April, 93%; May, 85%; June, 85%.

⁶³ The Monitor considers the decline in performance to be temporary and/or insubstantial.

⁶⁴ Monthly performance on this measure is as follows: January, 97%; February, 98%; March, 98%; April, 99%; May, 99%; June, 99%.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance⁴⁶	June 2021 Performance⁴⁷	Requirement Maintained (Yes/No)⁴⁸
IAIU Investigators Caseload (III.B.3)	95% of IAIU investigators will have (a) no more than 12 open cases, and (b) no more than eight new case assignments per month.	100% of IAIU investigators met caseload standards.	100% of IAIU investigators met caseload standards.	100% of IAIU investigators met caseload standards.	Yes
Permanency Workers (Local Offices) Caseload (III.B.4)	95% of Local Offices will have average caseloads for Permanency workers of (a) no more than 15 families, and (b) no more than 10 children in out-of-home care.	100% of Local Offices met permanency standards.	100% of Local Offices met permanency standards.	100% of Local Offices met permanency standards.	Yes
Permanency Workers Caseload (III.B.5)	95% of Permanency workers will have (a) no more than 15 families, and (b) no more than 10 children in out of home care.	100% of Permanency workers met caseload standards.	100% of Permanency workers met caseload standards.	100% of Permanency workers met caseload standards. ⁶⁵	Yes
Intake workers (Local Offices) Caseload (IV.E.24)	95% of Local Offices will have average caseloads for Intake workers of no more than 12 families and no more than eight new case assignments per month.	100% of Local Offices met intake caseload standards.	100% of Local Offices met intake caseload standards.	99% of Local Offices met intake caseload standards.	Yes

⁶⁵ Reported performance is the average of DCF's performance in meeting individual caseload standards during this six-month monitoring period.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance⁴⁶	June 2021 Performance⁴⁷	Requirement Maintained (Yes/No)⁴⁸
Intake workers Caseload (IV.E.25)	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.	97% of Intake workers met caseload standards.	100% of Intake workers met caseload standards.	99% of Intake workers met caseload standards. ⁶⁶	Yes
Adoption Workers (Local Offices) Caseload (IV.E.26)	95% of Local Offices will have average caseloads for Adoption workers of no more than 15 children per worker.	100% of Local Offices met adoption standards.	100% of Local Offices met adoption standards.	100% of Local Offices met adoption standards.	Yes
Adoption Workers Caseload (IV.E.27)	95% of individual Adoption worker caseloads shall be no more than 15 children per worker.	99% of Adoption workers met caseload standards.	99% of Adoption workers met caseload standards.	100% of Adoption workers met caseload standards. ⁶⁷	Yes

⁶⁶ Reported performance is the average of DCF's performance in meeting individual caseload standards during this six-month monitoring period.

⁶⁷ Reported performance is the average of DCF's performance in meeting individual caseload standards during this six-month monitoring period.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
Deputy Attorneys General					
Adequacy of DAsG Staffing (III.D.7)	The state will maintain adequate DAsG staff positions and keep positions filled.	133 staff positions were filled with four staff on leave; 129 (97%) available DAsG.	132 staff positions were filled with one staff on leave; 131 (99%) available DAsG.	144 staff positions were filled with four staff on leave; 140 (97%) available DAsG. ⁶⁸	Yes
Child Health Units					
Child Health Units (III.E.8)	The state will continue to maintain its network of Child Health Units, adequately staffed by nurses in each Local Office.	As of June 30, 2020, DCF had 154 Health Care Case Managers and 86 staff assistants.	As of December 31, 2020, DCF had 124 Health Care Case Managers and 45 staff assistants.	As of June 30, 2021, DCF had 122 Health Care Case Managers and 45 staff assistants.	Yes
Visits					
Caseworker Contacts with Children – New Placement/ Placement Change (III.F.9)	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.	82% of children had two visits per month, one of which was in their placement, during the first two months of an initial or subsequent placement in June 2020. Monthly range during January – June 2020 monitoring period: 50 to 92%.	92% of children had two visits per month, one of which was in their placement, during the first two months of an initial or subsequent placement in December 2020. Monthly range during July – December 2020 monitoring period: 89 to 93%.	90% of children had two visits per month, one of which was in their placement, during the first two months of an initial or subsequent placement in June 2021. Monthly range during January – June 2021 monitoring period: 90 to 95%. ⁶⁹	Yes ⁷⁰

⁶⁸ DCF reported that during this monitoring period select DAsG outside of the DCF Practice Group have dedicated some of their time to DCF matters.

⁶⁹ Monthly performance for this measure is as follows: January, 91%; February, 95%; March, 94%; April, 93%; May, 90%; June, 90%.

⁷⁰ The Monitor considers the decline in performance to be temporary and/or insubstantial.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance⁴⁶	June 2021 Performance⁴⁷	Requirement Maintained (Yes/No)⁴⁸
Caseworker Contact with Children in Placement (III.F.10)	During the remainder of the placement, 93% of children shall have at least one caseworker visit per month, in the placement.	89% of children had at least one caseworker visit in June 2020 in their placement. Monthly range during January – June 2020 monitoring period: 71 to 97%.	97% of children had at least one caseworker visit in December 2020 in their placement. Monthly range during July – December 2020 monitoring period: 95 to 98%.	97% of children had at least one caseworker visit in June 2021 in their placement. Monthly range during January – June 2021 monitoring period: 97 to 98%. ⁷¹	Yes
Parent-Child Visits – Weekly (IV.F.29)	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.	63% of applicable children had weekly visits with their parents in June 2020. Monthly range during January – June 2020 monitoring period: 50 to 79%.	81% of applicable children had weekly visits with their parents in December 2020. Monthly range during July – December 2020 monitoring period: 60 to 81%.	80% of applicable children had weekly visits with their parents in June 2021. Monthly range during January – June 2021 monitoring period: 80 to 85%. ⁷²	Yes

⁷¹ Monthly performance for this measure is as follows: January, 97%; February, 97%; March, 97%; April, 98%; May, 98%; June, 97%.

⁷² Monthly performance for this measure is as follows: January, 81%; February, 83%; March, 85%; April, 84%; May, 82%; June, 80%. Reported performance accounts for valid exceptions to this visits requirement.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance⁴⁶	June 2021 Performance⁴⁷	Requirement Maintained (Yes/No)⁴⁸
Parent-Child Visits – Bi-Weekly (IV.F.30)	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. ⁷³	76% of applicable children had bi-weekly visits with their parents in June 2020. Monthly range during January – June 2020 monitoring period: 56 to 94%.	94% of applicable children had bi-weekly visits with their parents in December 2020. Monthly range during July – December 2020 monitoring period: 77 to 94%.	93% of applicable children had bi-weekly visits with their parents in June 2021. Monthly range during January– June 2021 monitoring period: 93 to 96%. ⁷⁴	Yes
Child Visits with Siblings (IV.F.31)	85% of children in custody who have siblings with whom they are not residing will visit those siblings at least monthly. ⁷⁵	68% of children in custody who have siblings with whom they are not residing visited with their siblings in June 2020. Monthly range during January – June 2020 monitoring period: 61 to 88%.	83% of children in custody who have siblings with whom they are not residing visited with their siblings in December 2020. Monthly range during July – December 2020 monitoring period: 70 to 83.	84% of children in custody who have siblings with whom they are not residing visited with their siblings in June 2021. Monthly range during January – June 2021 monitoring period: 83 to 87%. ^{76,77}	Yes

⁷³ The requirement excludes 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.

⁷⁴ Monthly performance for this measure is as follows: January, 94%; February, 94%; March, 96%; April, 95%; May, 93%; June, 93%. Reported performance accounts for valid exceptions to this visits requirement.

⁷⁵ The requirement excludes 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.

⁷⁶ Monthly performance for this measure is as follows: January, 83%; February, 83%; March, 87%; April, 87%; May, 85%; June, 84%. Reported performance accounts for valid exceptions to the visits requirement.

⁷⁷ Based on the Monitor and DCF's joint review of a statistically significant sample of cases for children in care in October and November 2018, it was determined that exceptions to this visits requirement were appropriately applied and documented in 60% of cases. The universe of cases utilized for the purposes of calculating performance has been adjusted accordingly.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
Placement					
Placing Siblings Together (IV.G.32)	At least 80% of sibling groups of two or three children entering custody will be placed together.	80% of sibling groups of two or three children entering custody in CY 2019 were placed together.	81% of sibling groups of two or three children entering custody in CY 2020 were placed together.	Data for the cohort who entered foster care in CY 2021 not yet available.	N/A
Placing Siblings Together for Four or More Children (IV.G.33)	All children will be placed with at least one other sibling 80% of the time.	83% of children entering custody in CY 2019 with three or more siblings were placed with at least one other sibling.	95% of children entering custody in CY 2020 with three or more siblings were placed with at least one other sibling.	Data for the cohort who entered foster care in CY 2021 not yet available.	N/A
Recruitment of Placements for Sibling Groups of Four or More (IV.G.34)	DCF will continue to recruit for resource homes capable of serving sibling groups of four or more.	DCF recruited a total of 18 new SIBs homes in the monitoring period. As of June 2020, DCF had a total of 82 large capacity SIBS homes; 19 homes that can accommodate five or more children and 63 homes that can accommodate four children.	DCF suspended recruitment in March 2020 due to COVID-19; as of December 2020, DCF recruited one new SIBs home. DCF had a total of 55 large capacity SIBs homes; 12 homes that can accommodate five or more children and 43 that can accommodate four children.	DCF recruited one new SIBs home in the monitoring period. As of June 2021, DCF had a total of 45 large capacity SIBs homes; 11 homes that can accommodate five or more children and 45 that can accommodate four children.	Yes

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance⁴⁶	June 2021 Performance⁴⁷	Requirement Maintained (Yes/No)⁴⁸
Placement Stability, First 12 Months in Care (IV.G.35)	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.	85% of children who entered out-of-home placement for the first time in CY 2018 had no more than one placement change during the 12 months following their date of entry.	87% of children who entered out-of-home placement for the first time in CY 2019 had no more than one placement change during the 12 months following their date of entry.	Data for the cohort who entered foster care in CY 2020 not yet available.	N/A
Placement Stability, 13 – 24 Months in Care (IV.G.36)	At least 88% of these children will have no more than one placement change during the 13-24 months following their date of entry.	95% of children who entered care in CY 2017 had no more than one placement change during the 13-24 months following their date of entry.	96% of children who entered care in CY 2018 had no more than one placement change during the 13-24 months following their date of entry.	Data for the cohort who entered foster care in CY 2019 not yet available.	N/A

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
Education					
Educational Needs (III.G.11)	80% of cases will be rated acceptable as measured by the QR in stability (school) and learning and development. The Monitor, in consultation with the parties, shall determine the standards for school stability and quality learning and development.	86% of cases rated acceptable for both QR indicators <i>stability in school</i> and <i>learning and development</i> (CY 2019). ^{78,79}	CY 2020 data not available. QRs suspended during the COVID-19 pandemic.	CY 2021 data not available. QRs suspended during the COVID-19 pandemic.	Unable to Determine ⁸⁰
Maltreatment					
Abuse and Neglect of Children in Foster Care (III.H.12)	No more than 0.49% of children will be victims of substantiated abuse or neglect by a resource parent or facility staff member.	0.24% of children in CY 2019 were victims of substantiated abuse or neglect by a resource parent of facility staff member.	0.12% of children in CY 2020 were victims of substantiated abuse or neglect by a resource parent or facility staff member.	Data for the cohort who entered foster care in CY 2021 not yet available.	N/A

⁷⁸ From January to December 2019, 86% (63 of 73) of the applicable cases reviewed were rated acceptable on both the *stability in school* and the *learning and development, ages 5 & older* indicators; 91% (74 of 81) were rated acceptable for *stability in school* and 89% (68 of 76) were rated acceptable for *learning and development, ages 5 & older*.

⁷⁹ All in-home cases are excluded from this measure.

⁸⁰ The qualitative review process was suspended in March 2020 and as a result there are no new data for Educational Needs (III.G.11); Quality of Case Plans (SEP IV.D.23); Quality of Teaming (SEP IV.B.20); Services to Support Transitions (SEP IV.J.44), and Quality of Case Planning and Services (SEP IV.K.46).

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance⁴⁶	June 2021 Performance⁴⁷	Requirement Maintained (Yes/No)⁴⁸
Repeat Maltreatment (In-home) (IV.H.37)	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.	4.5% of children who remained at home after a substantiation of abuse or neglect in CY 2018 had another substantiation within the next 12 months.	5.1% of children who remained at home after a substantiation of abuse or neglect in CY 2019 had another substantiation within the next 12 months.	Data for the cohort who entered foster care in CY 2020 not yet available.	N/A
Maltreatment Post-Reunification (IV.H.38)	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.	6.3% of children who entered foster care for the first time in CY 2016 and were discharged within 24 months to reunification or living with relative(s) were the victims of abuse or neglect within 12 months of their discharge.	5.1% of children who entered foster care for the first time in CY 2017 and were discharged within 24 months to reunification or living with relative(s) were the victims of abuse or neglect within 12 months of their discharge.	Data for the cohort who entered foster care in CY 2018 not yet available.	N/A

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
Re-Entry to Placement (IV.H.39)	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.	8.6% of children who entered foster care for the first time in CY 2017 and were discharged within 12 months to reunification, living with relative(s), or guardianship, re-entered foster care within 12 months of their discharge.	9.8% of children who entered foster care for the first time in CY 2018 and were discharged within 12 months to reunification, living with relative(s), or guardianship, re-entered foster care within 12 months of their discharge.	Data for the cohort who entered foster care in CY 2019 not yet available.	N/A
Permanency					
Permanency within 12 Months (IV.I.40)	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.	42% of children who entered foster care in CY 2018 were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 12 months of entering foster care.	37% of children who entered foster care in CY 2019 were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 12 months of entering foster care.	Data for the cohort who entered foster care in CY 2020 not yet available.	N/A

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance⁴⁶	June 2021 Performance⁴⁷	Requirement Maintained (Yes/No)⁴⁸
Permanency Within 24 Months (IV.I.41)	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.	67% of children who entered foster care in CY 2017 were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 24 months of entering foster care.	64% of children who entered foster care in CY 2018 were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 24 months of entering foster care.	Data for the cohort who entered foster care in CY 2019 not yet available.	N/A
Permanency Within 36 Months (IV.I.42)	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.	82% of children who entered foster care in CY 2016 were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 36 months of entering foster care.	84% of children who entered foster care in CY 2017 were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 36 months of entering foster care.	Data for the cohort who entered foster care in CY 2018 not yet available.	N/A

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
Permanency Within 48 Months (IV.I.43)	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.	88% of children who entered foster care in CY 2015 were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 48 months of entering foster care.	89% of children who entered foster care in CY 2016 were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 48 months of entering foster care.	Data for the cohort who entered foster care in CY 2017 not yet available.	N/A
Older Youth					
Independent Living Assessments (IV.K.45)	90% of youth ages 14 to 18 have an Independent Living Assessment.	89% of applicable children had completed an Independent Living Assessment in June 2020. Monthly range during January – June 2020 monitoring period: 88 to 93%.	87% of applicable children had completed an Independent Living Assessment in December 2020. Monthly range during July – December 2020 monitoring period: 86 to 88%.	85% of applicable children had completed an Independent Living Assessment in June 2021. Monthly range during January – June 2021 monitoring period: 84 to 87%. ⁸¹	Yes ⁸²

⁸¹ Monthly performance for this measure is as follows: January, 86%; February, 84%; March, 85%; April, 87%; May, 86%; June, 85%.

⁸² The Monitor considers the decline in performance to be temporary and/or insubstantial.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance ⁴⁶	June 2021 Performance ⁴⁷	Requirement Maintained (Yes/No) ⁴⁸
Quality of Case Planning and Services (IV.K.46)	75% of youth ages 18 to 21 who have not achieved legal permanency shall receive acceptable quality case management and service planning.	67% of cases rated acceptable for both QR indicators <i>child (youth)/family status</i> and <i>overall practice performance</i> (CY 2019). ⁸³	CY 2020 data not available. QRs suspended during the COVID-19 pandemic.	CY 2021 data not available. QRs suspended during the COVID-19 pandemic.	Unable to Determine
Housing (IV.K.47)	95% of youth exiting care without achieving permanency shall have housing.	99% of youth exiting care between January and December 2019 without achieving permanency had documentation of a housing plan upon exiting care.	92% of youth exiting care between January and December 2020 without achieving permanency had documentation of a housing plan upon exiting care.	The next review will be conducted in early 2022 for youth exiting care between January and December 2021. ⁸⁴	N/A

⁸³ From January to December 2019, 67% (29 of 43) of the applicable cases reviewed were rated acceptable on both the *overall child (youth)/family status* and the *overall practice performance* indicators; 95% (41 of 43) of cases were rated acceptable for *child (youth)/family status* and 67% (29 of 43) of cases were rated acceptable for *overall practice performance*.

⁸⁴ DCF's review of older youth exiting foster care without achieving permanency is conducted annually.

Table 1B: To Be Maintained

SEP Measure	Sustainability and Exit Plan Standard	June 2020 Performance	December 2020 Performance⁴⁶	June 2021 Performance⁴⁷	Requirement Maintained (Yes/No)⁴⁸
Employment/ Education (IV.K.48)	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.	97% of youth exiting care between January and December 2019 without achieving permanency were either employed or enrolled in education or vocational training programs, or there was documented evidence of consistent efforts to help the youth secure employment or training.	85% of youth exiting care between January and December 2020 without achieving permanency were either employed or enrolled in education or vocational training programs, or there was documented evidence of consistent efforts to help the youth secure employment or training.	The next review is anticipated to be conducted in March 2022 for youth exiting care between January and December 2021. ⁸⁵	N/A

⁸⁵ DCF's review of older youth exiting foster care without achieving permanency is conducted annually.

Table 1C: Foundational Elements			
SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	Requirement Maintained as of December 2020 (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 provided directly to the Monitor and published by DCF in reports and on its website. ⁸⁶ NJ SPIRIT functionality is routinely assessed by the Monitor's use of NJ SPIRIT data for validation and through use of SafeMeasures, as well as in conducting case inquiries and case record reviews.	Yes
B. Case Practice Model	Implement and sustain a Case Practice Model	QR Data Monitor site visits and attendance at QRs, ChildStat, and other meetings Quality of Investigations case record review Data provided directly to the Monitor Safe, Healthy, and Connected Annual Report ⁸⁷ Older Youth Exiting Care to Non-Permanency case record review	Yes— although some activities suspended or postponed during this monitoring period due to COVID-19. Monitor is awaiting decisions on activities for replacing QRs and details on plans for assessing quality.
	Quality investigation and assessment		
	Safety and risk assessment and risk reassessment		
	Engagement with youth and families		
	Working with family teams		
	Individualized planning and relevant services		
	Safe and sustained transition from DCF		
	Continuous review and adaptations		

⁸⁶ Please see list of reports in Appendix B to review data sources for this Foundational Element.

⁸⁷ The most recent Safe, Healthy, and Connected Annual Report was published in 2019 covering CY 2018. DCF intends to publish a report for 2019 and for 2020.

Table 1C: Foundational Elements

SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	Requirement Maintained as of December 2020 (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	Monitor site visit with SCR staff	
		Screening and Investigations Monthly Report	
D. Appropriate Placements	Appropriate placements of children	Monitor site visits and attendance at QRs, ChildStat, and other meetings Data provided directly to the Monitor Safe, Healthy, and Connected Annual Report	Yes— although some activities suspended or postponed during this monitoring period due to COVID-19
	Resource family homes licensed and closed (kinship/non-kinship)	Commissioner's Monthly Report Data provided directly to the Monitor	
	Number of children in home/out of home demographic data	NJ Rutgers Data Portal	
	Placed in a family setting	Commissioner's Monthly Report	
	Placement proximity	Data provided directly to the Monitor Safe, Healthy, and Connected Annual Report	
	No children under 13 years old in shelters	Commissioner's Monthly Report Data provided directly to the Monitor	
	Children over 13 in shelters no more than 30 days	Commissioner's Monthly Report Data provided directly to the Monitor	

Table 1C: Foundational Elements			
SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	Requirement Maintained as of December 2020 (Yes/No)
	No behavioral health placements out of state without approval	Commissioner's Monthly Report	
	Adequate number of resource placements	CP&P Needs Assessment Data provided directly to the Monitor Safe, Healthy, and Connected Annual Report	
E. Service Array	Services for youth ages 18-21, LGBTQI, mental health and domestic violence for birth parents with families involved with the child welfare system	New Jersey Youth Resource Spot ⁸⁸ New Jersey DCF Adolescent Services Website ⁸⁹ Data provided directly to the Monitor Attendance at Adolescent Practice Forums CP&P Needs Assessment Safe, Healthy, and Connected Annual Report Older Youth Exiting Care to Non-Permanency case record review	Yes
	Preventive home visit programs	Commissioner's Monthly Report Safe, Healthy, and Connected Annual Report	

⁸⁸ New Jersey's Youth Resource Spot can be found at www.NJYRS.org.

⁸⁹ DCF's Adolescent Services Website can be found at <http://www.nj.gov/dcf/adolescent/>.

Table 1C: Foundational Elements			
SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	Requirement Maintained as of December 2020 (Yes/No)
	Family Success Centers	Commissioner's Monthly Report Data provided directly to the Monitor Safe, Healthy, and Connected Annual Report	
F. Medical and Behavioral Health Services	Appropriate medical assessment and treatment	Data provided directly to the Monitor Commissioner's Monthly Report CIACC Monthly Report Safe, Healthy, and Connected Annual Report	Yes
	Pre-placement and entry medical assessments		
	Dental examinations		
	Immunizations		
	Follow-up care and treatment		
	Mental health assessment and treatment		
	Behavioral health		
G. Training	Pre-service training	Data provided directly to the Monitor Safe, Healthy, and Connected Annual Report	Yes
	Case practice model		
	Permanency planning		

Table 1C: Foundational Elements			
SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	Requirement Maintained as of December 2020 (Yes/No)
	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 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 ⁹⁰	Yes
	Independent Living Stipend	New Jersey Youth Resource Spot	

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

Table 1C: Foundational Elements			
SEP Reference	Additional SEP Requirements that DCF Must Sustain:	Data Source	Requirement Maintained as of December 2020 (Yes/No)
J. Permanency	Permanency practices	Data provided directly to the Monitor Safe, Healthy, and Connected Annual Report Monitor site visits and attendance at QRs, ChildStat, and other meetings	Yes— although some activities suspended or postponed during this monitoring period due to COVID-19
	Adoption practices	Older Youth Exiting Care to Non-Permanency case record review	
K. Adoption Practice	5- and 10-month placement reviews	Adoption Report ⁹¹	Yes

⁹¹ The most recent Adoption Report was published in 2016. To see the report, go to: <https://www.nj.gov/dcf/childdata/exitplan/AdoptionReport2016.pdf>

IV. FOUNDATIONAL ELEMENTS

The Sustainability and Exit Plan (SEP) identifies a series of core organizational and practice improvements known as the “Foundational Elements” that became the groundwork upon which New Jersey’s reform has been built. They include a range of requirements from the 2006 Modified Settlement Agreement (MSA) that were previously met and were codified in the SEP as essential to be maintained and foundational for improved child welfare outcomes and future system improvements. These Foundational Elements remain enforceable in the SEP if performance is not sustained. DCF collects and publishes relevant performance data in these areas.

The Monitor has continued to assess maintenance of Foundational Elements through analysis of DCF’s data as well as through participation in DCF presentations and meetings. During this period, the Monitor has continued to meet virtually with DCF leadership to receive updates on the Foundational Elements and DCF’s responses to the COVID-19 pandemic. The Department had planned to produce the *Safe, Healthy, and Connected Annual Report* in both 2019 and 2020 for public accountability on the Foundational Elements, but these reports have not been produced and plans have been stalled due to the COVID-19 pandemic.

With respect to the SEP mandate to provide comprehensive, culturally responsive services to address the identified needs of children, youth, and families (SEP II.E), DCF has maintained financial support for its 57 Family Success Centers (FSCs), which have continued to provide resources to families during the COVID-19 pandemic. To highlight a few additional accomplishments, the Division on Women (DOW) provided additional financial resources to county domestic violence agencies as a result of the increase in reports of domestic violence since the onset of the pandemic. DOW also continued its Batterers Intervention Program, directed toward individuals who have perpetrated violence in households with children, and Peace: A Learned Solution (PALS), directed toward children ages four to 12 who have been exposed to domestic violence. During the monitoring period, the Office of Adolescent Services (OAS) and DOW have continued to offer trainings for staff in collaboration with the Transgender Training Institute. Additionally, a survey was conducted for all CP&P field staff in Spring 2021 to identify services and supports needed for LGBTQI young people and their family members; findings from which will be reported on in the following monitoring period.

In the Monitor's judgment, *each of the SEP's Foundational Elements* has been maintained during this period, which is an important accomplishment given the challenges caused by the COVID-19 pandemic. Additionally, many have been strengthened through new initiatives and developments, some of which are discussed herein in Section II.

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

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

A. INVESTIGATIONS

The SEP includes four performance measures related to investigative practice, all of which were designated as *Outcomes To Be Maintained* as of the beginning of the monitoring period: quality of investigations (SEP IV.A.15); timeliness of Institutional Abuse Investigations Unit (IAIU) investigation completion (SEP III.A.1); timeliness of alleged child abuse and neglect investigation completion within 60 days (SEP IV.A.13); and timeliness of alleged child abuse and neglect investigation completion within 90 days (SEP IV.A.14). Performance for all four measures during the current monitoring period is discussed below.

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 May 31, 2021.⁹²

In May 2021, there were 4,640 investigations of alleged child abuse and neglect, 4,008 (86%) of which were completed within 60 days. Performance from December 2020 to May 2021 ranged from a low of 86 percent to a high of 90 percent.⁹³ DCF

⁹² June 2021 data will be included in the next monitoring report. For certain data elements that have an extended time frame built into the measurement, the Monitor and DCF decided to alter the period for review so six-month monitoring reports can be produced more closely to the end of the monitoring period.

⁹³ Monthly performance for this measure is as follows: December, 90%; January, 90%; February, 90%; March, 88%; April, 89%; May, 86%.

met the SEP performance standard for the timeliness of investigation completion within 60 days.

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 May 31, 2021.⁹⁴

In May 2021, 4,444 (96%) of the 4,640 investigations of child abuse and neglect were completed within 90 days. Performance from December 2020 to May 2021 ranged from 96 to 97 percent.⁹⁵ DCF continues to meet the SEP performance standard for the timeliness of investigation completion within 90 days.

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.

The quality of investigations case record review is typically conducted every two years and is therefore not reassessed in this report. DCF expects to undertake the next CP&P investigations review during March 2022. The review will include a representative sample of investigations received from October 1-14, 2021.

⁹⁴ June 2021 data will be included in the next monitoring report. For certain data elements that have an extended time frame built into the measurement, the Monitor and DCF decided to alter the period for review so six-month monitoring reports can be produced more closely to the end of the monitoring period.

⁹⁵ Monthly performance for this measure is as follows: December, 97%; January, 96%; February, 97%; March, 96%; April, 97%; May, 96%.

B. FAMILY TEAM MEETINGS

Family Team Meetings (FTMs) bring families, providers, formal and informal supports together to exchange information, participate in case planning, coordinate, and follow up on services, and examine and address challenges. Meetings are intended to be scheduled according to the family's availability to involve as many family members and supports as possible. Workers are trained and coached to hold FTMs at key decision and transition points in the life of a case, such as when a child enters placement, when a child has a change in placement, and/or when there is a need to adjust a case plan to achieve permanency or meet a child's needs. During the monitoring period, some of these meetings were virtual, according to policy set at the onset of the COVID-19 pandemic, but many FTMs were able to occur in person, outdoors, in visitation centers, or in large public places.

The SEP includes five performance measures pertaining to FTMs. As of the beginning of the monitoring period, four measures had been met and designated as *Outcomes To Be Maintained*: the requirements that FTMs be held within 45 days of a child's removal (SEP IV.B.16); that for children in out-of-home placement, at least three additional FTMs after the initial FTM be held within the first 12 months of placement (SEP IV.B.17); that children with the goal of reunification have at least three FTMs each year after the first 12 months of placement (SEP IV.B.18); and that children with a goal other than reunification have at least two FTMs each year after the first 12 months of placement (SEP IV.B.19). The remaining *Outcome To Be Achieved* is Quality of Teaming (SEP IV.B.20). Performance for all five measures is discussed below.

Initial FTMs Held within 45 Days of Entry

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

Performance as of June 30, 2021:

In June 2021, 84 (69%) out of 121 possible FTMs occurred within 45 days of a child's removal from home. Performance from January 1 to June 30, 2021 ranged from a low

of 69 percent to a high of 89 percent.⁹⁶ For this measure, the Monitor and DCF verified monthly data from NJ SPIRIT for the 24 applicable cases to determine whether exceptions to FTM policy were appropriately applied and documented.⁹⁷ DCF met the performance standard in all but one month of the monitoring period and thus the Monitor considers this measure met.

FTMs Held within the First 12 Months

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

Performance as of June 30, 2021.⁹⁸

In June 2021, 62 (86%) of 72 applicable children had three or more FTMs within the first 12 months of entering placement, after the initial FTM. Performance from January 1 to June 30, 2021 ranged from a low of 75 percent to a high of 93 percent.⁹⁹ For this measure, the Monitor and DCF verified monthly data from NJ SPIRIT for the 30 applicable cases to determine whether exceptions to FTM policy were appropriately applied and documented.¹⁰⁰ DCF's performance exceeded the SEP standard in all but two months. Thus, the Monitor considers this measure met.

⁹⁶ Monthly performance for this measure is as follows: January, 85%; February, 87%; March, 86%; April, 89%; May, 87%; June, 69%. Reported performance accounts for valid exceptions to the FTM requirement.

⁹⁷ Based on a review with DCF of all 24 cases, the Monitor excluded valid exceptions to the FTM requirement from the universe of cases. For example, in June 2021, there were 124 children newly entering placement. The Monitor and DCF determined that in 3 cases, the worker had appropriately determined that the parent declined the FTM or was otherwise unavailable. The Monitor excluded those cases, making the universe of applicable cases 121 children (124-3).

⁹⁸ Measure 17 applies to all children who have been in out-of-home placement for 12 months who entered care in the specified month. For example, performance for June 2021 is based upon the 75 children who entered care in June 2020. Compliance is based on whether at least three FTMs were held for these children during the 12-month period they were in care.

⁹⁹ Monthly performance for this measure is as follows: January, 83%; February, 93%; March, 90%; April, 77%; May, 75%; June, 86%. Reported performance accounts for valid exceptions to the FTM requirement.

¹⁰⁰ Based on a joint review of all 30 cases, the Monitor excluded valid exceptions to the FTM requirement from the universe of cases. For example, in June 2021, there were 75 children who had been in out-of-home placement for 12 months. The Monitor and DCF determined that in 3 cases, the worker had appropriately determined that the parent declined the FTM or was otherwise unavailable. The Monitor excluded those cases, making the universe of applicable cases 72 children (75-3).

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

Quantitative or Qualitative Measure	18. <u>Subsequent Family Team Meetings after 12 Months</u> : For all children in placement with a goal of reunification, the number/percent who have at least three FTMs each year after the first 12 months of placement.
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 June 30, 2021:¹⁰¹

In June 2021, 15 (88%) of 17 applicable children with a permanency goal of reunification had three or more FTMs in the most recent 12 months, if they had been in out-of-home placement for two or more years. Performance from January 1 to June 30, 2021 ranged from a low of 85 percent to a high of 95 percent.^{102,103}

The universe of cases to which this measure applies is small and therefore more susceptible to fluctuations. The Monitor considers this measure to have met the standard this monitoring period since DCF met the standard in three months and remained close to the standard in the other three months of the period.

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

Quantitative or Qualitative Measure	19. <u>Subsequent Family Team Meetings after 12 Months</u> : For all children in placement with a goal other than reunification, the number/percent who have at least two FTMs each year.
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.

¹⁰¹ Measure 18 applies to all children who have been in care for at least 24 months who entered care in the specified month each year and have a goal of reunification. For example, in June 2021, a combined total of 17 children entered care in June 2019, June 2018, June 2017, etc. and were still in placement with a goal of reunification. Compliance is based on whether at least three FTMs were held for these children during their most recent 12 months in care.

¹⁰² Monthly performance for this measure is as follows: January, 95%; February, 85%; March, 92%; April, 93%; May, 87%; June, 88%. Reported performance accounts for valid exceptions to the FTM requirement.

¹⁰³ There was only one documented exception to the requirement of this measure during the monitoring period. Based on the joint review of exceptions, that exception was not deemed valid, and thus no exclusions to the universe were applied to this measure.

Performance as of June 30, 2021.¹⁰⁴

In June 2021, 94 (88%) of 107 applicable children in out-of-home placement with a permanency goal other than reunification had two or more FTMs in the most recent 12 months of those in out-of-home placement for two or more years. Performance from January 1 to June 30, 2021 ranged from a low of 86 percent to a high of 94 percent.¹⁰⁵ For this measure, the Monitor verified monthly data from NJ SPIRIT for the four applicable cases to determine whether exceptions to FTM policy were appropriately applied and documented.¹⁰⁶

DCF met the SEP standard in four months, and remained close to the standard in the other two months, and therefore the Monitor considers this measure to be met.

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 Qualitative Review (QR) process will show evidence of both acceptable team formation and acceptable functioning. The Monitor, in consultation with the parties, shall determine the standards for quality team formation and functioning.

FTMs are only one of the many ways in which DCF staff engage with families. Effective teaming is much broader than just convening a meeting and relies upon other foundational elements of quality case practice, such as engagement with family members, timely assessments, and quality case planning, all of which are evaluated as part of the state's QR process. Results from the *teamwork and coordination* indicator in the QR have been used in prior years to assess the quality of collaborative teamwork with children, youth, and families. Information about the QR process and

¹⁰⁴ 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 June 2021, a combined total of 107 children entered care in June 2019, June 2018, June 2017, etc. and are still in placement with a goal other than reunification. Compliance is based on whether at least two FTMs were held for these children each year in the most recent year after 12 months in care.

¹⁰⁵ Monthly performance for this measure is as follows: January, 93%; February, 92%; March, 91%; April, 86%; May, 94%; June, 88%. Reported performance accounts for valid exceptions to the FTM requirement.

¹⁰⁶ Based on a review of all 4 cases, the Monitor excluded valid exceptions to the FTM requirement from the universe of cases. For example, in April 2021 there were 129 children who had been in care for at least 24 months with a goal other than reunification. The Monitor determined that in one case, the worker had appropriately determined that the parent declined the FTM or was otherwise unavailable. The Monitor excluded that case, making the universe of applicable cases 128 children (129-1).

protocol are detailed in Section V.N *Accountability Through Qualitative Review* of this report.

Due to the COVID-19 pandemic, QRs were suspended and therefore there are no new data on this measure. DCF is working to develop a proposal on alternative ways to measure the quality of teaming but this work has not been completed as of this report. As of the last measurement in CY 2019, 62% of the cases reviewed met the standard.

C. QUALITY OF CASE AND SERVICE PLANNING

Timely and meaningful case plans that are developed with the family at the beginning of a case, and throughout a family's involvement with DCF, are the foundation of quality casework and rely on workers' assessment and engagement skills. Between January and June 2021, DCF continued the planning and training needed for the implementation of Solution Based Casework (SBC) in New Jersey. SBC is an evidence-based child welfare practice model that has been shown to impact quality of case practice outcomes as measured by the federal Child and Family Services Review (CFSR).

Implementing the SBC approach is requiring changes to policies, protocols, processes, and forms throughout DCF. Changes to casework activities, such as strengthening FTM preparation, is intended to allow staff to build stronger partnerships with families, conduct more thorough behavior-based assessments and develop action plans that support the objectives developed by the family. Among other steps DCF took during the monitoring period toward integrating SBC into DCF's Case Practice Model (CPM), DCF continued developing the skills of its "SBC Champions," comprised of one staff member from every Local Office, two staff members from CP&P Central Office, and six trainers from the Office of Training and Professional Development (OTPD).

The SEP includes three measures related to case planning, two of which have been previously met and designated as *Outcomes To Be Maintained*: the requirement that case plans be developed with families within 30 days of placement (SEP IV.D.22) and the requirement that case plans be reviewed and modified every six months (SEP III.C.6). The SEP measure regarding the quality of case planning (SEP IV.D.23) remains an *Outcome To Be Achieved*. Performance for all three measures is discussed below.

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 June 30, 2021:

In June 2021, 105 (85%) of 124 initial case plans were completed within 30 days of a child entering placement. Between January and June, 2021, the timely development of initial case plans ranged from a low of 85 percent to a high of 98 percent.¹⁰⁷ The Monitor considers this measure to have met the standard this monitoring period since DCF exceeded this measure in two of six months, came close to meeting the standard in an additional two months, and the decline in performance in the remaining two months is likely temporary and most likely attributable to challenges caused by the COVID-19 pandemic.

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 six 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 June 30, 2021:

In June 2021, 498 (99%) of 505 case plans had been modified no less frequently than every six months. Performance from January to June 2021 ranged from 97 to 99 percent, slightly better than the range of performance in the previous monitoring period.¹⁰⁸ DCF exceeded the required standard for this measure in every month of the monitoring period. The Monitor considers DCF to have met this measure.

¹⁰⁷ Monthly performance for this measure is as follows: January, 97%; February, 93%; March, 98%; April, 93%; May, 85%; June, 85%.

¹⁰⁸ Monthly performance on this measure is as follows: January, 97%; February, 98%; March, 98%; April, 99%; May 99,%; June 99,%,

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 Qualitative Review (QR).

DCF policy and the SEP require that families be involved in case planning, that plans are appropriate and individualized to the circumstances of the child or youth and family, and that there is oversight of plan implementation to ensure case goals are met and plans are modified when necessary. Results from two QR indicators, *child and family planning process* and *tracking and adjusting*, have been used in prior years to assess performance on this measure. Cases rated as acceptable demonstrated that child or youth and family needs are addressed in the case plan, appropriate family members were included in the development of the plan, and interventions are being tracked and adjusted when necessary. Information about the QR process and protocol are detailed in Section V.N *Accountability Through Qualitative Review* of this report.

Due to the COVID-19 pandemic, QRs were suspended and therefore there are no new data on this measure. DCF is working to develop a proposal on alternative ways to measure the quality of case plans but this work has not been completed as of this report. As of the last measurement in CY 2019, 58% of cases reviewed met the standard.

D. EDUCATION

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 Qualitative Review (QR) in stability (school) and learning and development. The Monitor, in consultation with the parties, shall determine the standards for school stability and quality learning and development.

SEP Section III.G.11 requires that “children will be enrolled in school and DCF will have taken appropriate actions to ensure that their educational needs are being met.” Results from both the *stability in school* and *learning and development* indicators have been used in prior years to assess performance on this measure. The QR process and protocol are discussed in detail in Section V.N *Accountability Through Qualitative Review* of this report.

Due to the COVID-19 pandemic, QRs were suspended and therefore there are no new data on this measure. DCF is working to develop a proposal on alternative ways to measure the quality of meeting educational needs of children, but this work has not been completed as of this report. As of the last measurement in CY 2019, 86% of cases reviewed met the standard.

E. MAINTAINING CONTACT THROUGH VISITS

Visits provide essential points of connection between children and their parents and siblings and children and parents with DCF workers. Visits enable workers to continually assess for safety and well-being, strengthen family connections, link children and families to needed services and supports, and improve prospects for permanency. As in states throughout the country, expectations for how to hold visits continued to be different this period due to safety issues presented by the COVID-19 pandemic. DCF held in-person visits throughout the monitoring period, allowing for the relaxation of in-person visit requirements when deemed medically necessary.

The Department's efforts to preserve regular contacts, even if virtual, has been essential. Based on data provided by DSS, an average of 90 percent of all visits during the monitoring period were conducted in-person, with the rest being virtual.

The SEP includes six performance measures related to visits. As of the beginning of this reporting period, five measures were designated as *Outcomes To Be Maintained*, including caseworker contacts with children newly placed or after a placement change (SEP III.F.9); caseworker contacts with children in ongoing placement (SEP III.F.10); parent-child weekly and bi-weekly visits (SEP IV.F.29 and IV.F.30); and visits with siblings (SEP IV.F.31). Caseworker contacts with parents when the goal is reunification (SEP IV.F.28) remains an *Outcome To Be Achieved*. Performance for all six measures during the monitoring period is discussed below.

Caseworker Visits with Children in Placement

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 June 30, 2021:

In June 2021, 176 (90%) of the 196 children in a new placement had two visits per month with their caseworkers during their first two months in placement, either in person or virtually, with at least one contact per month in the child's placement. Between January and June 2021, monthly performance ranged from 90 to 95

percent.¹⁰⁹ An average of 87 of these visits were conducted in person, across all months of the monitoring period.

DCF performance met the standard in two months and remained close in the other four months of the monitoring period. The Monitor considers the decline in performance to be temporary and therefore considers this measure to be met.

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 June 30, 2021:

In June 2021, 3,002 (97%) of the 3,108 children in an ongoing placement were visited at least once by their caseworker. Between January and June 2021, monthly performance ranged from 97 to 98 percent.¹¹⁰ An average of 96 percent of these visits were conducted in person, across all the months of the monitoring period. DCF exceeded the performance standard in each month.

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.
Final Target	90% of families will have at least twice-per-month face-to-face contact with their caseworker when the permanency goal is reunification.

Performance as of June 30, 2021:

In June 2021, 1,012 (83%) of 1,225 applicable children in custody with a goal of reunification had parents who were visited at least twice during the month by caseworkers, either in person or virtually. Between January and July 2021, a range of 82 to 86 percent of applicable parents or other legally responsible family members

¹⁰⁹ Monthly performance for this measure is as follows: January, 91%; February, 95%; March, 94%; April, 93%; May, 90%; June, 90%.

¹¹⁰ Monthly performance for this measure is as follows: January, 97%; February, 97%; March, 97%; April, 98%; May, 98%; June, 97%.

were visited at least two times per month by a caseworker.¹¹¹ An average of 93 percent of these visits were conducted in person, across the months of the monitoring period.

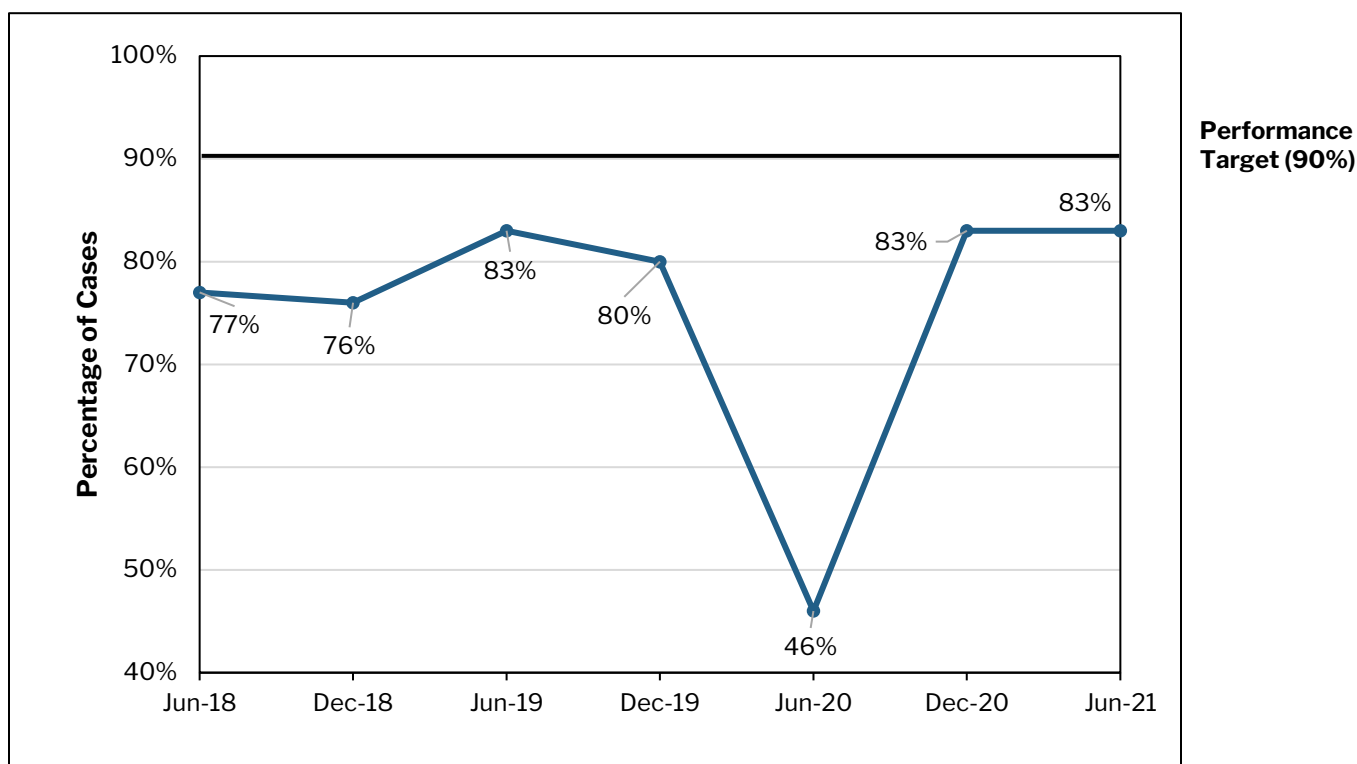
Figure 3 depicts performance on this measure over the course of the past two years. In assessing performance for this measure, the Monitor applied the findings from DCF's review of children for whom case documentation indicated that a worker visit with a parent was not required because the parent was missing or otherwise unavailable.¹¹²

Performance throughout the monitoring period has rebounded to pre-pandemic levels and remained relatively consistent over the course of the six months. However, current performance does not meet the level required by the SEP and remains an *Outcome To Be Achieved*.

¹¹¹ Monthly performance for this measure is as follows: January, 82%; February, 84%; March, 86%; April, 85%; May, 83%; June, 83%. Reported performance accounts for exceptions to the visits requirement.

¹¹² In an effort to assess the validity of exceptions, DCF reviewed 145 cases from a universe of cases from March 2021 in which worker visits with parents were not held due to a documented exception to the visits requirement. DCF determined that a valid exception was utilized in 108 (74%) of the 145 cases reviewed. During each month of the monitoring period, workers documented an average of approximately 200 exceptions to the visits requirement. As a result, the Monitor excluded 74% of exceptions in each month. For example, in June 2021 there were 1,374 children in custody with a goal of reunification. Data from NJ SPIRIT indicated that there were 201 documented cases that month in which workers documented that parents were missing or otherwise unavailable. Based on the sample, the Monitor excluded from the universe 149 (74%) of the 201 cases in June, making the universe of applicable children 1,225 (1,374-149).

Figure 3: Percentage of Families Who Had at least Twice per Month Face-to-Face Contact with Caseworker when the Goal is Reunification (June 2018 – June 2021)



Source: DCF data

Visits between Children in Custody and their Parents

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

Performance as of June 30, 2021:

In June 2021, an average of 899 (80%) of 1,124 applicable children visited virtually or in person weekly with their parents during the month. Between January and June 2021, a range of 80 to 85 percent of children had a weekly visit with their parents

when the permanency goal was reunification.¹¹³ An average of 87 percent of visits were conducted in person, across all the months of the monitoring period. This performance exceeds the SEP standard in each month.

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

Performance as of June 30, 2021:

In June 2021, 999 (93%) of 1,080 applicable children had at least two visits, either virtual or in person, with their parents during the month. Between January and June 2021, a monthly range of 93 to 96 percent of children had visits at least twice a month with their parents when their permanency goal was reunification.¹¹⁴ An average of 92 percent of these visits were conducted in person, across all the months of the monitoring period. DCF's performance exceeded the SEP standard in all but one month of the monitoring period. The Monitor considers this measure to be met.

¹¹³ Monthly performance for this measure is as follows: January, 81%; February, 83%; March, 85%; April, 84%; May, 82%; June, 80%. Reported performance accounts for valid exceptions to this visits requirement. Given the results of validation from a prior monitoring period, the Monitor excluded from the universe all cases in which DCF documented an exception to the parent-child visit requirement. For example, in June 2021, there was an average of 1,484 children with a goal of reunification across the four weeks of the month. Data from NJ SPIRIT indicated that in an average of 360 cases that month, the worker had determined that the parent was unavailable for the visit, the child declined the visit, or the visit was not required. Based on these data, the Monitor excluded those cases from the universe, making the universe of applicable children an average of 1,124 in June (1,484-360).

¹¹⁴ Monthly performance for this measure is as follows: January, 94%; February, 94%; March, 96%; April, 95%; May, 93%; June, 93%. Reported performance accounts for valid exceptions to this visit requirement. Given the results of validation activities from a prior monitoring period, the Monitor excluded from the universe all cases in which DCF documented an exception to the parent-child visit requirement. For example, in June 2021, there were 1,374 children with a goal of reunification. Data from NJ SPIRIT indicated that in 294 cases that month, the worker had determined that the parent was unavailable for the visit, the child declined the visit, or the visit was not required. Based on these data, the Monitor excluded those cases from the universe, making the universe of applicable children 1,080 in December (1,374-294).

Visits between Children in Custody and Sibling Placed Apart

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

Performance as of June 30, 2021:

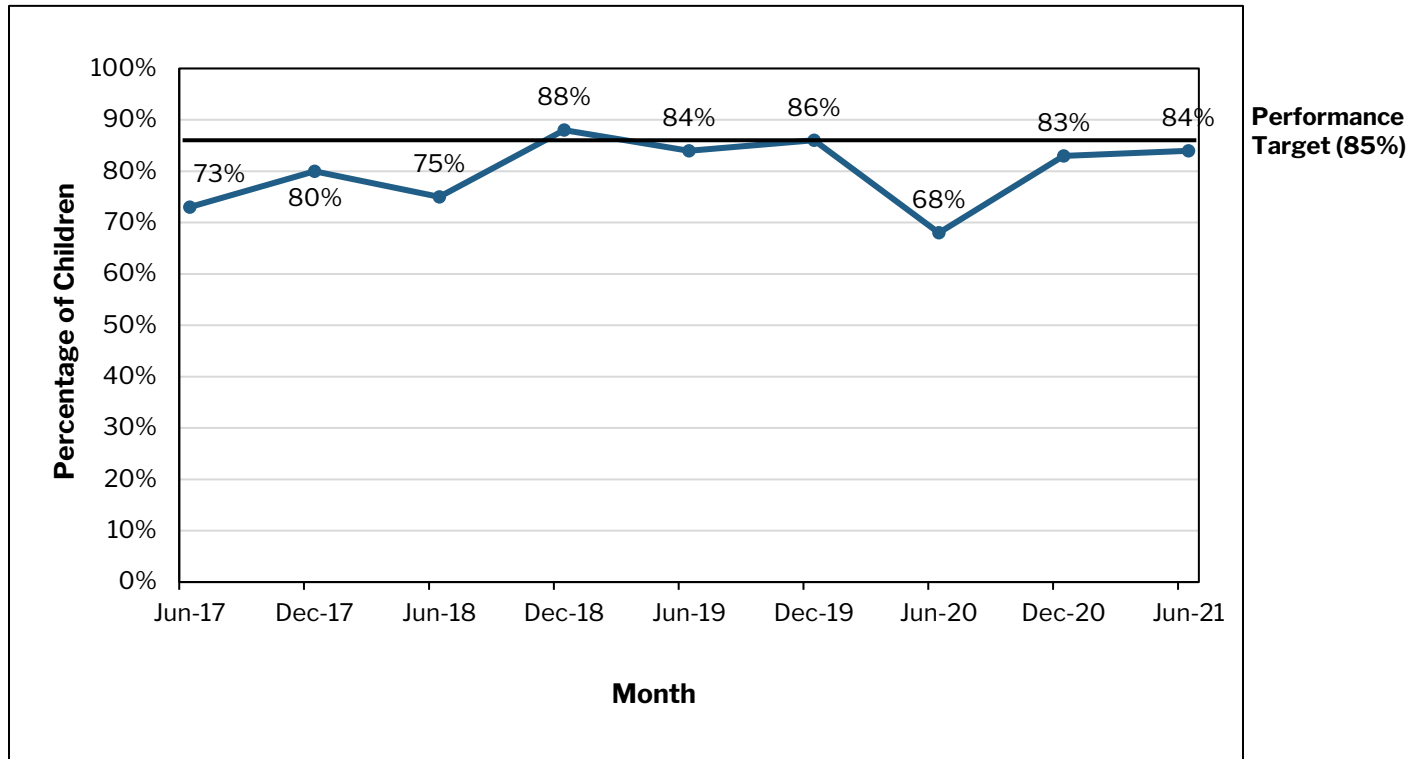
In June 2021, 843 (84%) of 999 applicable children in placement who had at least one sibling with whom they did not reside had at least one virtual or in person visit with one of their siblings during the month.¹¹⁵ Between January and June 2021, a range of 83 to 87 percent of children had at least monthly visits with one of their siblings with whom they were not placed.¹¹⁶ An average of 89 percent of these visits were conducted in person, across all of the months of the monitoring period.

DCF did not meet the performance standard in any month during this monitoring period. The Monitor considers the decline in performance to be temporary and most likely attributable to challenges related to the COVID-19 pandemic. Performance over the last several years is demonstrated in Figure 4.

¹¹⁵ Given results of validation activities from a prior monitoring period, the Monitor excluded 60% of the exceptions from each month from the universe. For example, in the month of June 2021, there were 1,066 children in custody with a sibling in care with whom they were not placed. Data from NJ SPIRIT indicated that there were 112 documented cases that month for which the worker had determined the visit was not required or the child was unavailable. Based on these data, the Monitor excluded from the universe 67 (60%) the 112 cases, making the universe of applicable children 999 (1,066-67).

¹¹⁶ Monthly performance for this measure is as follows: January, 83%; February, 83%; March, 87%; April, 87%; May, 85%; June, 84%. Reported performance accounts for valid exceptions to the visits requirement.

**Figure 4: Percentage of Children Who Visited with their Siblings
(June 2017 – June 2021)**



Source: DCF Data

F. PLACEMENT

Stable and appropriate placement for children in foster care is essential for child safety and well-being, and maintenance of family bonds. DCF policy requires siblings to be placed together whenever possible, and that children experience as few placement changes as possible while in out-of-home placement. There are five performance measures related to placement. As of the beginning of the reporting period, all had been previously met and were designated as Outcomes *To Be Maintained*: sibling placements of two to three children (SEP IV.G.32); sibling placements and recruitment of placements for four or more children (SEP IV.G.33); placement stability for children in care between 13 and 24 months (SEP IV.G.36); and placement stability for children in care 12 months or less (SEP IV.G.35). The state's performance with respect to placement stability is not newly assessed in this report as performance for the stability standards is measured annually at the end of each calendar year. Updated data will be included in the next monitoring report when these data are available. The most recent performance data can be found in Table 1B of this report. Data for recruitment of placements for sibling groups of four or more (SEP IV.G.34) is discussed below.

Recruitment of Placements for Sibling Groups of Four or More

Quantitative or Qualitative Measure	34. <u>Recruitment of Placements for 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.

Performance as of June 30, 2021:

As of June 30, 2021, DCF had a total of 45 large capacity SIBS homes; this is 10 fewer homes than at the end of December 2020 and reflects the fact that because of the COVID-19 pandemic, DCF suspended recruitment and retention efforts in mid-March 2020, and they remain suspended until May 2021. Of the 45 large capacity SIBS homes, 29 are kinship and 16 are non-kinship resource homes. Thirty-four of the 45 homes can accommodate four children – a decrease of nine homes from the previous period – and 11 homes can accommodate five or more children, a decrease of one home from the end of December 2020. Between January and June 2021, DCF recruited and licensed four new homes that can accommodate five or more children

and ten new homes that can accommodate four children. During the same period, a total of twenty-four homes either closed, downgraded, or left the program.¹¹⁷

Given the continued constraints involved in recruiting and licensing during the pandemic, the Monitor considers DCF to have met the SEP standard for this measure between January and June 2021.

¹¹⁷ Of the homes that could accommodate 5 or more children, 5 homes either closed or downgraded their capacity from the program: 2 homes closed upon adoption finalization, 1 home downgraded their capacity upon the adoption finalization of a sibling group; 1 home closed once a sibling group was reunified; and 1 home closed when a sibling group was moved to another relative. Of the homes that could accommodate 4 children, 19 homes either closed or downgraded their capacity from the program: 8 homes closed upon adoption and/or KLG finalization; 3 homes closed when a sibling group was reunified; 2 homes closed due to the families' personal circumstances; 1 home closed when a sibling group was moved to another relative; and 1 home closed due to moving to a new residence that could not accommodate the sibling group. A total of 3 homes downgraded their capacity upon adoption and/or KLG finalization; and 1 home downgraded their capacity when a sibling group was reunified.

G. MALTREATMENT OF CHILDREN AND YOUTH

A fundamental responsibility of DCF is ensuring the long-term safety of children who are receiving or have received services from CP&P. This means ensuring the safety of children who are placed in resource family homes and congregate facilities and preventing future maltreatment when children have been returned home.

There are four SEP performance measures related to maltreatment of children and youth. As of the beginning of the reporting period, all four measures were designated as Outcomes *To Be Maintained*: abuse and neglect of children in foster care (SEP III.H.12); repeat maltreatment for children remaining in their home (SEP IV.H.37); maltreatment post-reunification (SEP IV.H.38); and re-entry to placement (SEP IV.H.39). The state's performance is not newly assessed in this report as performance is measured at the end of each calendar year. Updated data will be included in the next monitoring report when these data are available. The most recent performance data can be found in Table 1B of this report.

H. TIMELY PERMANENCY

Regardless of age, gender, race or ethnicity, all children need and deserve a safe, nurturing family to protect and guide them. Safe family reunification is the preferred path, but permanency for children can be achieved in multiple ways, including kinship/guardianship and adoption. There are four SEP measures that focus on permanency for children. As of the beginning of the reporting period, all four measures were designated as Outcomes *To Be Maintained* – achieving permanency within 12 months (SEP IV.I.40), 24 months (SEP IV.I.41), 36 months (SEP IV.I.42), and 48 months (SEP IV.I.43). The state's performance on these permanency measures is not newly assessed in this report as performance is measured annually at the end of each calendar year. Updated data will be included in the next monitoring report when these data are available. The most recent performance data can be found in Table 1B of this report.

I. CHILD HEALTH UNITS

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.

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

Section III.E of the SEP requires the state to “maintain its network of child health units, adequately staffed by nurses in each Local Office.” This measure has been previously met and designated as an *Outcome To Be Maintained*. New Jersey’s Child Health Units, which provide each child placed in a resource home with a nurse assigned for health care case management, continue to be recognized by staff and external partners as a notable achievement of the state’s child welfare reform efforts.

Performance as of June 30, 2021:

On June 30, 2021, DCF employed 122 nurses, of which approximately 118 were available for coverage, and 45 staff assistants, of which approximately 44 were available for coverage. Between January and June 2021, there was an average of 120 nurses available for coverage, for an average ratio of one nurse to every 30 children in out-of-home care, exceeding the standard of one nurse to 50 children in out-of-home care. DCF performance in this area continues to meet the SEP standard.

J. OLDER YOUTH

Older youth in foster care often benefit from specialized support to prepare them for their transition to adulthood as they “age out” of the foster care system at age 21, or if they decide to sign themselves out of care beforehand. DCF offers many services to transition-age youth who have not been able to reunify with their families or find another permanent home with relatives or adoptive families. Measures related to older youth reinforce the vital opportunity to build Protective and Promotive Factors (PPFs) and promote healthy development and well-being for this age group.

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

Since 2019, performance on housing, education, and employment for older youth has been assessed annually through a specialized case record review, and thus are not newly assessed in this report. Quality of Case Planning and Services for Older Youth has historically been assessed through the QR, which were suspended during the COVID-19 pandemic and thus there are no new data in this report. Performance for independent living assessments is discussed below. Updated data on the other measures will be included in the next monitoring report when these data are available. The most recent performance data can be found in Table 1B of this report.

Independent Living Assessments

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

Performance as of June 30, 2021:

In June 2021, there were 470 youth ages 14 to 18 in out-of-home placement for at least six months; 399 (85%) had an Independent Living Assessment (ILA) completed. Monthly performance between January and June 2021 ranged from 84 to 87 percent.¹¹⁸ DCF performance remained below but close to the standard in each month of the monitoring period; the Monitor considers this measure to be met.

Quality of Case Planning and Services

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 ages 18 to 21 who have not achieved legal permanency shall receive acceptable quality case management and service planning.

Performance for this measure has been historically collected through Qualitative Reviews (QRs) of the experiences and outcomes of a selection of youth ages 18-21. In rating these cases, reviewers in prior years have both the standard QR protocol and a list of additional considerations relevant to this population, such as DCF's efforts to plan and support youth who identify as LGBTQI, and those who are victims of domestic violence, are expectant or parenting, or who have developmental disabilities.

Due to the COVID-19 pandemic, QRs were suspended and therefore there are no new data on this measure. DCF is working to develop a proposal on alternative ways to measure the quality of case planning and services for older youth, but this work has not been completed as of this report. As of the last measurement in CY 2019, 67% of cases reviewed met the standard.

¹¹⁸ Monthly performance for this measure is as follows: January, 86%; February, 84%; March, 85%; April, 87%; May, 86%; June, 85%.

Housing

Quantitative or Qualitative Measure	46. <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.

Stable housing is a critical, concrete support that older youth need to thrive as they transition to adulthood. With the help of specialized caseworkers, DCF works to ensure that all older youth exiting foster care have a housing plan in place. As of last measurement in CY 2020, 92% of applicable cases reviewed met the standard.

Employment/Education

Quantitative or Qualitative Measure	47. <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.

It is important that older youth exiting foster care have an opportunity to further their education and develop employment skills prior to their transition out of foster care. As of last measurement in CY 2020, 85% of applicable cases reviewed met the standard.

K. 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 Qualitative Review (QR).

While involved with DCF, children, youth and families often face transitions, including changes in family relationships, living arrangements, service providers or schools. Some transitions are more critical than others, but all require recognition and planning in order to be successful. DCF has historically used the Qualitative Review (QR) process to measure case practice that supports families to make successful transitions. Performance on this measure was evaluated using the *successful transitions* indicator in prior years. The QR process and protocol are discussed in detail in Section V.N *Accountability Through Qualitative Review* of this report.

Due to the COVID-19 pandemic, QRs were suspended and therefore there is no new data on this measure. DCF is working to develop a proposal on alternative ways to measure the quality of services to support family transitions, but this work has not been completed as of this report. As of the last measurement in CY 2019, 74% of cases reviewed met the standard.

L. CASELOADS

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

The SEP includes eight performance measures related to caseloads. As of the beginning of the monitoring period, all were designated as *Outcomes To Be Maintained*. These eight measures include Intake office caseloads (SEP IV.E.24); Intake individual worker caseloads (SEP IV.E.25); Adoption office caseloads (SEP IV.E.26); Adoption individual worker caseloads (SEP IV.E.27); Permanency office caseloads (SEP III.B.4); Permanency individual worker caseloads (SEP III.B.5); IAIU investigators individual caseloads (SEP III.B.3); and supervisory/worker ratio (SEP III.B.2). Performance for all eight measures during the current monitoring period is discussed below.

Table 2: CP&P Individual Worker Caseload Standards

Caseworker Function	Responsibility	Individual Caseload Standard (SEP IV.E and III.B)
Intake	Respond to community concerns regarding child safety and well-being. Specifically, receive referrals from the State Central Registry (SCR) and depending on the nature of the referral, respond between two hours and five days with a visit to the home and begin investigation or assessment. Complete investigation or assessment within 60 days.	Intake workers are to have no more than 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 per month. ¹¹⁹
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.

¹¹⁹ 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.

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

Intake

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

Quantitative or Qualitative Measure	24. <u>Intake Local Office Caseloads:</u> Local Offices will have an average caseload 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.

Performance as of June 30, 2021:

Performance data for January through June 2021 show that 99 percent of Local Offices met the Intake caseload standards. DCF continues to exceed the SEP standard.

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 as of June 30, 2021:

The state reported an average of 1,086 active Intake workers between January and June 2021. Among those 1,086 active Intake workers, an average of 1,075 (99%) had caseloads that met the standard. Specifically, in June 2021, 1,060 (99%) of 1,073 active Intake workers were following individual worker standards. DCF continues to meet the individual Intake worker caseload standard.

Data by Local Office show that during June 2021, performance ranged from 82 percent to 100 percent, with all Local Offices having all Intake workers in compliance with caseload standards.

DCF deploys Impact Teams (a supervisor and three workers) to a unit or a Local Office in different areas when intakes are unusually high, to assist in maintaining caseload standards by taking on investigation overflow. There are nine Impact Teams, one per Area Office.

“Shared” Cases between Intake and Permanency Workers

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

Intake workers are assigned a secondary worker designation in NJ SPIRIT for such cases with families who are already currently assigned a Permanency worker. According to DCF, this arrangement emphasizes the primary role of the Permanency worker in securing placement, facilitating visits, supporting the family to implement the case plan, and coordinating services. It also reflects the Permanency worker's responsibility to provide information to the Intake worker and to link the family to appropriate services and supports identified during the new investigation, thus relieving the Intake worker of the overall case management responsibility for the case. Intake workers continue to be responsible for the work required to complete investigative tasks and to reach and document an investigative finding. Thus, these secondary assignments are counted as one of the Intake worker's eight new referrals assigned in a month and as part of the total 14 open cases per month.

DCF reports that Intake supervisors in CP&P Local Offices are expected to appropriately manage the workload of staff in their units and consider an Intake worker's primary and secondary responsibilities when assigning new referrals. Table 3 provides the reported number of secondary assignments to Intake workers by month for this monitoring period.

Table 3: Number of CP&P Investigations and Secondary Intake Assignments by Month (January – June 2021)¹²⁰

Month	Total Investigations Assigned to Intake Workers for the Month	Secondary Intake Worker Assignments of CPS and CWS Investigations	
January	4,272	279	7%
February	4,087	264	6%
March	5,258	357	7%
April	4,762	331	7%
May	4,935	305	6%
June	4,831	341	7%

Source: DCF data

The Monitor reviewed monthly Local Office data on secondary assignments and found that on average, each Intake worker was assigned one secondary case at any given time during the period reviewed. The Monitor also found that an average of 11 percent of Intake workers received two or more secondary case assignments and an

¹²⁰ Total excludes intakes assigned to Impact, Permanency, Adoption and Advocacy Center workers and includes intakes assigned to workers on leave.

average of three percent of Intake workers received three or more secondary assignments each month during the monitoring period. Specifically, in the month of June 2021, 136 (13%) Intake workers received two or more secondary intake assignments and 23(2%) Intake workers received three or more secondary intake assignments. To ensure that Intake workload is properly managed, regardless of the combination of primary and secondary assignments, DCF continues to examine the processes used in Local Offices to make secondary assignments, as well as Local Office workflow management practices.

Assignment of Investigations to Non-Caseload Carrying Staff

On occasion, to handle the unpredictable flow of referrals for investigations, trained non-caseload carrying staff as well as caseload-carrying staff who are not part of Intake units (non-Intake caseload carrying staff) in Local Offices are assigned to investigations. DCF reports that all staff are required to complete First Responder training prior to being assigned an investigation and non-caseload carrying staff must have been similarly trained and receive supervision by the Intake supervisor. The Monitor's review of DCF's data for the months of January through June 2021 found that an average of one percent of investigations were assigned each month to non-caseload carrying staff, and an average of four percent were assigned to non-Intake caseload carrying staff.

DCF produces a Caseload Report Exception List that documents all instances of intakes identified as assigned to non-caseload carrying workers, and closely monitors the list on an ongoing basis. Table 4 shows the number of investigations assigned to non-caseload carrying staff, and Table 5 shows the number of investigations assigned to non-Intake caseload carrying staff.

**Table 4: Percentage of CP&P Investigations Assigned to Non-Caseload Carrying Staff by Month
(January– June 2021)¹²¹**

Month	Total Investigations Received in the Month	Number and Percentage of Investigations Assigned to Non-Case Carrying Staff	
January	4,642	136	3%
February	4,285	8	0.2%
March	5,518	24	0.4%
April	4,987	24	0.5%
May	5,174	31	1%
June	5,077	16	0.3%

Source: DCF data

**Table 5: Percentage of CP&P Investigations Assigned to Non-Intake Caseload Carrying Staff by Month
(January – June 2021)**

Month	Total Investigations Received in the Month	Number and Percentage of Investigations Assigned to Non- Intake Caseload Carrying Staff ¹²²	
January	4,642	211	5%
February	4,285	177	4%
March	5,518	214	4%
April	4,987	188	4%
May	5,174	197	4%
June	5,077	220	4%

Source: DCF data

¹²¹ Data are provided for investigations assigned within five days of intake receipt date and do not reflect additional assignments to an investigation after the first five days. DCF conducts monthly reviews of assignments to non-caseload carrying staff in NJ SPIRIT and has found that some investigations have been re-assigned to caseload carrying workers after the initial five days. As a result, the reported percentage of investigations assigned to non-caseload carrying staff may be lower than six percent.

¹²² This includes Permanency, Adoption, Impact and Advocacy Center caseload carrying workers.

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.

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 June 30, 2021:

Performance data for January through June 2021 show that 100 percent of Local Offices and 100 percent of individual workers continued to maintain the adoption caseload standard during this period.¹²³

Permanency

Quantitative or Qualitative Measure	4. <u>Permanency Local Office Caseloads</u> : Local offices will have an average caseload 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.
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¹²³ Reported performance is the average of DCF's performance in meeting individual caseload standards during this six month monitoring period.

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.
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Performance as of June 30, 2021:

Performance data for January through June 2021 show that 100 percent of Local Offices and 100 percent of individual workers continued to maintain the permanency caseload standard during this period.¹²⁴

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 June 30, 2021:

DCF data show 100 percent of individual workers maintained the IAIU caseload standard for the period of January through June 2021.

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 June 30, 2021:

Performance data for January through June 2021 show that 100 percent of CP&P Local Offices had sufficient supervisors to maintain ratios of five workers to one supervisor.

¹²⁴ Ibid.

M. DEPUTY ATTORNEYS GENERAL STAFFING

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

Performance as of June 30, 2021:

As of June 30, 2021, 144 Deputy Attorneys General (DAsG) staff positions assigned to work with DCF were filled. Of those, four DAG were on full time leave. Thus, there were a total of 140 (97%) available DAsG. DCF reports that in addition to these positions, DAsG outside of the DCF Practice Group have dedicated some of their time to DCF matters. DCF continues to meet the SEP standard for this measure.

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

DCF's Qualitative Reviews (QRs) and ChildStat forums were suspended in March 2020 due to the COVID-19 pandemic and DCF has reported that they are not planning to resume QRs going forward. As previously reported, DCF conducted targeted reviews to assess the quality of CP&P's work with families, particularly at the start of the crisis. The data from these reviews, which were conducted by the Office of Quality, were shared with DCF leadership to help them understand staff's work with children and families in the field.

DCF has reported in the prior monitoring period and again this period that it is their intention to redesign its CQI processes to integrate its Solution Based Casework (SBC) approach and the Child and Family Service Review (CFSR) results with its Case Practice Model. The Monitor, DCF, and Plaintiffs are negotiating a proposed alternative to measuring performance for those areas previously captured with QR data. The Monitor has asked for and is hoping to shortly receive a specific proposal from DCF on how specifically they will measure the quality elements formerly measured through the QSR from their new approaches.

Until the pandemic, New Jersey's QR process was used to assess the status of children, youth and families, the status of case practice, and system performance in each of the counties. Select QR results were also used to measure performance for several SEP requirements, three of which are designated *Outcomes To Be Achieved*: Quality of Teaming (SEP IV.B.20), Quality of Case Plans (SEP IV.D.23) and Services to Support Transition (SEP IV.J.44); and two of which are designated *Outcomes To Be Maintained*: Educational Needs (SEP III.G.11) and Quality of Case Planning and Services for Older Youth (SEP IV.K.46). The Monitor has communicated to the State the need to reach agreement on the alternative ways in which DCF will assess the Settlement Agreement outcomes that were previously assessed through QRs. As alternative methods have not yet been agreed to or put in place, there are no new data to report on these measures.

O. NEEDS ASSESSMENT

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.

New Jersey County Human Service Advisory Councils (HSACs) are charged with gathering information related to local service needs, the impact of those needs on their population, and key barriers to improved service delivery.

In 2018, DCF established a workgroup with statewide Human Service Directors (HSDs) that met monthly to outline methodology and develop guidance, focus group protocols, a survey, and a report template for the HSACs to use as they collect data. Throughout 2019 the workgroup met to finalize the assessment process with the HSACs and key stakeholders. In 2020, the DCF workgroup established a uniform reporting method for the counties. DCF also worked with Rutgers University School of Social Work to design county-based data profiles to provide the HSACs with population data and the most recent DCF administrative data. These profiles are intended to help support HSACs in identifying, prioritizing, and addressing county needs, services, and resources, and include such areas as housing, food, health care, behavioral/mental health services for children and adults, employment and career services, services for families caring for a child of a relative/family friend, substance use disorder services, etc.

Between November 2019 and January 2021, DCF and county HSACs partnered to assess the strengths and needs of each county and whether the county had access to the appropriate services required to support families. To support implementation, DCF divided counties into two groups, each of which are scheduled to report to DCF every two years. By the end of January 2021, the two groups of county HSACs – including all 21 counties – with technical assistance from the DCF Office of Quality (OOQ), completed their assessments, which included data collection via surveys, focus groups, and key informant interviews, and submitted county-specific summary

reports.¹²⁵ In August 2021, DCF released the Human Services Advisory Council (HSACs) Needs Assessment Synthesis Report, in which the Institute for Families at Rutgers School of Social Work synthesizes the HSACs needs assessment reports from all 21 counties.¹²⁶ The six areas of need identified by the counties are:

- housing – named as a high priority by all 21 counties and made more urgent by COVID-19 pandemic;
- health care;
- employment; and
- career services.

Specialized areas of need identified in the report include behavioral and mental health services for adults and children, with an emphasis on the insufficient number of providers, especially child and adolescent psychiatrists, particularly those with bilingual/multi-cultural staff, and long wait lists. Other specialized service areas of need include domestic violence services, parenting skills services, services for relatives caring for children, and legal/advocacy services.

DCF's report details widespread barriers to services, such as the public's lack of awareness of the services currently available (reported by 50 percent of participants within every service area except childcare); transportation (including lack of proximity to public transportation, limited hours of transportation services, and cost); and wait lists for needed services. Finally, the report provides recommendations to improve access to services for each area of need for each county, including expanding service delivery to underserved areas, developing a centralized process for accessing services, providing flexible evening and weekend hours, increasing funding to expand services, and direct financial assistance to those in need.

Going forward, DCF will use this comprehensive synthesis and data to inform decisions regarding resource allocation, programming, and CQI activities. The next round of needs assessments, which will occur in 2022, will focus on family and constituent voice.

¹²⁵ The counties in the first group are: Sussex, Burlington, Passaic, Salem, Hudson, Monmouth, Hunterdon, Union, Gloucester, and Essex. The counties in the second group are: Warren, Bergen, Morris, Somerset, Middlesex, Mercer, Ocean, Camden, Atlantic, Cumberland, and Cape May.

¹²⁶ The HSAC Needs Assessment Synthesis Report can be found at <https://www.nj.gov/dcf/news/HSAC.Synthesis.Report-June.2.2021.pdf>

P. FISCAL YEAR BUDGET

Governor Murphy's FY 2021 budget, which became effective July 1, 2020 and covered the monitoring period of January to June 2021, included \$1.208 billion in state funds for DCF. During this monitoring period, DCF received supplemental funding of \$3.7 million for a grant to support the Coalition Against Sexual Assault. Also, DCF expended \$14 million in federal funding related to COVID-19 (Coronavirus Relief Fund [CRF], Coronavirus Aid, Relief, and Economic Security [CARES]¹²⁷ and Federal Medical Assistance Percentage [FMAP] increases¹²⁸) to support cleaning and sanitization services in DCF facilities, as well as out-of-home and Family Support Organization (FSO) providers.

Governor Murphy's FY 2022 budget, approved on June 29, 2021 and effective July 1, 2021, totals \$1.259 billion for DCF, an increase of \$40 million or 3.3 percent over the FY 2021 adjusted appropriation of \$1.219 billion. The budget represents an additional \$62.8 million for CSOC to rebalance out-of-home and in-community service rates to better serve children with emotional and behavioral health care needs.¹²⁹ In August 2021, CSOC received approval from the Centers for Medicare and Medicaid Services (CMS) for its State Plan amendment, which represents a 20% increase in annualized budget authority across CSOC Medicaid State Plan and waiver services. DCF reports the funding will stabilize CSOC, support the development of capacity to meet demand, and ensure that agencies can provide competitive wages for staff and provide quality services.

In the Monitor's judgment, the requirements of the *Charlie and Nadine H.* SEP continue to be adequately funded.

¹²⁷ To see the text of H.R. 748 Coronavirus Aid, Relief, and Economic Security (CARES) Act, go to: <https://www.congress.gov/116/bills/hr748/BILLS-116hr748enr.pdf>

¹²⁸ To see the text of H.R. 6201 Families First Coronavirus Response Act, go to: <https://www.congress.gov/bills/116/congress/house-bill/6201/text>

¹²⁹ To read the DCF appropriation in the FY 2022 State Budget, go to: <https://www.nj.gov/treasury/omb/publications/22budget/pdf/FY22GBM.pdf>

APPENDIX A:

Glossary of Acronyms Used in the Monitoring Report

ACEs:	Adverse Childhood Experiences	HCCM:	Health Care Case Manager
AOC:	Administrative Office of the Courts	HSAC:	Human Service Advisory Council
CARES:	Coronavirus Aid, Relief, and Economic Security Act	IAIU:	Institutional Abuse Investigative Unit
CFNFRB:	Child Fatality and Near Fatality Review Board	ILA:	Independent Living Assessment
CFSR:	Child and Family Services Review	LGBTQI:	Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex
CHU:	Child Health Unit	LOM:	Local Office Manager
CHCS:	Center for Health Care Strategies	MSA:	Modified Settlement Agreement
CIACC:	Children's Interagency Coordinating Council	MRSS:	Mobile Response and Stabilization Services
CIC:	Children in Court	NHA:	Nurtured Heart Approach
CMO:	Care Management Organization	NJYRS:	New Jersey Youth Resource Spot
CP&P:	Division of Child Protection and Permanency	NPCS:	National Partnership for Child Safety
CPM:	Case Practice Model	OAS:	Office of Adolescent Services
CPS:	Child Protective Services	OFV:	Office of Family Voice
CQI:	Continuous Quality Improvement	OOE:	Office of Education
CSOC:	Children's System of Care	OOQ:	Office of Quality
CSSP:	Center for the Study of Social Policy	OOR:	Office of Resilience
CWS:	Child Welfare Services	OPMA:	Office of Performance Management and Accountability
DAsG:	Deputy Attorneys General	ORF:	Office of Resource Families
DCF:	Department of Children and Families	ORL:	Office of Resource Licensing
DOW:	Division on Women	OSHW:	Office of Staff Health and Wellness
FEC:	Fatherhood Engagement Committee	OTPD:	Office of Training and Professional Development
FCP:	Office of Family and Community Partnerships	PAP:	Predict Align Prevent
FMAP:	Federal Medical Assistance Percentage	PIP:	Performance Improvement Plan
FSC:	Family Success Centers	PPE:	Personal Protective Equipment
FSO:	Family Support Organization	PPFs:	Protective and Promotive Factors
FTM:	Family Team Meeting		

PRIDE:	Parent Resource for Information Development and Education training
PRSS:	Peer Recovery Support Services
QR:	Qualitative Review(s)
RESC:	Race Equity Steering Committee
SACWIS:	Statewide Automated Child Welfare Information System
SAMHSA:	Substance Abuse and Mental Health Services Administration
SBC:	Solution Based Casework
SEP:	Sustainability and Exit Plan
SCR:	State Central Registry
SDM:	Structured Decision-Making tool
SIBS:	Siblings in Best Placement Settings
USDA:	United States Department of Agriculture

APPENDIX B:

Sources of DCF Data and Monitoring Methodology

Reports that DCF currently publishes on its website include:

- **Commissioner's Monthly Report**¹³⁰ – *Current and produced monthly.* This report gives a broad data snapshot of various DCF services. The report includes information from CP&P, Office of Adolescent Services (OAS), Institutional Abuse Investigation Unit (IAIU), Children's System of Care (CSOC), Family & Community Partnerships (FCP), and the Division on Women (DOW).
- **Screening and Investigations Report**¹³¹ – *Current and produced monthly.* This report details State Central Registry (SCR) activity, including data regarding calls to the Child Abuse and Neglect Hotline, assignments to CP&P offices and trends in Child Protective Services (CPS) Reports and Child Welfare Services (CWS) Referrals.
- **Workforce Report**¹³² – *Last report dated January 2018.* This report provides information regarding the demographics and characteristics of DCP&P workers, as well as a variety of indicators of workforce planning and development, using fiscal year (FY) (July 1 – June 30) data. Going forward, elements of this report will be incorporated into the new comprehensive annual report described above.
- **Children's Interagency Coordinating Council Report**¹³³ – *Current and produced monthly.* This report details referral and service activity for CSOC. It includes demographic data, referral sources, reasons for and resolutions of calls to CSOC, information on substance use and school attendance, as well as authorized services provided.

¹³⁰ To see all Commissioner's Monthly Reports, go to: <http://www.nj.gov/dcf/childdata/continuous/>

¹³¹ To see all Screening and Investigations Reports, go to: <http://www.nj.gov/dcf/childdata/protection/screening/>

¹³² To see DCF's Workforce Report: 2016-2017 Updates, go to <http://www.nj.gov/dcf/childdata/exitplan/NJ.DCF.Workforce.Report-FY17.pdf>. To see DCF's Workforce: Preliminary Highlights 2014-2015 Report, go to:

http://www.state.nj.us/dcf/childdata/orgdev/NJ.DCF.Workforce.Report_2015.pdf

¹³³ To see all Children's Interagency Coordinating Council (CIACC) Reports, go to: <http://www.nj.gov/dcf/childdata/interagency/>

- **New Jersey Youth Resource Spot**¹³⁴ – *Ongoing and updated periodically.* This website offers the latest resources, opportunities, news, and events for young people served by DCF. It includes information about the Youth Advisory Network, as well as additional resources available in each county and statewide. As mentioned in Section II. *Summary of Performance*, the NJYRS website is being updated and redesigned as a result of feedback from the Youth Council.
- **DCF Needs Assessment**– *Ongoing and updated periodically.* The SEP requires DCF to evaluate the need for additional placements and services to meet the needs of children, youth and their families involved with DCF, with each county assessed at least once every three years. New Jersey County Human Service Advisory Councils (HSACs) are charged with gathering information related to local service needs, the impact of those needs on their population, and key barriers to improved service delivery. In August 2021, DCF released the HSACs Needs Assessment Synthesis Report,¹³⁵ in which the Institute for Families at Rutgers School of Social Work synthesizes the HSACs needs assessment reports from all 21 counties. The next round of needs assessments, which will occur in 2022, will focus on family and constituent voice.

Other DCF webpages that have been developed or significantly updated during the COVID-19 pandemic and are referenced in footnotes throughout this report:

- [DCF Race Equity](#)
- [DCF Office of Resilience](#)
- [DCF/HSAC County Needs Assessment](#)
- [DCF Office of Adolescent Services 2020-2024 Chafee Plan](#)

The Monitor engaged in the following data verification activities for the period of January to June 2021.

- **Family Team Meeting Data Review** - The Monitor collaborated with DCF to review experiences of 59 children and families to verify all instances in which workers determined that Family Team Meetings (FTMs) were not required because parents were unavailable, missing, or declined the meeting. DCF and the Monitor completed a joint review of all cases of documented exceptions to

¹³⁴ To see New Jersey's Youth Resource Spot, go to: <http://www.njyrs.org/>

¹³⁵ The HSAC Needs Assessment Synthesis Report can be found at <https://www.nj.gov/dcf/news/HSAC.Synthesis.Report-June.2.2021.pdf>

the FTM requirement in each month from January 1 to June 30, 2021. Further discussion of current performance on these measures is included in Section V.B *Family Team Meetings*.

- **Other Monitoring Activities** - Given the COVID-19 pandemic, the Monitor staff were unable to complete site visits in person to discuss the reform efforts with staff and providers on the ground. However, the Monitor attending virtual gatherings with staff and other stakeholders across the state about New Jersey's reform efforts, including a webinar about the Office of Monitoring, a forum on the HSAC's involvement with the Needs Assessment, a Youth Council meeting, and a webinar with Advocates for Children about New Jersey's progress with Child Welfare and Child Health. Monitor staff also attended DCF's Child Fatality and Near Fatality Review Board (CFNFRB) meetings. Though DCF's ChildStat meetings and Qualitative Reviews (QR) have been suspended during the pandemic, the Monitor has continued to track the progress of DCF through web updates and regular meetings with leadership.

APPENDIX C:
DCF Organizational Chart

