Progress of the New Jersey Department of Children and Families

Monitoring Period XX
(January 1 – June 30, 2017)

Charlie and Nadine H. v. Christie

January 11, 2018

Center for the Study of Social Policy

Progress of the New Jersey Department of Children and Families

Monitoring Period XX Report for *Charlie and Nadine H. v. Christie*

January 1 – June 30, 2017

TABLE OF CONTENTS

I. INTRODUCTION 1

II. SUMMARY OF PERFORMANCE DURING JANUARY THROUGH JUNE 2017 5

III. CHILD AND FAMILY OUTCOMES AND CASE PRACTICE PERFORMANCE MEASURES 9

IV. FOUNDATIONAL ELEMENTS 36

A. CASE PRACTICE MODEL 36

B. APPROPRIATE PLACEMENTS 37

C. SERVICE ARRAY 38

D. PERMANENCY 39

V. SUSTAINABILITY AND EXIT PLAN (SEP) PERFORMANCE MEASURES *TO BE ACHIEVED* AND *TO BE MAINTAINED* 40

A. INVESTIGATIONS 40

B. FAMILY TEAM MEETINGS 43

C. QUALITY OF CASE AND SERVICE PLANNING 48

D. EDUCATION 50

E. VISITATION 51

F. PLACEMENT 56

G. MALTREATMENT OF CHILDREN AND YOUTH 58

H. TIMELY PERMANENCY 58

I. CHILD HEALTH UNITS 59

J. OLDER YOUTH 60

K. SERVICES TO SUPPORT TRANSITION 62

L. CASELOADS 63

M. DAsG STAFFING 71

N. ACCOUNTABILITY THROUGH QUALITATIVE REVIEW AND THE PRODUCTION AND USE OF ACCURATE DATA 72

O. NEEDS ASSESSMENT 73

P. FISCAL YEAR BUDGET 75

APPENDICES

A. Glossary of Acronyms Used in Monitoring Report……..76

B. DCF Organizational Chart as of November 2017…….77

LIST OF TABLES

TABLE

1. *Charlie and Nadine H. v. Christie* Child and Family Outcome and Case Practice Performance Measures (Summary of Performance as of June 30, 2017) 10
2. At Least Two Family Team Meetings Held After 12 Months in Placement with a Goal Other Than Reunification (January – June 2017) 46
3. CP&P Individual Worker Caseload Standards 63
4. Number of CP&P Investigations and Secondary Intake Assignments by Month (January – June 2017) 67
5. Percentage of CP&P Investigations Assigned to Non-Caseload Carrying Staff by Month (January – June 2017) 68
6. Percentage of CP&P Investigations Assigned to Non-Intake Caseload Carrying Staff by Month (January – June 2017) 69

LIST OF FIGURES

FIGURE

1. At Least Two Family Team Meetings Held After 12 Months in Placement with a Goal Other Than Reunification (January – June 2017) 47
2. Percent of Families who had at Least Twice per Month Face-to-Face Contact with Caseworker when the Goal is Reunification (January – June 2017) 53
3. Percent of Children who had at Least Monthly Visits with Siblings, for Children not Placed with Siblings (December 2010 – June 2017) 55

I. INTRODUCTION

The Center for the Study of Social Policy was appointed by the Honorable Stanley R. Chesler of the United States District Court for the District of New Jersey as Federal Monitor of the class action lawsuit *Charlie and Nadine H. v. Christie*, aimed at improving outcomes for children 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 on December 1, 2005; the Modified Settlement Agreement (MSA) entered on July 17, 2006; and now the Sustainability and Exit Plan (SEP) entered on November 4, 2015, that supersedes the MSA. This is the fourth monitoring report measuring progress under the SEP and includes performance data for the period January 1 through June 30, 2017.[1]

Monitoring Methodology

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

As part of its multi-year reform, DCF's capacity to accurately collect and analyze data and make it regularly available to the public has significantly grown. Reflecting this increased capacity, the Monitor first looks to the state's data for analysis and takes steps to validate its accuracy. The Monitor also retains the authority to engage in independent data collection and analysis where needed. The state has committed to continuing to expand the data that it publishes on its public website.[3] In addition, DCF now publishes a large amount of data regularly on the publically accessible New Jersey Child Welfare Data Hub, which was developed in collaboration with Rutgers University.[4] The Data Portal, launched in November 2016, allows users to view customized charts and graphs related to New Jersey child welfare data, and incorporates information from the formerly produced quarterly Demographics Report.

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

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

- Screening and Investigations Report[6] – *Current and produced monthly*. This report details State Central Registry (SCR) activity, including data regarding calls to the Child Abuse and Neglect Hotline,

[1] Copies of all Monitoring Reports can be found at: http://www.cssp.org/publications/child-welfare?type=child_welfare_class_action_reform&title=Child%20Welfare:%20Class%20Action%20Reform
[2] 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.
[3] To see DCF's public website, go to: http://www.state.nj.us/dcf/about/
[4] To see the New Jersey Child Welfare Data Hub, go to: https://njchilddata.rutgers.edu/#home
[5] To see all Commissioner's Monthly Reports, go to: http://www.nj.gov/dcf/childdata/continuous/
[6] To see all Screening and Investigations Reports, go to: http://www.nj.gov/dcf/childdata/protection/screening/

assignments to CP&P offices and trends in Child Protective Services (CPS) Reports and Child Welfare Services (CWS) Referrals.

- Workforce Report[7] – *Planned to be produced annually; next report expected December 2017*. This report provides information regarding the demographics and characteristics of current workers, as well as a variety of indicators of workforce planning and development.

- Children's Interagency Coordinating Council Report[8] – *Current and produced monthly*. This summary report details referral and service activity for CSOC. It also includes demographics, referral sources, reasons, resolutions and services provided.

- New Jersey Youth Resource Spot[9] – *Ongoing and updated as relevant*. The website offers the latest resources, opportunities, news and events for young people. This site includes a list of current Youth Advisory Boards, as well as additional resources available in each county and statewide.

- DCF Needs Assessment[10] – *Planned to be produced annually*. DCF will produce an annual report on its website and will report twice annually to the Monitor. The most recent report entitled *DCF Needs Assessment 2016 Report #2: Qualitative Findings* updates interim findings on DCF's three year multi-phase Needs Assessment process to identify the resources needed to serve families with children at risk for entering out-of-home placement and those already in placement. The final report is anticipated in February 2018.

- Adoptions Report[11] – *Planned to be produced annually; last report dated 2016.* This report reviews CP&P adoption data and practice related to SEP requirements. This report is based on calendar year data.

- New Jersey's Child Welfare Outcomes Report[12] – *Current and produced annually; last report dated May 2017*. This report focuses on longitudinal, quantitative data measuring outcomes of children served by CP&P.

- Healthcare of Children in Out-of-Home Placement[13] – *To be produced annually; first report dated December 2017.* This report is a review of the health indicators identified in the SEP and is based on state FY (July 1 – June 30) data. Data from this report are not reflected in this monitoring report given the December 11, 2017 completion date.

[7] To see the NJ DCF Workforce Report, go to: http://www.nj.gov/dcf/childdata/exitplan/NJ.DCF.Workforce.Report_2015-2016.pdf. To see the NJ DCF Workforce: Preliminary Highlights 2014-2015 Report, go to: http://www.state.nj.us/dcf/childdata/orgdev/NJ.DCF.Workforce.Report_2015.pdf
[8] To see all Children's InterAgency Coordinating Council Reports, go to: http://www.nj.gov/dcf/childdata/interagency/
[9] To see the New Jersey Youth Resource Spot, go to: http://www.njyrs.org/
[10] To See the CP&P Needs Assessment 2016 Report #2 go to: http://www.nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Quality.Report_4.17.pdf. To see the CP&P Needs Assessment Interim Report, go to: http://www.state.nj.us/dcf/childdata/protection/DCF.Needs.Assessment.Interim.Report_3.16.pdf
[11] To see the Adoptions Report, go to: http://www.nj.gov/dcf/childdata/exitplan/AdoptionReport2016.pdf
[12] To see the New Jersey's Child Welfare Outcomes Report go to: http://www.nj.gov/dcf/childdata/exitplan/Outcomes.Report.and.Executive.Summary-2017.pdf
[13] To see the Healthcare of Children in Out-of-Home Placement 2017 report, go to: http://www.nj.gov/dcf/news/reportsnewsletters/dcfreportsnewsletters/2017_Child.Health.Report.pdf

In addition, the following report is not yet available, but DCF has committed to producing and publishing it on its website:

- Our Work with Children, Youth and Families Report – *To be produced annually; first report expected December 2017*. This report will analyze DCF's implementation of the Case Practice Model (CPM), largely utilizing annual data from the Qualitative Reviews (QRs) as well as selected quantitative data. This report will use qualitative data to uncover trends and provide insight into systems issues. The formerly produced annual Qualitative Review report will be incorporated into this report.

Between January and June 2017, the Monitor engaged in the following additional verification activities:

- ***Caseload Data Verification***

  The Monitor conducted a verification review through a telephone survey conducted from June through August 2017 of 170 workers to verify their individual caseloads during the period January to June 2017. Findings from this review are discussed in Section V.L – Caseloads – of this report.

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

  The Monitor collaborated with DCF to review case records of 81 youth ages 18 to 21 who exited care between January and June 2017 without achieving permanency. The review focused on the housing, education and employment status of these youth. Findings from the review are discussed in Section V.J – Older Youth – of this report.

- ***Family Team Meeting Data Review***

  The Monitor reviewed 143 cases from January to June 2017 to verify how workers were using and documenting instances in which Family Team Meetings (FTMs) that should be held in the first 12 months of a child's placement were not required due to circumstances beyond the agency's control (IV.B.17). The Monitor also reviewed all 11 cases in which workers documented that FTMs after 12 months of placement when there is a goal of reunification were not required due to circumstances beyond their control (IV.B.18). Further discussion of current performance on these measures is included in Section V.B – Family Team Meetings – of this report.

- ***Other Monitoring Activities***

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

Structure of the Report

Section II provides an overview of the state's accomplishments and challenges during this monitoring period. Section III provides summary performance data on each of the outcomes and performance measures required by the SEP in Table 1: *Charlie and Nadine H. v. Christie* Child and Family Outcome and Case Practice Performance Measures.

Section IV provides information related to the SEP Foundational Elements.[14] 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 visitation (Sections V.B, V.C & V.E);
- Educational engagement for children in out-of-home care (Section V.D);
- Placement of children in out-of-home settings (Section V.F);
- Efforts to achieve permanency for children either through reunification with family, legal guardianship or adoption (Section V.H);
- Provision of health care services to children and families (Section V.I);
- Services to older youth (Section V.J);
- Caseloads (Section V.L);
- District Attorneys General (DAsG) Staffing (Section V.M);
- Accountability through the Qualitative Review and the production and use of accurate data (Section V.N);
- Needs Assessment (Section V.O); and
- Fiscal Year 2018 budget (Section V.P).

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

II. SUMMARY OF PERFORMANCE DURING JANUARY THROUGH JUNE 2017

During this period, DCF continued to maintain acceptable performance on each of the SEP Foundational Elements in such important areas as health care for children in out-of-home placement and pre- and in-service training for child welfare staff, supervisors and managers.

DCF began and ended the current monitoring period having met 36 of 48 SEP performance measures, [15] with one measure partially achieved. Of the 12 remaining Outcomes *To Be Achieved*, eight are not assessed in this report because they are based on data that are collected and reported annually.[16]

DCF did not newly meet any additional Outcomes *To Be Achieved* this monitoring period. In addition, while still categorized as Outcomes *To Be Maintained*, DCF's performance declined below the performance standard on some measures. After careful review of these data, the Monitor has determined that it will not recommend re-categorization of these measures as Outcomes *To Be Achieved*, either because it considers the decline to be insubstantial or because DCF has agreed to undertake corrective actions to remedy the decline.[17] As indicated in this report, the Monitor will continue to closely assess performance on those measures in the next monitoring period to determine if re-categorization by the Court may be necessary.

The discussion below highlights current performance within specific content areas.

Appropriate Placements and Services

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

As of June 30, 2017, a total of 6,607 children were in out-of-home placement; 6,025 (91%) children were in family-like settings with 52 percent placed in non-kinship resource family homes and 39 percent in kinship homes. Seven percent of children were placed in group and residential settings and two percent were in independent living programs. Between January and June 2017, DCF recruited and licensed 638 kinship and non-kinship resource family homes; 395 (62%) were kinship homes and 243 (38%) were non-kinship homes.

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

[16] The Monitor will report on updated data for these measures in the next monitoring report.

[17] Timeliness of Investigation Completion (60 days) (IV.A.13), Subsequent FTMs within 12 months (IV.B.17) and Initial Case Plans (IV.D.22) fell below the SEP standard for the second consecutive monitoring period. Subsequent FTMs after 12 months – Reunification Goal (IV.B.18) fell below the SEP standard for the third consecutive monitoring period. Caseworker Contacts with Children – New Placement/Placement Change (III.F.9) fell slightly below the SEP standard for the fourth consecutive monitoring period. The Monitor considers Measure 13 to be met given that the fluctuation in performance is insubstantial. DCF has already begun implementing corrective action for Measure 9 and Measure 18. As a result of the decline in performance for Measure 17 and Measure 22, the state is working to diagnose barriers to performance and pursue corrective actions.

As of June 30, 2017, there were a total of 4,856 licensed resource family homes in the state, 1,780 (37%) of which were kinship homes.

As described in more detail in Section V.F, DCF continues its recruitment planning and targeting processes, with a particular focus on tailoring recruitment towards homes willing and able to accommodate large sibling groups. As of June 30, 2017, there were a total of 98 large capacity Siblings in Best Placement Settings (SIBS) homes: 22 homes with a capacity to accommodate five or more children and 76 homes that could accommodate four children.

Family Team Meetings

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

DCF has been struggling to maintain solid performance on FTMs for children in care within 12 months of placement with a goal of reunification (IV.B.17) and for children in care after 12 months with a goal of reunification (IV.B.18). Between January and June 2017, DCF implemented a corrective action plan for Measure 18, aimed at improving performance on FTMs for children in care after 12 months with a goal of reunification. The plan required Local Office Managers (LOMs) and Area Directors to review the records of cases in which FTMs did not occur and to assign FTM coordinators in each Local Office to more closely monitor performance. DCF anticipates that performance improvement strategies implemented as part of its corrective action plan for Measure 18 will also contribute to improved performance for Measure 17. The drop in performance on the FTM measures noted above is concerning, but the Monitor has determined to wait to review data from July through December 2017 to assess whether DCF's performance improvement strategies are effective before considering recommending a change in categorization for these two measures.

Visitation

Visits between children in foster care and their workers, parents and siblings is a fundamental element of child welfare practice and essential to ensuring safety, assessing children's well-being, strengthening families and achieving permanency. As in the previous monitoring period, DCF maintained satisfactory performance with respect to three of the six SEP visitation measures this monitoring period, exceeding requirements for caseworker visits with children in ongoing placements (III.F.10) and visits between children and their parents (IV.F.29, IV.F.30). As in the previous monitoring period, DCF has not yet met the measures that relate to caseworker contact with families with a reunification goal (IV.F.28) and sibling visits (IV.F.31). DCF's performance on caseworker visits with children in new placements (III.F.9) had fallen just below the SEP standard in some months in recent monitoring periods. While performance improved this period, it remained slightly below the SEP standard in three of six months.

Services to Older Youth

With the strong leadership and guidance of the Office of Adolescent Services (OAS), DCF has continued to improve practice and services for older youth. The SEP includes four performance measures related to older youth. As discussed in Section V.J, as of January 2017, all measures related to older youth were designated as Outcomes *To Be Maintained*. For the first time this reporting period, 100 percent of youth exiting care without achieving permanency had a housing plan upon exit (IV.K.47). DCF also continued to improve performance related to employment and education of older youth exiting care without achieving permanency. Ninety four percent of youth exiting care without achieving permanency were employed, enrolled in educational programs or vocational training, or there was documented evidence of efforts to help the youth secure employment or training (IV.K.48). These are significant achievements, which have come from sustained attention to needs at a critical moment in the lives of the older youth that DCF serves.

Accountability for Case Practice

Qualitative Reviews

DCF conducts Qualitative Reviews (QRs) of a random sample of cases each year to measure the quality of its work, to hold itself accountable for practicing in accordance with its Case Practice Model (CPM) and for consistently achieving results in its everyday practice with children, youth and families. Through the QR process, trained two-person review teams – including DCF staff at various levels, community stakeholders and Monitor staff – review CP&P records and interview as many people as possible who are involved with the children and families served by DCF, whether the children remain in the home or are in placement. Randomly selected cases from each county are reviewed once every two years as part of a robust and well-supported performance improvement process. At the conclusion of each week of QR, DCF's Office of Performance, Management and Accountability (PMA) works with staff in each county, through its Office of Quality, to develop a Performance Improvement Plan (PIP) with short- and long-term goals to strengthen practice. The Office of Quality approves each PIP, aggregates results and shares them with leaders across DCF's divisions. Findings from the QRs are incorporated into existing training and supervisory tools and used to identify systemic opportunities for improvement. QR measures are generally reported by the Monitor on an annual basis. The Monitor will report on the data for all QR measures for the period January 1 through December 31, 2017 in the next monitoring report.

In April 2017, DCF conducted a special State Central Registry (SCR) quality review in which trained DCF reviewers listened to recorded hotline calls, compared what they heard to documentation in NJ SPIRIT and completed a survey with information designed to capture the appropriateness and quality of coding decisions, documentation, customer service and overall quality of the SCR service delivery. DCF reported that, of the 383 calls reviewed, 72 were coded Information & Referral (I&R), 221 were coded Child Protective Service (CPS)/Family, 13 were coded Child Protective Service (CPS)/Institutional Abuse Investigations Unit (IAIU) and 77 were coded Child Welfare Service (CWS). Ninety-five percent of the calls were judged to have been coded correctly. In 91 percent of calls, reviewers found that the screener completely understood and adhered to policy. DCF reported that 97 percent of the intake calls reviewed were rated as completely or substantially of overall good quality.

ChildStat

DCF continued to use ChildStat, a case conferencing forum in which one case is used as an opportunity to critically analyze practice, policy and procedures from a systems perspective. The purpose of ChildStat is to encourage a culture of learning through self-reflective and self-diagnostic processes. The new ChildStat format, modified in October 2016, has been successful in encouraging discussion and analysis by audience members on questions and lessons learned from the case. When appropriate, DCF calls on experts to provide additional information related to questions raised. Case and practice updates are held six months following each ChildStat presentation. The Area and/or Local Office provides DCF Leadership and the Office of Quality with an update on the case that was reviewed and any lessons learned to improve case practice overall. The Monitor attends many ChildStat forums and has found it an important component of DCF's accountability efforts and commitment to improved system performance and outcomes for children, youth and families.

III. CHILD AND FAMILY OUTCOMES AND CASE PRACTICE PERFORMANCE MEASURES

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

Many of the measures are assessed through a review of data from NJ SPIRIT[18] and SafeMeasures,[19] and, in some areas, these data are independently validated by the Monitor. Data are also provided through DCF's work with Hornby Zeller Associates, Inc. who assist with data analysis. With few exceptions, performance data provided in this report are as of June 2017.

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

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

Table 1: *Charlie and Nadine H. v. Christie* Child and Family Outcome and Case Practice Performance Measures (Summary of Performance as of June 30, 2017)

Table 1A: To Be Achieved					
SEP Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance**	**June 2017 Performance[20]**	**Requirement Fulfilled (Yes/No/Partially)[21]**
Investigations					
IV.A.15	Quality Investigations	85% of investigations shall meet the standards for quality investigations. The Monitor, in consultation with the parties, shall determine appropriate standards for quality investigations.	NA: quality measured through an Investigation Case Record Review, last conducted in September 2016.[22]	NA: quality measured through an Investigation Case Record Review, last conducted in September 2016.[23]	Not reported in this period.
Family Teaming					
IV.B.19	Subsequent FTMs after 12 months – Other than Reunification Goal	After the first 12 months of a child being in care, for those children with a goal other than reunification, 90% shall have at least two FTMs each year.	In December 2016, 85% of children with a goal other than reunification had two or more FTMs after 12 months of placement. Monthly range during July – December 2016 monitoring period: 74 to 87%.	In June 2017, 94% of children with a goal other than reunification had two or more FTMs after 12 months of placement. Monthly range during January – June 2017 monitoring period: 83 to 94%.[24]	No

[20] In some instances where the Monitor does not have June 2017 data, the most recent data available are included.
[21] "Yes" indicates that, in the Monitor's judgment based on presently available information, DCF has fulfilled its obligations regarding the requirement under the SEP. "Partially" is used when DCF has come very close but, in the Monitor's judgment, has not met the SEP standard. "No" indicates that, in the Monitor's judgment, DCF has not fulfilled its obligation regarding the requirement.
[22] The September 2016 case record review (most recent available) showed that 83% of a statistically significant sample of 327 investigations assigned in February 2016 met quality standards.
[23] The Investigation Case Record Review is generally conducted every two years.
[24] Monthly performance is as follows: January, 84%; February, 84%; March, 84%; April, 83%; May, 85%; June, 94%. Reported performance may understate actual performance because data do not account for all instances in which a FTM was not required.

Table 1A: To Be Achieved					
SEP Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance**	**June 2017 Performance[20]**	**Requirement Fulfilled (Yes/No/Partially)[21]**
IV.B.20	Quality of Teaming	75% of cases involving out-of-home placements that were assessed as part of the QR process will show evidence of both acceptable team formation and acceptable functioning. The Monitor, in consultation with the parties, shall determine the standards for quality team formation and functioning.	49% of cases rated at least minimally acceptable on QR indicator *teamwork and coordination.*[25] (CY 2016)	CY 2017 data not yet available.[26]	Not reported in this period.

[25] CY 2016 data (most recent available) showed that 72 of the 146 (49%) out-of-home cases reviewed for Quality of Teaming were rated acceptable on the *teamwork and coordination* indicator.
[26] Qualitative Review data are reported by the Monitor on an annual basis and will be included in the next monitoring report.

Table 1A: To Be Achieved					
SEP Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance**	**June 2017 Performance[20]**	**Requirement Fulfilled (Yes/No/Partially)[21]**
Needs Assessment					
IV.C.21	Needs Assessment	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.	Between July and December 2016, DCF and the Rutgers University research team continued to analyze qualitative data collected from Phase III of the Needs Assessment Process. DCF and Rutgers began to develop a survey to administer to families of a randomly selected statewide sample of approximately 300 target children. Parents and caseworkers of the sample of children will serve as the main informants of this portion of Phase IV of the Needs Assessment process. The final report, synthesizing data and information from all four phases of the Needs Assessment process and focusing on regional and statewide system issues is anticipated to be completed by December 2017.	In May 2017, Rutgers released the Needs Assessment Report #2, which summarized Phase III of the needs assessment process. Additionally, between January and June 2017, DCF and Rutgers continued development of three surveys to assess family needs and services around 10 domains as part of Phase IV of a multi-year process. Rutgers piloted the staff survey during this monitoring period.	Partially/In Progress

Table 1A: To Be Achieved					
SEP Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance**	**June 2017 Performance[20]**	**Requirement Fulfilled (Yes/No/Partially)[21]**
Case and Service Planning					
IV.D.23	Quality of Case Plans	80% of case plans shall be rated acceptable as measured by the QR process. The Monitor, in consultation with the parties, shall determine that standards for quality case planning.	49% of cases rated at least minimally acceptable on both QR indicators *case planning process* and *tracking and adjusting*.[27] (CY 2016)	CY 2017 data not yet available.[28]	Not reported in this period.
Visitation					
IV.F.28	Caseworker Contacts with Family When Goal is Reunification	90% of families will have at least twice-per-month, face-to-face contact with their caseworker when the permanency goal is reunification.	In December 2016, 72% (without accounting for valid exceptions) of applicable parents of children in custody with a goal of reunification had at least two face-to-face visits with a caseworker. Accounting for valid exceptions, the corresponding figure is 84%. Monthly range during July – December 2016 monitoring period: 81 to 86%.[29]	In June 2017, 71% (without accounting for valid exceptions) of applicable parents of children in custody with a goal of reunification had at least two face-to-face visits with a caseworker. Monthly range during January – June 2017 monitoring period: 70 to 76%.[30]	No

[27] CY 2016 data (most recent available) showed that 95 of the 195 (49%) in and out-of-home cases reviewed rated acceptable on *both* the *case planning process* and *tracking and adjusting* indicators; 106 cases (54%) rated acceptable on *case planning* and 123 cases (63%) rated acceptable on *tracking and adjusting*.

[28] Qualitative Review data are reported by the Monitor on an annual basis and will be included in the next monitoring report.

[29] Monthly performance is as follows: July, 81%; August, 84%; September, 82%; October, 86%; November, 82%; December; 84%. Based upon validation of a statistically significant sample, these data reflect the exclusions of instances in which exceptions to the requirement for caseworker contacts with family were appropriately applied and documented. Data for this period are not comparable to data reported in other monitoring periods given that similar exclusions were not made.

[30] Monthly performance is as follows: January, 74%; February, 73%; March, 76%; April, 70%; May, 72%; June, 71%. Reported performance may understate actual performance because data do not account for instances in which contact with a caseworker is not required. Since exceptions to this measure were accounted for in the previous monitoring period but not in the current monitoring period, there is a perceived drop in performance, though there may not have been an actual change. In neither period has the standard been met in every month.

Table 1A: To Be Achieved					
SEP Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance**	**June 2017 Performance[20]**	**Requirement Fulfilled (Yes/No/Partially)[21]**
IV.F.31	Child Visits with Siblings	85% of children in custody who have siblings with whom they are not residing will visit those siblings at least monthly, excluding those situations where a court order prohibits or regulates visits or there is supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.	In December 2016, 76% of children in custody who have siblings with whom they are not residing visited with their siblings within the month. Monthly range during July – December 2016 monitoring period: 74 to 76%.	In June 2017, 73% of children in custody who have siblings with whom they are not residing visited their siblings within the month. Monthly range during January – June 2017 monitoring period: 73 to 75%.[31]	No
Maltreatment					
IV.H.39	Re-Entry to Placement	Of all children who enter foster care in a 12 month period for the first time who are discharged within 12 months to reunification, living with a relative(s), or guardianship, no more than 9% will re-enter foster care within 12 months of their discharge.	For CY 2014, 12% of all children who entered foster care for the first time who were discharged within 12 months to reunification, living with relative(s), or guardianship re-entered foster care within 12 months of their discharge.	CY 2015 data not yet available.	Not reported in this period.

[31] Monthly performance is as follows: January, 74%; February, 74%; March, 74%; April, 75%; May, 74%; June, 73%. Reported performance may understate actual performance because data do not account for instances in which a visit is not required.

Table 1A: To Be Achieved					
SEP Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance**	**June 2017 Performance[20]**	**Requirement Fulfilled (Yes/No/Partially)[21]**
Timely Permanency					
IV.I.41	Permanency Within 24 Months	Of all children who enter foster care in a 12-month period, at least 66% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 24 months of entering foster care.	For CY 2014, 65% of children who entered foster care were discharged to permanency (reunification, living with relative(s), guardianship or adoption) within 24 months of entering foster care.	CY 2015 data not yet available.	Not reported in this period.
IV.I.42	Permanency Within 36 Months	Of all children who enter foster care in a 12-month period, at least 80% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 36 months of entering foster care.	For CY 2013, 78% of children who entered foster care were discharged to permanency (reunification, living with relative(s), guardianship or adoption) within 36 months of entering foster care.	CY 2014 data not yet available.	Not reported in this period.

Table 1A: To Be Achieved					
SEP Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance**	**June 2017 Performance[20]**	**Requirement Fulfilled (Yes/No/Partially)[21]**
IV.I.43	Permanency Within 48 Months	Of all children who enter foster care in a 12-month period, at least 86% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 48 months of entering foster care.	For CY 2012, 85% of children who entered foster care were discharged to permanency (reunification, living with relative(s), guardianship or adoption) within 48 months of entering foster care.	CY 2013 data not yet available.	Not reported in this period.
Services to Support Transition					
IV.J.44	Services to Support Transition	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.	66% of cases rated at least minimally acceptable on QR indicator *successful transitions*. [32] (CY 2016)	CY 2017 data not yet available.[33]	Not reported in this period.

[32] CY 2016 data (most recent available) showed that 88 of the 133 cases reviewed (66%) were rated acceptable on the *successful transitions* indicator.
[33] Qualitative Review data are reported by the Monitor on an annual basis and will be included in the next monitoring report.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
Investigations					
III.A.1	Institutional Abuse Investigations Unit (IAIU)	80% of IAIU will be completed within 60 days.	83% of IAIU were completed within 60 days.	85% of IAIU were completed within 60 days.	Yes
IV.A.13	Timeliness of Investigation Completion (60 days)	85% of all investigations of alleged child abuse and neglect shall be completed within 60 days. Cases with documented acceptable extensions in accordance with policy are considered compliant.	In November 2016, 84% of all investigations were completed within 60 days. Monthly range during July – November 2016 monitoring period: 84 to 87%.	In May 2017, 84% of all investigations were completed within 60 days. Monthly range during December 2016 – May 2017 monitoring period: 84 to 86%.[35]	Yes[36]
IV.A.14	Timeliness of Investigation Completion (90 days)	95% of all investigations of alleged child abuse and neglect shall be completed within 90 days. Cases with documented acceptable extensions in accordance with policy are considered compliant.	In November 2016, 95% of all investigations were completed within 90 days. Monthly range during December 2016 – May 2017 monitoring period: 95 to 96%.	In May 2017, 95% of all investigations were completed within 90 days. Monthly range remained consistent at 95%.[37]	Yes

[34] "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.
[35] Due to the time lag of this measure, December 2016 data are included for this period and June 2017 data will be included in the next monitoring report. Monthly performance for this measure is as follows: December, 84%; January, 86%; February, 85%; March, 85%; April, 85%; May, 84%.
[36] The Monitor considers this to be an insubstantial fluctuation in performance.
[37] Due to the time lag of this measure, December 2016 data are included for this period and June 2017 data will be included in the next monitoring report. Monthly performance for this measure is as follows: December, 95%; January, 95%; February, 95%; March, 95%; April, 95%; May, 95%. Data on this measure may understate performance because they do not reflect acceptable extension requests.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
Family Teaming					
IV.B.16	Initial Family Team Meeting	80% of children newly entering placement shall have a family team meeting before or within 45 days of placement.	In December 2016, 84% of children newly entering placement had a FTM within 45 days of entering placement. Monthly range during July – December 2016 monitoring period: 82 to 90%.	In June 2017, 84% of children newly entering placement had a FTM within 45 days of entering placement. Monthly range during January – June 2017 monitoring period: 82 to 92%.[38]	Yes
IV.B.17	Subsequent FTMs within 12 months	80% of children will have three additional FTMs within the first 12 months of the child coming into placement.	In December 2016, 74% of children had three or more additional FTMs within the first 12 months of placement. Monthly range during July – December 2016 monitoring period: 74 to 90%.	In June 2017, 74% of children had three or more additional FTMs within the first 12 months of placement. Monthly range during January – June 2017 monitoring period: 68 to 87%.[39]	No[40]

[38] Monthly performance for this measure is as follows: January, 82%; February, 92%; March, 88%; April, 90%; May, 82%; June, 84%. Reported performance may understate actual performance because data do not exclude all instances in which a FTM is not required.

[39] Monthly performance for this measure is as follows: January, 77%; February, 81%; March, 87%; April, 68%; May, 82%; June, 74%. Reported performance accounts for valid exceptions to the FTM requirement. The Monitor reviewed 143 cases in which there was documentation of an exception to the FTM requirement and excluded from these data all instances (for each month) in which it determined that an exception was appropriately used.

[40] Based on the actions the state is taking to improve performance as part of their corrective action plan for Measure 18, the Monitor has determined to wait to review data from the next monitoring period to see if DCF's performance improvement strategies are effective before recommending a change in designation for this measure.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
IV.B.18	Subsequent FTMs after 12 months – Reunification Goal	After the first 12 months of a child being in care, 90% of those with a goal of reunification will have at least three FTMs each year.	In December 2016, 80% of children with a goal of reunification had three or more FTMs after 12 months of placement. Monthly range during July – December 2016 monitoring period: 69 to 88% (does not account for acceptable exceptions).[41]	In June 2017, 75% of children with a goal of reunification had three or more FTMs after 12 months of placement. Monthly range during January – June 2017 monitoring period: 67 to 94% (accounts for acceptable exceptions).[42]	No[43]
Case and Service Planning					
IV.D.22	Initial Case Plans	95% of initial case plans for children and families shall be completed within 30 days.	In December 2016, 96% of children entering care had case plans developed within 30 days. Monthly range during July – December 2016 monitoring period: 93 to 96%.	In June 2017, 85% of children entering care had case plans developed within 30 days. Monthly range during January – June 2017 monitoring period: 85 to 96%.[44]	No[45]

[41] Reported performance may understate actual performance because data do not exclude all instances in which a FTM is not required.
[42] Monthly performance for this measure is as follows: January, 94%; February, 71%; March, 79%; April, 67%; May, 93%; June, 75%. Reported performance accounts for valid exceptions to the FTM requirement. The Monitor reviewed all 11 cases in which there was documentation of an exception to the FTM requirement and excluded from these data all instances (for each month) in which it determined that an exception was appropriately used. Data for this period are not comparable to data reported in the previous monitoring period given that similar exclusions were not made.
[43] Based on the corrective actions the state is undertaking to improve performance, the Monitor has determined to wait to review data from the next monitoring period to see if DCF's performance improvement strategies are effective before recommending a change in designation for this measure.
[44] Monthly performance for this measure is as follows: January, 90%; February, 96%; March, 95%; April, 93%; May, 93%; June, 85%.
[45] The Monitor is concerned that for the second consecutive monitoring period DCF met this measure in only two of six months. The Monitor is requiring the state to diagnose barriers to performance and develop and implement a corrective action plan.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
Caseloads					
III.B.2	Supervisor/Worker Ratio	95% of offices will have sufficient supervisory staff to maintain a 5 worker to 1 supervisor ratio.	100% of Local Offices have sufficient supervisory staff.	100% of Local Offices have sufficient supervisory staff.	Yes
III.B.3	IAIU Investigators Caseload	95% of IAIU investigators will have (a) no more than 12 open cases, and (b) no more than eight new case assignments per month.	100% of IAIU investigators met caseload standards.	100% of IAIU investigators met caseload standards.	Yes
III.B.4	Permanency Workers (Local Offices) Caseload	95% of local offices will have average caseloads for permanency workers of (a) no more than 15 families, and (b) no more than 10 children in out-of-home care.	100% of Local Offices met permanency standards.	100% of Local Offices met permanency standards.	Yes
III.B.5	Permanency Workers Caseload	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.[46]	Yes

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

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
IV.E.24	Intake workers (Local Offices) Caseload	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.	97% of local offices met intake caseload standards.	Yes
IV.E.25	Intake workers Caseload	90% of individual intake works shall have no more than 12 open cases and no more than eight new case assignments per month. No intake worker with 12 or more open cases can be given more than two secondary assignments per month.	95% of Intake workers met caseload standards.	93% of Intake workers met caseload standards.[47]	Yes
IV.E.26	Adoption Workers (Local Offices) Caseload	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.	99% of Local Offices met adoption standards.	Yes
IV.E.27	Adoption Workers Caseload	95% of individual adoption worker caseloads shall be no more than 15 children per worker.	97% of Adoption workers met caseload standards.	99% of Adoption workers met caseload standards.[48]	Yes

[47] Reported performance is the average of DCF's performance in meeting individual caseload standards during this six month monitoring period.
[48] Ibid.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
Case Plans					
III.C.6	Timeliness of Current Plans	95% of case plans for children and families will be reviewed and modified no less frequently than every six months.	In December 2016, 95% of case plans were reviewed and modified as necessary at least every six months. Monthly range during July – December 2016 monitoring period: 95 to 96%.	In June 2017, 96% of case plans were reviewed and modified as necessary at least every six months. Monthly range during January – June 2017 monitoring period: 96 to 97%.[49]	Yes
DAsG					
III.D.7	Adequacy of DAsG Staffing	The state will maintain adequate DAsG staff positions and keep positions filled.	133 (100%) of 133 staff positions filled with five staff on leave; 128 (96%) available DAsG.	129 (100%) of 129 staff positions filled with five staff on leave; 124 (96%) available DAsG.[50]	Yes
Child Health Units					
III.E.8	Child Health Units	The state will continue to maintain its network of child health units, adequately staffed by nurses in each local office.	As of December 2016, DCF had 180 health care case managers and 84 staff assistants.	As of June 2017, DCF had 173 health care case managers and 82 staff assistants.[51]	Yes

[49] Monthly performance on this measure is as follows: January, 96%; February, 97%; March, 96%; April, 97%; May, 96%; June, 96%.
[50] DCF reported that during this monitoring period select DAsG outside of the DCF Practice Group have dedicated some of their time to DCF matters.
[51] In June 2017, of the 173 health care case managers (HCCMs), an average of 166 were available for coverage for a ratio of one HCCM to every 40 children in out-of-home care.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
Visitation					
IV.F.29	Parent-Child Visits – Weekly	60% of children in custody with a return home goal will have an in-person visit with their parent(s) at least weekly, excluding those situations where a court order prohibits or regulates visits or there is a supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.	In December 2016, 85% of applicable children had weekly visits with their parents. Monthly range during July – December 2016 monitoring period: 82 to 87%.	In June 2017, 80% of applicable children had weekly visits with their parents. Monthly range during January – June 2017 monitoring period: 80 to 85%.[52,53]	Yes
IV.F.30	Parent-Child Visits – Bi-Weekly	85% of children in custody will have an in-person visit with their parent(s) or legally responsible family member at least every other week, excluding those situations where a court order prohibits or regulates visits or there is supervisory approval of a decision to cancel a visit because it is physically or psychologically harmful to a child.	In December 2016, 96% of applicable children had bi-weekly visits with their parents. Monthly range during July – December 2016 monitoring period: 94 to 96%.	In June 2017, 93% of applicable children had bi-weekly visits with their parents. Monthly range during January – June 2017 monitoring period: 93 to 97%.[54,55]	Yes

[52] Monthly performance is as follows: January, 84%; February, 85%; March, 84%; April, 84%; May, 85%; June, 80%. Reported performance accounts for valid exceptions to this visitation requirement.
[53] Based on the Monitor's review of a statistically significant sample of cases in a prior monitoring period, the Monitor determined NJ SPIRIT documentation of exceptions with respect to this measure to be reliable. As a result, these data exclude all instances in which documentation indicated that a visit was not required.
[54] Monthly performance is as follows: January, 93%; February, 95%; March, 97%; April, 95%; May, 95%; June, 93%. Reported performance accounts for valid exceptions to this visitation requirement.
[55] Based on the Monitor's review of a statistically significant sample of cases in a prior monitoring period, the Monitor determined NJ SPIRIT documentation of exceptions with respect to this measure to be reliable. As a result, these data exclude all instances in which documentation indicated that a visit was not required.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
III.F.9	Caseworker Contacts with Children – New Placement/Placement Change	93% of children shall have at least twice-per-month face-to-face contact with their caseworker within the first two months of placement, with at least one contact in the placement.	In December 2016, 93% of children had two visits per month, one of which was in the placement, during the first two months of an initial or subsequent placement. Monthly range during July – December 2016 monitoring period: 89 to 94%.	In June 2017, 94% of children had two visits per month, one of which was in the placement, during the first two months of an initial or subsequent placement. Monthly range during January – June 2017 monitoring period: 91 to 95%.[56]	No[57]
III.F.10	Caseworker Contact with Children in Placement	During the remainder of the placement, 93% of children shall have at least one caseworker visit per month, in the placement.	In December 2016, 98% of children had at least one caseworker visit per month in his/her placement. Monthly range during July – December 2016 monitoring period: 96 to 98%.	In June 2017, 96% of children visit per month in his/her placement. Monthly range during January – June 2017 monitoring period: 96 to 97%.[58]	Yes
Placement					
IV.G.32	Placing Siblings	At least 80% of siblings groups of two or three children entering custody will be placed together.	In CY 2016, 78% of sibling groups of two or three children entering custody were placed together.	CY 2017 data not yet available.	Not reported in this period.

[56] Monthly performance is as follows: January, 92%; February, 93%; March, 91%; April, 95%; May, 92%; June, 94%.
[57] Since the adoption of the SEP, DCF has not met this measure in all months for any monitoring period. Given the importance of this measure and the number of children affected, the Monitor has asked DCF to provide information about barriers to performance and planned corrective actions. Based on the steps the state is already undertaking to improve performance, the Monitor has determined to wait to review data from the next monitoring period to see if DCF's performance improvement strategies are effective before recommending a change in designation for this measure.
[58] Monthly performance is as follows: January, 97%; February, 97%; March, 97%; April, 97%; May, 97%; June, 96%.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
IV.G.33	Sibling Placements of Four or More Children	All children will be placed with at least one other sibling 80% of the time.	For CY 2016, children were placed with at least one other sibling 84% of the time.	CY 2017 data not yet available.	Not reported in this period.
IV.G.34	Recruitment for Sibling Groups of Four or More	DCF will continue to recruit for resource homes capable of serving sibling groups of four or more.	Between July and December 2016, DCF recruited a total of 34 SIBS homes. As of December 2016, DCF had a total of 85 large capacity SIBS homes; 27 homes that can accommodate five or more children and 58 homes that can accommodate four children.	Between January and June 2017, DCF recruited a total of 36 new SIBS homes. As of June 2017, DCF had a total of 98 large capacity SIBS homes; 22 homes that can accommodate five or more children, and 76 homes that can accommodate four children.	Yes
IV.G.35	Placement Stability, First 12 Months in Care	At least 84% of children entering out-of-home placement for the first time in a calendar year will have no more than one placement change during the 12 months following their date of entry.	For CY 2015, 84% of children who entered out-of-home placement for the first time had no more than one placement change during the 12 months following their date of entry.	CY 2016 data not yet available.	Not reported in this period.
IV.G.36	Placement Stability, 13 – 24 Months in Care	At least 88% of these children will have no more than one placement change during the 13 – 24 months following their date of entry.	For CY 2014, 95% of applicable children had no more than one placement change during the 13 – 24 months following their date of entry.	CY 2015 data not yet available.	Not reported in this period.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
Education					
III.G.11	Educational Needs	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.	87% of cases rated acceptable for both QR indicators: *stability (school)* and *learning and development.*[59] (CY 2016)	CY 2017 data not yet available.[60]	Not reported in this period.
Maltreatment					
III.H.12	Abuse and Neglect of Children in Foster Care	No more than 0.49% of children will be victims of substantiated abuse or neglect by a resource parent or facility staff member.	In CY 2016, 0.11% of children were victims of substantiated abuse or neglect by a resource parent or facility staff member.	CY 2017 data not yet available.	Not reported in this period.
IV.H.37	Repeat Maltreatment (In-home)	No more than 7.2% of children who remain at home after a substantiation of abuse or neglect will have another substantiation within the next 12 months.	In CY 2015, 6.5% of children who remained at home after a substantiation of abuse or neglect had another substantiation within the next 12 months.	CY 2016 data not yet available.	Not reported in this period.

[59] CY 2016 data (most recent available) showed that 78 of the 90 cases reviewed (87%) rated acceptable on *both* the *stability in school* and *learning and development* indicators; 59% (61 of 102) were rated acceptable for *school stability* and 94% (87 of 93) were rated acceptable for *learning and development*.
[60] Qualitative Review data are reported by the Monitor on an annual basis and will be included in the next monitoring report.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
IV.H.38	Maltreatment Post-Reunification	Of all children who enter foster care in a 12-month period for the first time who are discharged within 24 months to reunification or living with a relative(s), no more than 6.9% will be the victims of abuse or neglect within 12 months of their discharge.	In CY 2013, 6.5% of children who entered foster care for the first time who were discharged within 24 months to reunification or living with relative(s) were the victims of abuse or neglect within 12 months of their discharge.	CY 2014 data not yet available.	Not reported in this period.
Permanency					
IV.I.40	Permanency within 12 Months	Of all children who enter foster care in a 12-month period, at least 42% will be discharged to permanency (reunification, living with relatives, guardianship or adoption) within 12 months of entering foster care.	In CY 2015, 42% of applicable children were discharged to permanency (reunification, living with relatives, guardianship or adoption) within 12 months of entering foster care.	CY 2016 data not yet available.	Not reported in this period.
Older Youth					
IV.K.45	Independent Living Assessments	90% of youth ages 14 to18 have an Independent Living Assessment.	In December 2016, 88% of applicable children had a completed an Independent Living Assessment. Monthly range during July – December 2016 monitoring period: 87 to 93%.	In June 2017, 95% of applicable children had completed an Independent Living Assessment. Monthly range during January – June 2017 monitoring period: 87 to 95%.[61]	Yes

[61] Monthly performance is as follows: January, 87%; February, 89%; March, 90%; April, 91%; May, 93%; June, 95%.

Table 1B: To Be Maintained					
Reference	**Quantitative or Qualitative Measure**	**Sustainability and Exit Plan Standard**	**December 2016 Performance[26]**	**June 2017 Performance**	**Requirement Maintained (Yes/No)[34]**
IV.K.46	Quality of Case Planning and Services	75% of youth aged 18 to 21 who have not achieved legal permanency shall receive acceptable quality case management and service planning.	63% of youth cases reviewed rated acceptable.[62] (CY 2016)	CY 2017 data not yet available.[63]	Not reported in this period.
IV.K.47	Housing	95% of youth exiting care without achieving permanency shall have housing.	95% of youth exiting care between July and December 2016 without achieving permanency had documentation of a housing plan upon exiting care.	100% of youth exiting care between January and June 2017 without achieving permanency had documentation of a housing plan upon exiting care.	Yes
IV.K.48	Employment/Education	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.	90% of youth exiting care between July and December 2016 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.	94% of youth exiting care between January and June 2017 without achieving permanency were either employed or enrolled in education or vocational training programs or there was documented evidence of consistent efforts to help the youth secure employment or training.	Yes

[62] CY 2016 data (most recent available) showed that 23 of the 32 cases reviewed (63%) were rated acceptable for both the *child (youth)/family status* and *practice performance* indicators; 81% (26 of 32) of cases rated acceptable on the *child (youth)/family status* indicator and 69% (22 of 32) of cases rated acceptable on the *practice performance* indicator. The universe of cases to which this measure applies is small, making fluctuations more likely.

[63] Qualitative Review data are reported by the Monitor on an annual basis and will be included in the next monitoring report.

Table 1C: Foundational Elements			
Reference	**Additional SEP Requirements That DCF Must Sustain:**	**Data Source**	**June 2017 Fulfilled (Yes/No)**
A. Data Transparency	DCF will continue to maintain a case management information and data collections system that allows for the assessment, tracking, posting or web-based publishing and utilization of key data indicators.	Data are currently provided directly to the Monitor and published by DCF in reports and on its website.[64] 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

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

Table 1C: Foundational Elements			
Reference	**Additional SEP Requirements That DCF Must Sustain:**	**Data Source**	**June 2017 Fulfilled (Yes/No)**
B. Case Practice Model	Implement and sustain a Case Practice Model	QR Data Data are currently provided directly to the Monitor.[65] Monitor site visits and attendance at QRs, ChildStat and other meetings.	Yes
	Quality investigation and assessment	Investigation case record review.	
	Safety and risk assessment and risk reassessment	Data are currently provided directly to the Monitor.[66]	
	Engagement with youth and families	QR Data Data are currently provided directly to the Monitor.[67]	
	Working with family teams	QR Data Data are currently provided directly to the Monitor.[68]	
	Individualized planning and relevant services	QR Data Data are currently provided directly to the Monitor.[69]	
	Safe and sustained transition from DCF	QR Data Data are currently provided directly to the Monitor.[70]	
	Continuous review and adaptations	Data are currently provided directly to the Monitor.[71]	

[65] Going forward, the following new report will be published as the data source for this Foundational Element: Report on Our Work with Children, Youth & Families.
[66] Ibid.
[67] Ibid.
[68] Ibid.
[69] Ibid.
[70] Ibid.
[71] Ibid.

Table 1C: Foundational Elements			
Reference	**Additional SEP Requirements That DCF Must Sustain:**	**Data Source**	**June 2017 Fulfilled (Yes/No)**
C. State Central Registry	Received by the field in a timely manner	Commissioner's Monthly Report	Yes
	Investigation commenced within required response time	Commissioner's Monthly Report	
D. Appropriate Placements	Appropriate placements of children	QR data Data are currently provided directly to the Monitor.[72] Monitor site visits and attendance at QRs, ChildStat and other meetings	Yes
	Resource family homes licensed and closed (kinship/non-kinship)	Commissioner's Monthly Report	
	Number of children in home/out of home demographic data	Quarterly Demographic Report	
	Placed in a family setting	Commissioner's Monthly Report	
	Placement proximity	Data are currently provided directly to the Monitor.[73]	
	No children under 13 years old in shelters	Commissioner's Monthly Report	
	Children over 13 in shelters no more than 30 days	Commissioner's Monthly Report	
	No behavioral health placements out of state without approval	Commissioner's Monthly Report	
	Adequate number of resource placements	CP&P Needs Assessment Data are currently provided directly to the Monitor.[74]	

[72] Ibid.
[73] Ibid.
[74] Ibid.

Table 1C: Foundational Elements			
Reference	**Additional SEP Requirements That DCF Must Sustain:**	**Data Source**	**June 2017 Fulfilled (Yes/No)**
E. Service Array	Services for youth age 18-21, LGBTQI, mental health and domestic violence for birth parents with families involved with the child welfare system	Services for older youth can be found at www.NJYRS.org. DCF's Website will be updated with information on services for youth (e.g., Safe Space Liaison Program).	Yes
	Preventive home visitation programs	Commissioner's Monthly Report	
	Family Success Centers	Commissioner's Monthly Report Monitor Site Visits	

Table 1C: Foundational Elements			
Reference	**Additional SEP Requirements That DCF Must Sustain:**	**Data Source**	**June 2017 Fulfilled (Yes/No)**
F. Medical and Behavioral Health Services	Appropriate medical assessment and treatment	Data are currently provided directly to the Monitor.[75]	Yes DCF continues to provide sustained access to health care for children in out-of-home placement.
	Pre-placement and entry medical assessments	Data are currently provided directly to the Monitor.[76] Commissioner's Monthly Report	
	Dental examinations	Data are currently provided directly to the Monitor.[77] Commissioner's Monthly Report	
	Immunizations	Data are currently provided directly to the Monitor.[78] Commissioner's Monthly Report	
	Follow-up care and treatment	Data are currently provided directly to the Monitor.[79]	
	Mental health assessment and treatment	Data are currently provided directly to the Monitor.[80]	
	Behavioral health	CIACC Monthly Report	
G. Training	Pre-service training		Yes

[75] Going forward, the following new report will be published as the data source for this Foundational Element: Report on the Healthcare of Children in Out-of-Home Placement in NJ.
[76] Ibid.
[77] Ibid.
[78] Ibid.
[79] Ibid.
[80] Ibid.

Table 1C: Foundational Elements			
Reference	**Additional SEP Requirements That DCF Must Sustain:**	**Data Source**	**June 2017 Fulfilled (Yes/No)**
	Case practice model	Data are currently provided directly to the Monitor.[81]	
	Permanency planning		
	Concurrent planning		
	Adoption		
	Demonstration of competency		
H. Flexible Funding	DCF will continue to make flexible funds available for use by workers in crafting individualized service plans for children, youth and families to meet the needs of children and families, to facilitate family preservation and reunification where appropriate and to ensure that families are able to provide appropriate care for children and to avoid the disruption of otherwise stable and appropriate placements.	Data are currently provided directly to the Monitor. DCF Online Policy Manual Budget Report	Yes

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

Table 1C: Foundational Elements			
Reference	**Additional SEP Requirements That DCF Must Sustain:**	**Data Source**	**June 2017 Fulfilled (Yes/No)**
I. Resource Family Care Support Rates	Family care support rates	DCF Online Policy Manual DCF Website[82]	Yes
	Independent Living Stipend	DCF Online Policy Manual Youth Website	
J. Permanency	Permanency practices	Data are currently provided directly to the Monitor.[83] Monitor site visits and attendance at QRs, ChildStat and other meetings	Yes
	Adoption practices		
K. Adoption Practice	5- and 10-month placement reviews	Data are currently provided directly to the Monitor.[84] Monitor site visits and attendance at QRs, ChildStat and other meetings.	Yes
	Child specific recruitment		

[82] 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.
[83] Going forward, the following new report will be published as the data source for this Foundational Element: Report on Our Work with Children, Youth & Families.
[84] Going forward, the following new report will be published as the data source for this Foundational Element: Adoption Report.

IV. FOUNDATIONAL ELEMENTS

Known as "Foundational Elements," the SEP identified a series of core organizational and practice improvements that have provided the base on which New Jersey's reform has been built. They include a range of requirements from the 2006 MSA that were previously met and were codified in the SEP as foundational for improved child welfare outcomes and future system improvements. These Foundational Elements remain enforceable in the SEP if performance is not sustained. DCF collects and publishes data to support its continued maintenance of Foundational Elements. The Our Work with Children, Youth and Families report is anticipated to be released in December 2017. The Healthcare of Children in Out-of-Home Placement report was released on December 11, 2017. As these reports were not published during this monitoring period, DCF continued to provide data directly to the Monitor wherever necessary for the period January 1 to June 30, 2017. Additionally, the Monitor also assesses maintenance of Foundational Elements through its participation in statewide QRs, site visits to Local Offices and attendance at monthly ChildStat presentations and meetings with stakeholders throughout the state.

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

A. CASE PRACTICE MODEL – SEP Section II.B

DCF has made significant efforts to embed its Case Practice Model in its work with children and families in each of the 46 Local Offices throughout the state by providing training, coaching and mentoring to workers and supervisors and through a range of Continuous Quality Improvement (CQI) activities that focus on direct practice. Additionally, Local Office leaders are encouraged to become coaches and master coaches in DCF's teaming model. Efforts include:

- Back to Basics: Back to Basics is a conferencing model for use between a supervisor and caseworker that supports better understanding of a family's history in order to comprehensively assess the underlying needs of every family under DCF supervision. The model brings together concepts inherent in family engagement, case planning and teaming. Between January and June 2017, the Back to Basics model was put in place in Ocean, Bergen and Hudson County, and a second round of implementation took place in Monmouth County.
- Focus on Supervision (FOS): FOS was designed to support and improve supervisory techniques and strengthen case conferencing skills through a partnership with highly skilled community providers. FOS pairs a licensed clinical social worker from a provider agency with a CP&P casework supervisor to foster a team approach, improve access to resources and expertise and create opportunities for additional professional development. FOS is currently in use in all 46 Local Offices.
- Transfer of Learning: DCF's Office of Training and Professional Development (OTPD) continued to develop tools for caseworkers to experience knowledge-based learning with their CP&P supervisors as applied to real world situations. Classroom learning is

supplemented with field day experiences and field guide activities as part of a caseworker's pre-service training.

B. APPROPRIATE PLACEMENTS – SEP Section II.D

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

Appropriate Placements and Services

DCF's pool of placement resource homes and group settings continues to meet the needs of children in out-of-home care, as described in more detail in Section V.F of this report.

As of June 2017, 6,607 children were in out-of-home placement: 6,025 (91%) of whom were in family-like settings (52% placed in non-kinship resource family homes and 39% in kinship homes). Seven percent of children were placed in group and residential settings and two percent were in independent living programs. Between January and June 2017, DCF recruited and licensed 638 kinship and non-kinship resource family homes; 395 (62%) were kinship homes and 243 (38%) were non-kinship homes. As of June 30, 2017, there were a total of 4,856 licensed resource family homes in the state, 1,780 (37%) of which were kinship homes.

As described in more detail in Section V.F of this report, DCF continues to focus on recruiting and retaining homes willing to accommodate large sibling groups, while also seeking homes for older youth with behavioral health challenges. As of June 30, 2017, there were a total of 98 large capacity SIBS homes; 22 homes with a capacity to accommodate five or more children, and 76 homes that could accommodate four children.

A total of 724 resource family homes closed between January 1 and June 30, 2017, resulting in a net loss of 86 homes, far fewer than the previous monitoring period in which DCF reported a net loss of 209 resource family homes. The majority of homes closed (403 homes, or 56%) were kinship homes. DCF attributes improvement in this area to its aggressive recruitment and retention efforts, including the newer initiatives described below.

Recent efforts to support placement stability and increase foster parent retention include:

- Mobile Response and Stabilization Services (MRSS): MRSS is intended to provide increased support to children and youth in placement and resource families in an attempt to avoid the trauma that results from multiple placements. Within one hour of a resource or kinship home being identified – unless arrangements are made for a visit within 24 hours – MRSS dispatches a worker to the placement/resource home for an assessment and short-term stabilization services if needed. Between January and June 2017, DCF implemented MRSS in Essex, Passaic, Hudson, Burlington and Monmouth counties. MRSS is now available in every county.

- Resource Family Support Hotline: DCF partnered with Rutgers University Behavioral Health Care (UBHC) Call Center to develop the Resilience for Resource Families Peer Support Program, a helpline that connects resource families and peer counselors. The peer counselors are either experienced resource family parents or former CP&P employees who have participated in UBHC's Reciprocal Peer Support model. They provide guidance to resource families and a variety of supports, including assessments with licensed clinicians and information about skill-building events. Peer counselors can be connected to the resource family for as long as necessary to support the child or youth and family.

C. SERVICE ARRAY – SEP Section II.E

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

DCF has been engaged in a multi-year process to assess existing provider service contracts and, where appropriate, redeploy resources to meet newly identified needs. As a result, between January and June 2017, services for families have expanded in multiple areas, including:

- An extension of DCF's Encouraging Fatherhood Program, now in its third year. Contracted through Youth Advocate Programs, the program supports community father engagement efforts for young fathers in Atlantic, Cape May, Cumberland, Salem, Essex, Passaic and Hudson counties;
- Support to all 56 FSCs through a partnership with the National Implementation Research Network to develop a practice profile that will promote consistent, quality practice in each FSC;
- New contracts for Family Preservation Services (FPS) in all 21 counties, allowing for increased capacity across 12 counties and an overall increase in capacity from 1,140 to 1,352 families annually. Expanded services also include a step-down component that provides support to families for three to nine months after families have completed FPS services in order to reduce the risk of future out-of-home placement; and
- An expansion of Keeping Families Together (KFT), a model of supportive housing designed for child-welfare involved families with multiple challenges, including homelessness. DCF expanded existing KFT programs to serve an additional 15 families in Essex County, an additional 20 families in Cumberland County and an additional five families in Atlantic County. KFT programs are now available in eight counties and have the capacity to serve up to 113 families.

D. PERMANENCY -- SEP Section II.J

Section II.J of the SEP requires the state to continue to strengthen and sustain appropriate permanency and adoption practices for the children and youth it serves, recognizing that permanency work begins at intake and encompasses the elements of the Case Practice Model.

Between January and June 2017, DCF's work to improve permanency outcomes for children and families included:

- Permanency Workshops: DCF's Central Office facilitated statewide permanency workshops for supervisors and casework supervisors focused on enhancing case practice and fostering consistency and collaboration.
- "Overcoming Barriers to Permanency" Conference: DCF worked with the Administrative Office of the Courts (AOC) to plan the annual Children in Court conference, which was themed "Overcoming Barriers to Permanency" and took place in March 2017.
- Adolescent Permanency Training and Roundtables: In January and February 2017, the Office of Adolescent Services trained over 100 DCF staff on Permanency Roundtables for youth who have not yet achieved legal permanency. In February and March 2017, DCF held Permanency Roundtables with 53 youth.

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

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

A. INVESTIGATIONS

Investigative Practice

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

Timeliness of Investigation Completion

Quantitative or Qualitative Measure	13. Timeliness of Investigation Completion: 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, 2017:[85]

In May 2017, there were 5,375 investigations of alleged child abuse and neglect, 4,488 (84%) of which were completed within 60 days. Performance from December 2016 to May 2017 ranged from a low of 84 percent to a high of 86 percent.[86] DCF continued to meet the SEP performance standard for timeliness of investigation completion within 60 days for the period of December 2016 through May 2017.

Quantitative or Qualitative Measure	14. Timeliness of Investigation Completion: Investigations of alleged child abuse and neglect shall be completed within 90 days.

[85] June 2017 data will be included in the next monitoring report. For certain data elements such as this one which have an extended time frame built into the measurement, the Monitor and DCF have decided to alter the period for data review so that six month monitoring reports can be produced more closely to the end of the monitoring period.
[86] Monthly performance for this measure is as follows: December, 84%; January, 86%; February, 85%; March, 85%; April, 85%; May, 84%. The Monitor considers this to be an insubstantial fluctuation in performance that is still within acceptable range.

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, 2017:[87]

In May 2017, there were 5,375 investigations of child abuse and neglect and 5,088 (95%) were completed within 90 days. Performance from December 2016 to May 2017 remained consistent at 95 percent each month. DCF met the SEP performance standard for the timeliness of investigation completion within 90 days for the period December 2016 through May 2017.

Quality of Investigations

Quantitative or Qualitative Measure	15. Quality of Investigations: 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.

As reported in the previous monitoring period, together with the Monitor, DCF conducted a case record review of the quality of CP&P's investigative practice in September 2016. Reviewers examined the quality of practice of a statistically valid random sample of selected CPS investigations assigned to DCF Local Offices between February 1 and February 14, 2016 involving 327 investigations and 497 alleged child victims.[88] Overall, reviewers found that 271 (83%)[89] of the investigations were of acceptable quality, which was just below the SEP performance standard. DCF will include the findings from this review in its Our Work with Children, Youth and Families report to be released in December 2017.

DCF anticipates conducting another case record review in collaboration with the Monitor on the quality of investigations for the next monitoring period.

DCF has made notable improvements in engaging fathers during investigations. The September 2016 case record review found that 82 percent of fathers of alleged child victims were interviewed as part of the investigation. During this monitoring period, DCF developed a Central Office Father Engagement Lead position to improve and sustain statewide practice with fathers.

In April and May 2017, DCF held a series of statewide supervisory leadership workshops focused on improving investigatory practice. The workshops addressed staffing of Intake units and the use of quantitative and qualitative data to manage Intake caseloads, and provided an opportunity for peer sharing and learning about best practices across offices. Additionally, DCF

[87] June 2017 data will be included in the next monitoring report. For certain data elements such as this one which have an extended time frame built into the measurement, the Monitor and DCF have decided to alter the period for data review so that six-month monitoring reports can be produced more closely to the end of the monitoring period.
[88] These results have a ± 5% margin of error with 95% confidence.
[89] Reviewers could select four possible responses to the question regarding the quality of the investigation: "completely," "substantially," "marginally" or "not at all." Investigations determined to be "completely" or "substantially" of quality were considered acceptable for the purpose of this measure.

conducted targeted case record reviews at several Local Offices of investigations that were not completed timely to further explore investigative practice. CP&P Local Offices, including Cumberland-East and Passaic-North, conducted targeted reviews of investigations that were not completed timely to further explore investigative practice. This enabled them to reduce the backlog of overdue investigations and connect families with community services.

Institutional Abuse Investigations

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

The Institutional Abuse Investigations Unit (IAIU) is responsible for investigating allegations of child abuse and neglect in resource family homes and other out-of-home care settings, as well as in child care facilities, detention centers, schools and residential facilities.[90]

Performance as of June 30, 2017:

Performance data for January through June 2017 shows that DCF continued to exceed the SEP performance standard for this measure, with 85 percent of IAIU investigations completed within 60 days.

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

B. FAMILY TEAM MEETINGS

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

Between January and June 2017, DCF made strengthening FTM practice a high priority. They also focused on appropriate documentation of those instances in which FTMs did not occur due to the parent being unavailable or declining to attend. [91]

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

Because DCF did not meet the performance standard for Measure 18 in any of the six months for the period July through December 2016, the Monitor requested and the state developed a corrective action plan to strengthen performance. DCF's corrective actions include having leadership in Area and Local Offices review cases and identify barriers to compliance. FTM coordinators in each Local Office are also tasked with assisting staff in addressing barriers to improved practice. In addition, DCF's Central Office partnered with the Office of Training and Professional Development to add the Case Practice Model training module on FTMs into new worker training to ensure that every new worker is developed as a FTM facilitator as early as possible in their career. DCF anticipates that the corrective actions taken for Measure 18 will also have a positive impact on performance for FTMs held within the first 12 months of placement (IV.B.17), which declined for a second monitoring period between January and June 2017.

Performance for all five measures during the current monitoring period are discussed below.

[91] The Monitor validated data to document the appropriate use of exceptions for Measure 17 and Measure 18 as discussed herein. The reported data for these measures account for validated exceptions to FTM requirements. Performance data for Measure 16 and Measure 19 include only the number of FTMs that actually occurred.

Initial FTMs Held within 45 Days of Entry

Quantitative or Qualitative Measure	16. Initial Family Team Meetings: 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, 2017:

In June 2017, 218 (84%) out of 260 possible FTMs occurred within 45 days of a child's removal from his or her home. Performance from January 1 to June 30, 2017 ranged from a low of 82 percent to a high of 92 percent.[92] DCF's performance exceeded the SEP standard in each month of the monitoring period.

FTMs Held within the First 12 Months

Quantitative or Qualitative Measure	17. Subsequent Family Team Meetings within 12 Months: 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, 2017:[93]

In June 2017, 113 (74%) of 152 applicable children had an additional three or more FTMs within the first 12 months of entering placement. Performance from January to June, 2017 ranged from a low of 68 percent to a high of 87 percent.[94] For this measure, the Monitor verified monthly data from NJ SPIRIT for 143 applicable cases to determine whether exceptions to FTM policy were appropriately applied and documented.[95] Based on the verified data, DCF met the performance standard in three of six months in the monitoring period, which is a decline in performance for the second consecutive monitoring period. DCF anticipates that performance improvement strategies described above, implemented as part of its corrective action plan for Measure 18, will also contribute to improved performance for Measure 17. The Monitor will

[92] Monthly performance for this measure is as follows: January, 82%; February, 92%; March, 88%; April, 90%; May, 82%; June, 84%. Reported performance may understate actual performance because these data do not exclude all instances in which a FTM is not required.
[93] 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 2017 is based upon the 168 children who entered care in June 2016. Compliance is based on whether at least three FTMs were held for these children during the 12 month period they were in care.
[94] Monthly performance is as follows: January, 77%; February, 81%; March, 87%; April, 68%; May, 82%; June, 74%. Reported performance accounts for valid exceptions to the FTM requirement.
[95] Based on a review of all 143 cases, the Monitor excluded valid exceptions to the FTM requirement from the universe of cases. For example, in June 2017, there were 168 children who had been in out-of-home placement for 12 months. The Monitor determined that in 16 cases, the worker had determined that the parent declined the FTM or was otherwise unavailable. The Monitor excluded those cases, making the universe of applicable cases 152 children.

wait to review data from July through December 2017 to see if DCF's performance improvement strategies are effective before recommending a change in categorization for this measure.

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

Quantitative or Qualitative Measure	18. Subsequent Family Team Meetings after 12 Months: 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, 2017:[96]

In June 2017, out of 20 applicable children with a permanency goal of reunification, 15 (75%) children had three or more FTMs in the 12 months following their first year in out-of-home placement. Performance from January to June 2017 ranged from a low of 67 percent to a high of 94 percent.[97] For this measure, the Monitor verified monthly data from NJ SPIRIT for the 11 applicable cases to determine whether exceptions to FTM policy were appropriately applied and documented.[98] Based on the Monitor's verified data, DCF met the SEP performance measure in two of the six months of the monitoring period, an improvement from the previous monitoring period in which DCF did not meet the standard in any of the six months.[99] DCF anticipates that the corrective actions it is taking to diagnose barriers to improved performance as described above will be reflected in the July through December 2017 data. Based on those corrective actions, the Monitor will wait to review the July through December 2017 data to determine if DCF's performance improvement strategies are effective before recommending a change in categorization for this measure.

[96] 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 2017, a combined total of 21 children who entered care in June 2015, June 2014, June 2013, etc. and are still in placement with a goal of reunification. Compliance is based on whether at least three FTMs were held for these children during their most recent 12 months in care.

[97] Monthly performance for this measure is as follows: January, 94%; February, 71%; March, 79%; April, 67%; May, 93%; June 75%. Reported performance accounts for valid exceptions to the FTM requirement.

[98] Based on a review of all 11 cases, the Monitor excluded valid exceptions to the FTM requirement from the universe of cases. For example, in June 2017, there were 21 children who had been in care for at least 24 months who have a goal of reunification. Data from NJ SPIRIT indicated that in one case, the worker had determined that the parent declined the FTM or was otherwise unavailable. The Monitor excluded that case, making the universe of applicable cases 20 children.

[99] Although the Monitor is noting improvement for this monitoring period, it should be noted that the data reported in the prior monitoring period for this measure may have underestimated performance because possible exceptions to the FTM requirement were not excluded from the universe of cases.

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

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

Performance as of June 30, 2017:[100]

In June 2017, out of 202 children with a permanency goal other than reunification, 189 (94%) children had two or more FTMs after 12 months in out-of-home placement. Performance from January to June 2017 ranged from a low of 83 percent to a high of 94 percent.[101] Table 2 and Figure 1 show DCF's performance from January to June 2017 on holding FTMs after the first 12 months in placement for children with a goal other than reunification. DCF continues to show improvement on the performance measure but has not yet met the SEP standard.

Table 2: At Least Two Family Team Meetings Held After 12 Months in Placement with a Goal other than Reunification (January – June 2017) Performance Target 90%

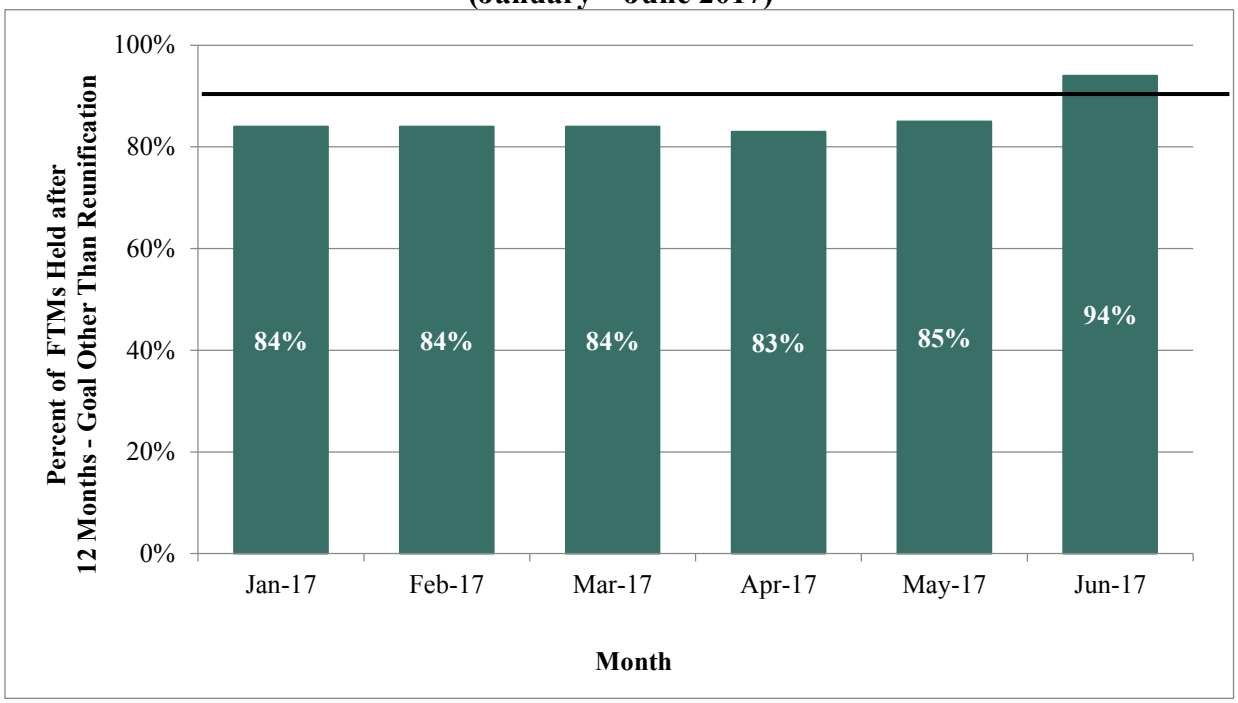
Month	Total Number of Applicable Children	Number of Children with Two or More FTMs Held After 12 Months in Placement	Percent
JANUARY	187	158	84%
FEBRUARY	182	152	84%
MARCH	219	185	84%
APRIL	207	171	83%
MAY	208	177	85%
JUNE	202	189	94%

Source: DCF data

[100] 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 2017, a combined total of 202 children entered care in June 2015, June 2014, June 2013, etc. and are still in placement with a goal other than reunification. Compliance is based on whether at least two FTMs were held for these children during their most recent 12 months in care.

[101] Monthly performance is as follows: January, 84%; February, 84%; March, 84%; April, 83%; May, 85%; June, 94%. Reported performance may understate actual performance because these data do not exclude all instances in which a FTM is not required.

Figure 1: At Least Two Family Team Meetings Held After 12 Months in Placement with a Goal other than Reunification (January – June 2017)



Source: DCF data

Quality of Teaming

Quantitative or Qualitative Measure	20. Cases involving out-of-home placement show evidence of family teamwork.
Performance Target	75% of cases involving out-of-home placements that were assessed as part of the 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.

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

Performance as of June 30, 2017:

This QR measure is reported by the Monitor on an annual basis. The Monitor will report on the data for Quality of Teaming for the period of January 1 through December 31, 2017 in the next monitoring report.

C. QUALITY OF CASE AND SERVICE PLANNING

The SEP requires that 95 percent of case plans be developed with families within 30 days of placement (IV.D.22). This measure, together with the SEP requirement that case plans be reviewed and modified every six months (III.C.6), is designated as an Outcome *To Be Maintained.* The SEP measure regarding the quality of case planning (IV.D.23) is designated as an Outcome *To Be Achieved*. DCF reports publically on case planning in its Commissioner's Monthly Reports that are posted on the DCF website. Performance for all three measures during the current monitoring period are discussed below.

Timeliness of Case Planning – Initial Case Plans

Quantitative or Qualitative Measure	22. Timeliness of Initial Plans: 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, 2017:

In June 2017, 229 (85%) out of a total of 268 initial case plans were completed within 30 days of a child entering placement. Between January and June 2017, the timely development of initial case plans ranged from a low of 85 percent to a high of 96 percent.[102] For the second consecutive monitoring period, DCF met this measure in only two of six months. As a result, the Monitor will be requesting a corrective action plan from the state regarding timely initial case plan development.

Timeliness of Case Planning-Every Six Months

Quantitative or Qualitative Measure	6. Case Plans: 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, 2017:

In June 2017, 96 percent of case plans had been modified no less frequently than every six months, as required by the SEP. Performance from January to June 2017 ranged from 96 percent to 97 percent. [103] DCF exceeded required performance on this measure for each month between January and June 2017.

[102] Monthly performance for this measure is as follows: January, 90%; February, 96%; March, 95%, April, 93%; May, 93%; June, 85%.
[103] Monthly performance on this measure is as follows: January, 96%; February, 97%; March, 96%; April, 97%; May, 96%; June, 96%.

Quality of Case Plans

Quantitative or Qualitative Measure	23. Quality of Case Plans: 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*, are used to assess performance on this measure. Cases rated as acceptable demonstrate that child or youth and family needs are addressed in the case plan that appropriate family members were included in the development of the plan and that interventions are being tracked and adjusted when necessary.

This QR measure is reported by the Monitor on an annual basis. The Monitor will report on the data for Quality of Case Plans for the period January 1 through December 31, 2017 in the next monitoring report.

D. EDUCATION

Quantitative or Qualitative Measure	11. Educational Needs: 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." The SEP requires that 80 percent of cases be rated acceptable on stability in school and learning and development indicators as measured by the QR. This performance measure has been previously designated as an Outcome *To Be Maintained*.

This QR measure is reported by the Monitor on an annual basis. The Monitor will report on the data for Educational Needs for the period January 1 through December 31, 2017 in the next monitoring report.

E. VISITATION

Visits between children in foster care and their workers, parents and siblings is critical to protecting children's safety, strengthening family connections and improving prospects for permanency in accordance with the CPM. The SEP includes six performance measures related to visitation. As of January 2017, four measures were designated as Outcomes *To Be Maintained*, including caseworker contacts with children newly placed or after a placement change (III.F.9); caseworker contacts with children in ongoing placement (III.F.10); and parent-child weekly and bi-weekly visits (IV.F.29 and IV.F.30). The remaining two measures, caseworker contacts with parent when goal is reunification (IV.F.28) and sibling visits (IV.F.31), are designated as Outcomes *To Be Achieved*. Performance for all six measures during the current monitoring period are discussed below.

Caseworker Visits with Children in Placement

Both performance measures pertaining to caseworker visits with children in placement are designated as Outcomes *To Be Maintained*. Performance with respect to children in new placements, which had fallen in some months in the prior monitoring periods, improved slightly during this monitoring period, but still fell short of the standard in some months. Performance with respect to caseworker visits to children in ongoing placements continued to exceed the standard.

Quantitative or Qualitative Measure	9. Caseworker Contacts with Children – New Placement/Placement Change: 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, 2017:

In June 2017, the standard was met for 412 (94%) of the 439 children in a new placement. Between January and June 2017, monthly performance ranged from 91 to 95 percent and met the standard in three of six months.[104] The Monitor has discussed with DCF its concern that, though performance has approached the SEP standard in all periods, it has not been met for all months in any period since entry into the SEP. DCF has shared with the Monitor steps it has taken to understand and address this issue, working closely with those Local Offices in which performance has lagged. DCF has committed to continuing to address performance in this area through a combination of data analysis, technical assistance and practice workshops. The Monitor plans to carefully track progress with respect to caseworker contacts with children in the next monitoring period in order to determine whether DCF's performance improvement strategies are effective before determining next steps.

[104] Monthly performance is as follows: January, 92%; February, 93%; March, 91%; April, 95%; May, 92%; June, 94%.

Quantitative or Qualitative Measure	10. Caseworker Contacts with Children in Placement: 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, 2017:

In June 2017, this standard was met for 5,628 (96%) of the 5,842 children in an ongoing placement. Between January and June 2017, monthly performance ranged between 96 and 97 percent, exceeding the SEP target. [105]

Caseworker Visits with Parents/Family Members

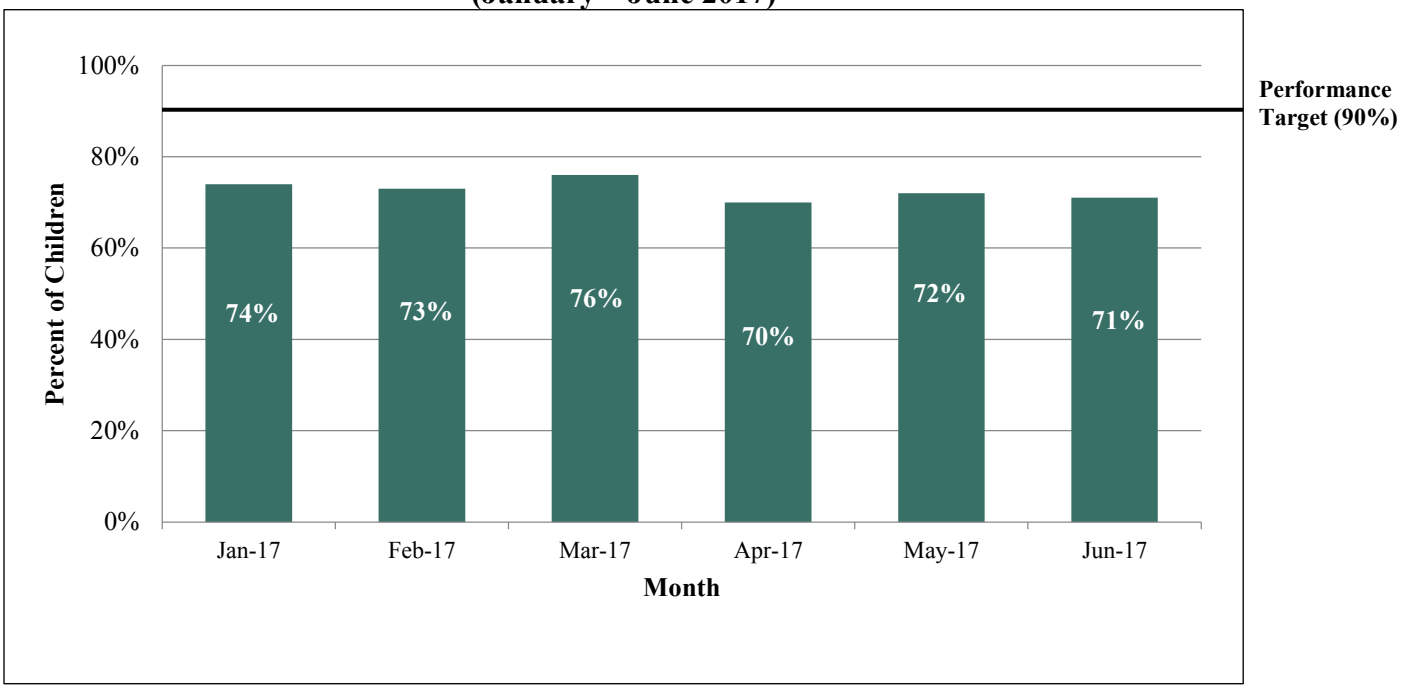
Quantitative or Qualitative Measure	28. Caseworker Visits with Parents/Family Members with Goal of Reunification: The caseworker shall have at least two face-to-face visits per month with the parent(s) or other legally responsible family member of children in custody with a goal of reunification.
Final 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, 2017:

Between January and June 2017, a range of 70 to 76 percent of applicable parents or other legally responsible family members were visited at least two times per month by a caseworker (see Figure 2 below). For example, in June 2017, there were 2,948 children in custody with a goal of reunification; the parents of 2,091 children (71%) were visited at least twice during the month and the parents of an additional 483 children (16%) had one contact in the same month. Current performance does not meet the level required by the SEP.

[105] Monthly performance is as follows: January, 97%; February, 97%; March, 97%; April, 97%; May, 97%; June, 96%.

Figure 2: Percent of Families who Had at Least Twice per Month Face-to-Face Contact with Caseworker when the Goal is Reunification (January – June 2017)



Source: DCF data

Visits between Children in Custody and their Parents

Quantitative or Qualitative Measure	29. Weekly Visitation between Children in Custody and Their Parents: 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, 2017:

Between January and June 2017, a monthly range of 80 to 85 percent of children had a weekly visit with their parents when their permanency goal was reunification.[106] This performance exceeds the SEP requirement.

[106] Monthly performance is as follows: January, 84%; February, 85%; March, 84%; April, 84%; May, 85%; June, 80%. 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 2017, there was an average of 3,087 children with a goal of reunification across the four weeks of the month. Data from NJ SPIRIT indicated that in an average of 765 cases, the worker had determined that the parent was unavailable for the visits, the child declined the visit or the visit was not required. Based on these data, the Monitor excluded those cases, making the universe of applicable cases an average of 2,322 children.

Quantitative or Qualitative Measure	30. Bi-Weekly Visitation between Children in Custody and Their Parents: 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, 2017:

Between January and June 2017, a monthly range of 93 to 97 percent of children had visits at least twice a month with their parents when their permanency goal is reunification. For example, during the month of June 2017 180 (93%) children had at least two visits with their parent during the month. [107] This performance exceeds the SEP requirement.

Visits between Children in Custody and Sibling Placed Apart

Quantitative or Qualitative Measure	31. Visitation between Children in Custody and Siblings Placed Apart: 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.

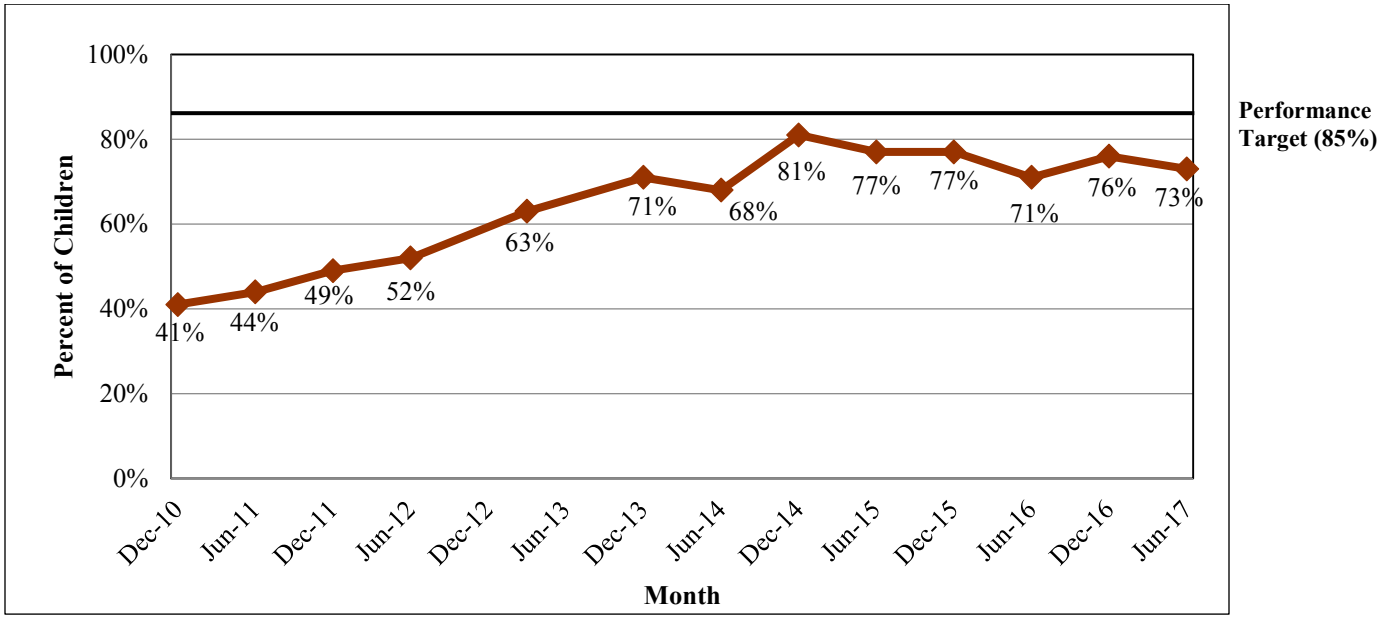
Performance as of June 30, 2017:

Between January and June 2017, a range of 73 to 75 percent of children had at least monthly visits with one of their siblings with whom they were not placed. For example, in June 2017, there were 2,153 children in placement who had at least one sibling who did not reside in the same household; 1,581 (73%) children had at least one visit with one of their siblings during the

[107] Monthly performance is as follows: January, 93%; February, 95%; March, 97%; April, 95%; May, 95%; June, 93%. 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 2017, there were 2,948 children with a goal of reunification. Data from NJ SPIRIT indicated that in 592 cases, the worker had determined that the parent was unavailable for the visits or the visit was not required. Based on these data, the Monitor excluded those cases from the universe, making the universe of applicable cases 2,356.

month.[108] DCF performance does not meet the required level for visits between children in custody and siblings who are not placed with them (see Figure 3 below).

Figure 3. Percent of Children Who Had at Least Monthly Visits with Siblings, for Children not Placed with Siblings (December 2010 – June 2017)



Source: DCF data

[108] Reported performance may understate actual performance because data do not account for instances in which a visit is not required. A review of a statistically significant sample of cases by the Monitor in a prior monitoring period found that exceptions were not appropriately applied in a majority of cases. The Monitor has therefore not excluded any cases from the universe of cases requiring sibling visits during this monitoring period.

F. PLACEMENT

DCF policy requires siblings to be placed together whenever possible, and that children experience as few placement changes as necessary when in out-of-home placement. The SEP includes three measures related to the placement of sibling groups (IV.G. 32 – 34) and two measures related to placement stability (IV.G. 35 – 36). All placement measures are designated Outcomes *To Be Maintained*.

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. Performance from the period of January 1 to December 31, 2017 will be assessed in the next monitoring report when these data are available. The most recent performance data can be found in Table 1B of this report.

Recruitment of Sibling Groups of Four or More

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

Performance as of June 30, 2017:

Between January and June 2017, DCF continued to refine its approach to more accurately forecast county level needs for new non-kinship resource family homes to accommodate large sibling groups. The process included a monthly cross-walk of NJ SPIRIT and Office of Licensing (OOL) data on the resource homes available by county and sibling group size of children in or entering care.

During the monitoring period, DCF staff developed recruitment plans intended to guide their work for CY 2017. The plans involve recruiters building relationships with local businesses and community organizations to strategically place recruitment materials that focus on the need for placement for large sibling groups and teens in local publications, online websites, blogs and local sports facilities. Examples of recruitment efforts from January to June 2017 for large sibling groups include a recruitment and retention event held at a restaurant in Hamilton Township, a presentation to the congregation at Grace Christian Church in Newark and a presentation at the East Orange Public Library Annual Reading Convention. In partnership with the Children's Bureau's Child Welfare Capacity Building Collaborative, DCF produced digital stories of licensed resource families who have cared for sibling groups as a means of recruiting new homes that can accommodate large sibling groups. Lastly, DCF continues to implement its newly created Resource Family Retention Plan, which highlights its slogan "Team from the Start, We All Play a Part," which is posted on its website. As part of the Retention Plan, DCF developed a newsletter intended for staff as well as all licensed resource families and implemented a resource family helpline through Rutgers University's Behavioral Health Care.

As of June 2017, DCF had a total of 98 large capacity Siblings in Best Placement Settings (SIBS) homes. Between January and June 2017, DCF recruited 36 new SIBS homes, eight of which can accommodate five or more children. Twenty-eight of the 36 new SIBS homes recruited between January and June 2017 could accommodate four children.[109] The state increased its capacity of homes that can accommodate four children by 18 this period, resulting in a total of 76 SIBS homes. As of June 2017, DCF had a total of 22 homes that could accommodate five or more children, which is five fewer than it had at the end of 2016.[110]

DCF's performance met the SEP standard for this measure between January and June 2017.

[109] During the same period, ten homes accommodating four children were either closed, downgraded or upgraded: three homes closed after the children in placement were reunified; one home closed due to an adoption finalization; one home was upgraded to a SIBS 5+ home upon the placement of an additional sibling in the home. Five homes with the capacity to accommodate four children were downgraded: two homes were downgraded once the children were reunified, one home upon request, one home due to an IAIU investigation and one home upon the finalization of the adoption of the sibling in care.

[110] During the same period, 13 homes accommodating five or more children either were downgraded or closed: five homes closed for reasons related to adoption finalizations; two homes closed due to reunification; five homes downgraded their capacity once the children in placement were reunified; and one home downgraded their capacity upon requesting the children be removed from the home.

G. MALTREATMENT OF CHILDREN AND YOUTH

The state is responsible for ensuring the safety of children who are receiving or have received services from DCF. This responsibility includes ensuring the safety of children who are placed in resource family homes and congregate facilities and preventing future maltreatment. There are four performance measures related to these goals – three are designed as Outcomes *To Be Maintained*: abuse and neglect of children in foster care (III.H.12); repeat maltreatment for children who remain in their home (IV.H.37); and maltreatment post-reunification (IV.H.38). The remaining measure, reentry-to placement (IV.H.39), is an Outcome *To Be Achieved*.

The state's performance is not newly assessed in this report as performance is measured at the end of each calendar year. More recent performance will be assessed 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

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

The Foundational Elements of the SEP address permanency and adoption practice which encompass elements of the CPM and requirements regarding freeing children for adoption, securing adoptive placements and developing child specific recruitment plans and all were maintained during this period.

There are four permanency measures in the SEP that assess timeliness of permanency for different entry cohorts of children and youth: achieving permanency within 12 months (IV.I.40) is designated as an Outcome *To Be Maintained*. The remaining three measures are Outcomes *To Be Achieved*: achieving permanency within 24 months (IV.I.41); achieving permanency within 36 months (IV.I.42); and achieving permanency within 48 months (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. The most recent performance data can be found in Table 1B of this report.

I. CHILD HEALTH UNITS

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

Section III.E of the SEP requires the state to "maintain its network of child health units, adequately staffed by nurses in each local office." This standard is designated as an Outcome *To Be Maintained*. In what has become a model for other child welfare systems throughout the country, each child placed in a resource home has a nurse assigned for health care case management. Since the development of the CHUs, the Monitor has reviewed data to assess staffing adequacy and has found the CHUs to be fully staffed according to a standard of one nurse for every 50 children in foster care placement.

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

Performance as of June 30, 2017:

As of June 30, 2017, DCF had 173 HCCMs and 82 staff assistants. Of the 173 HCCMs, an average of 166 were available for coverage for an average ratio of one HCCM to every 40 children in out-of-home care, exceeding the standard of one HCCM to 50 children in out-of-home care.

J. OLDER YOUTH

The SEP includes four measures related to older youth. As of January 2017, all were designated as Outcomes *To Be Maintained* – completion of Independent Living Assessments (IV.K.45); quality of case planning and services (IV.K.46); housing for youth who exit care without achieving permanency (IV.K.47); and education/employment for youth who exit care without achieving permanency (IV.K.48). Performance for all four measures during the current monitoring period are discussed below.

Independent Living Assessments

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

Performance as of June 30, 2017:

In June 2017, there were 804 youth aged 14 to 18 in out-of-home placement for at least six months; 764 (95%) had an Independent Living Assessment (ILA) completed. Monthly performance between January and June 2017 ranged from 87 to 95 percent.[111] DCF sustained performance at or above the level required by the SEP in four of the six months in the monitoring period. In the Monitor's discretion, DCF has met the performance standard.

Quality of Case Planning and Services

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

This QR measure is reported by the Monitor on an annual basis. The Monitor will report on the data for Quality of Case Planning and Services for the period January 1 through December 31, 2017 in the next monitoring report.

Housing

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

[111] Monthly performance is as follows: January, 87%; February, 89%; March, 90%; April, 91%; May, 93%; June, 95%.

Performance as of June 30, 2017:

The Monitor and DCF staff together conducted a case record review of the 81 youth who exited care between January and June 2017 without achieving permanency; this measure was applicable to 71 youth.[112] There was documentation of a housing plan upon exiting CP&P care in all 71 cases, making compliance for this measure 100% for the first time this monitoring period. This is a significant achievement that reflects DCF's and OAS's ongoing commitment to the older youth in its care.

Employment/Education

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

Performance as of June 30, 2017:

The Monitor and DCF jointly conducted a case record review of the 81 youth who exited care without achieving permanency between January and June 2017; this measure was applicable in 69 cases.[113] Sixty youth were either employed or enrolled in education or vocational training programs, and there was documentation of consistent efforts by the caseworker to help an additional youth secure education or employment. Overall, there was satisfactory performance with this measure in 65 (94%) of cases. DCF has now exceeded the outcome measure for youth exiting care.

[112] Ten youth were excluded from consideration due to being incarcerated or not being located. There was one youth fatality that was also excluded from this measure.
[113] Twelve youth were excluded from this measure due to being incarcerated, not being located, or relocated and in the process of enrolling. There was one youth fatality that was also excluded from this measure.

K. SERVICES TO SUPPORT TRANSITION

Services to Support Transition

Quantitative or Qualitative Measure	44. Services to Support Transition: 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, families and children may face several transitions, including changes in family relationships, living arrangements, service providers or schools. Some transitions are more critical than others but all require recognition and planning in order to be smooth and successful. DCF uses the QR process to measure case practice that supports families to make successful transitions.

This QR measure is reported by the Monitor on an annual basis. The Monitor will report on the data for Services to Support Transition from January 1 to December 31, 2017 in the next monitoring report.

L. CASELOADS

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

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

Table 3: CP&P Individual Worker Caseload Standards

Caseworker Function	Responsibility	Individual Caseload Standard (SEP Sections IV.E and III.B)
Intake	Respond to community concerns regarding child safety and well-being. Specifically, receive referrals from the State Central Registry (SCR) and depending on the nature of the referral, respond between two hours and five days with a visit to the home and begin investigation or assessment. Complete investigation or assessment within 60 days.	Intake workers are to have no more than **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.[114]
Institutional Abuse Investigations Unit (IAIU)	Respond to allegations of child abuse and neglect in settings including correctional facilities, detention facilities, treatment facilities, schools (public or private), residential schools, shelters, hospitals, camps or child care centers that are required to be licensed, resource family homes and registered family day care homes.	IAIU staff workers are to have no more than **12 open cases** at any one time **and** no more than **eight new referrals** assigned in a month.
Permanency	Provide services to families whose children remain at home under the protective supervision of CP&P and those families whose children are removed from home due to safety concerns.	Permanency workers are to serve no more than **15 families and 10 children in out-of-home care at any one time**.
Adoption	Find permanent homes for children who cannot safely return to their parents by preparing children for adoption, developing adoptive resources and performing the work needed to finalize adoptions.	Adoption workers are to serve no more than **15 children** at any one time.

Source: DCF

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

Verifying Worker Caseloads

DCF caseload data are collected and analyzed through NJ SPIRIT and SafeMeasures. As in previous monitoring periods, the Monitor verified caseload data supplied by DCF by conducting telephone interviews with randomly selected workers across the state. The caseload verification process included workers in all areas in which the SEP establishes caseload standards: Intake, Permanency and Adoption. A sample of 170 workers were selected from all active workers in June 2017. All of the 46 CP&P Local Offices were represented in the sample. For the past several years, CSSP has weighted the sample with Intake workers to examine in more depth the impact of shared cases between Intake and Permanency workers. The interviews were conducted from June through August 2017. All 170 workers were called and information was collected from 121 workers (71% of the eligible sample).[115] Among the 121 workers who participated in the caseload verification interviews, 74 were Intake workers, 18 were Permanency workers, 15 were Adoption workers and 14 were trainees.

During the interviews, Monitor staff asked each caseworker whether their caseload met caseload standards between January and June 2017; responses were compared to the caseload information from NJ SPIRIT and SafeMeasures on identified workers for the same period. Workers were also asked to report their specific caseload size for the month of June 2017 and their reports were compared with NJ SPIRIT and SafeMeasures data for that month.

Intake

In February 2017, DCF implemented a statewide internal caseload verification process as part of its continuous quality improvement initiative. The caseload verification review serves as a quality assurance method where Intake workers are interviewed and their reported caseloads are compared to their caseloads as reported in SafeMeasures. During the period of February through June 2017, DCF interviewed a random sample of 190 Intake workers across 20 Local Offices throughout the state. DCF verified that 93 percent (176 of 190) of Intake worker caseloads were accurately reflected in SafeMeasures. Findings from DCF's caseload verification reviews will be shared widely with DCF staff through briefs, posted onto the Office of Quality website and presented during ChildStat meetings.

The SEP Intake caseload standard is no more than eight new case assignments per month, no more than 12 open cases at any one time and no Intake worker with 12 or more open cases can be assigned more than two secondary assignments per month. In January 2017, DCF implemented a new methodology for tracking and reporting the SEP Intake caseload standard to more clearly communicate 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

[115] Four workers were on extended leave during the period the calls were made and were removed from the sample. Two additional workers declined to participate and five workers that were no longer assigned to the Local Office at the time of the call were also removed from the sample. The Monitor made at least three attempts to contact each caseworker in the sample.

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

Performance as of June 30, 2017:

Performance data for January through June 2017 shows that 97 percent of Local Offices met the Intake caseload standards.

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

Performance of June 30, 2017:

DCF met the individual Intake worker caseload standard this monitoring period. The state reported an average of 998 active Intake workers between January and June 2017. Among those active Intake workers, an average of 93 percent (924 of 998) of workers had caseloads that met the standard. Specifically, in June 2017, individual worker caseload compliance for Intake workers was 97 percent (979 of 1012 total workers). For the 33 Intake workers who did not meet caseload requirements in June 2017, the highest number of new intakes for any worker was nine and the highest number of open cases for any worker in the month was 25 families.

Data by Local Office show that during June 2017, performance ranged between 68 and 100 percent, with 41 (89%) of 46 Local Offices having all Intake workers in compliance with caseload standards.

Among the 121 workers who participated in the Monitor's telephone interviews for caseload verification, 74 were Intake workers. Five (7%) of the 74 Intake workers reported exceeding the caseload limits for new assignments at some point between January and June 2017. Twenty (27%) Intake workers reported having more than 12 total families on their caseload at some point during the same period.

DCF deploys Impact Teams (consisting of a supervisor and three workers) to a unit or a Local Office in different areas of the state when intakes are unusually high in order to assist in maintaining caseload standards by conducting 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 where 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 on a shared case for a family who is also currently assigned to a Permanency worker. According to DCF, this arrangement emphasizes the primary role of the Permanency worker in securing placement, facilitating visits, supporting the family to implement the case plan and coordinating services. It also reflects the Permanency workers' responsibility to provide information to the Intake worker and to link the family to appropriate services and supports identified during the course of the new investigation, thus relieving the Intake worker of the overall case management responsibility for the case. Intake workers continue to be responsible for the work required to complete investigative tasks and to reach and document an investigative finding. 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 4 provides the reported number of secondary assignments to Intake workers by month for this monitoring period.

Table 4: Number of CP&P Investigations and Secondary Intake Assignments by Month (January – June 2017)[116]

Month	Total Investigations Assigned to Intake Workers for the Month	Secondary Intake Worker Assignments of CPS and CWS Investigations	
January	6,119	575	9%
February	5,482	498	9%
March	6,343	527	8%
April	5,376	472	9%
May	6,868	619	9%
June	5,881	513	9%

Source: DCF data

The Monitor reviewed monthly Local Office data on secondary assignments and found that on average, each Intake worker was assigned one secondary case at any given time during the time period reviewed. The Monitor also found that an average of 26 percent of Intake workers received two or more secondary case assignments and an average of seven percent of Intake workers received three or more secondary assignments each month during the monitoring period. Specifically, in the month of June 2017, 223 (22%) Intake workers received two or more secondary intake assignments and 39 (4%) Intake workers received three or more secondary intake assignments.

During phone interviews with caseworkers, Monitor staff inquired about the prevalence of secondary assignments and their impact on workload. Intake workers were asked about the frequency of secondary assignments, the effect these assignments have on workload and how they are measured. Of the 74 Intake workers interviewed, 66 (89%) workers reported receiving an assignment to investigate a new report on an open permanency case as a secondary worker at least once in the six month period between January and June 2017. Of those 66 workers, 30 (45%) workers reported receiving at least one secondary assignment per month. Forty-three of the 66 (65%) Intake workers interviewed responded that in their opinion, the workload for an investigation on an open permanency case in which they are designated as secondary worker is equivalent to, or sometimes more than, the workload for an initial investigation. Workers explained that although Permanency workers may have completed collateral contacts or are able to provide information about the family's circumstances, every investigation must be approached in the same manner regardless of primary or secondary status.

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

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

Assignment of Investigations to Non-Caseload Carrying Staff

On occasion, in order to handle the flow of referrals for investigations, trained non-caseload carrying staff as well as caseload-carrying staff who are not part of Intake units (non-Intake caseload carrying staff) in Local Offices are assigned to an investigation. DCF reports that policy requires all staff to complete First Responder training prior to being assigned an investigation and non-caseload carrying staff have to have been similarly trained and receive supervision by the Intake supervisor. The Monitor's review of DCF's data for the months of January through June 2017 found that approximately one percent of investigations were assigned each month to non-caseload carrying staff and that about six percent were assigned to non-Intake caseload carrying staff. DCF produces a Caseload Report Exception List that documents all instances of intakes identified as assigned to non-caseload carrying workers and closely monitors this on an ongoing basis. Table 5 below shows the number and percentage of investigations assigned to non-caseload carrying staff, and Table 6 shows the number and percentage of investigations assigned to non-Intake caseload carrying staff.

As part of the phone interviews previously discussed, Intake workers were asked if there were scenarios in their Local Offices in which non-caseload carrying staff could be assigned an investigation. Thirty-four of the 74 workers (46%) reported that they were aware of instances in which this has happened in their office. Respondents stated that non-caseload carrying staff with prior investigative experience can be assigned cases when all Intake workers in a Local Office reach their assignment limit for the month. The most frequently identified job titles for the non-caseload carrying staff who are assigned investigations are Litigation Specialist and Resource Development Specialist.

Table 5: Percentage of CP&P Investigations Assigned to Non-Caseload Carrying Staff by Month (January – June 2017)[117]

Month	Total Investigations Received in the Month	Number and Percentage of Investigations Assigned to Non-Case Carrying Staff	
January	6,592	89	1%
February	5,931	70	1%
March	6,913	130	2%
April	5,786	81	1%
May	7,587	118	1%
June	6,419	189	3%

Source: DCF data

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

Table 6: Percentage of CP&P Investigations Assigned to Non-Intake Caseload Carrying[118] Staff by Month (January – June 2017)

Month	Total Investigations Received in the Month	Number and Percentage of Investigations Assigned to Non- Intake Caseload Carrying Staff	
January	6,592	384	6%
February	5,931	379	6%
March	6,913	440	6%
April	5,786	329	6%
May	7,587	601	8%
June	6,419	349	5%

Source: DCF data

Adoption

Quantitative or Qualitative Measure	26. Adoption Local Office Caseloads: 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.

Performance as of June 30, 2017:

Performance data for January through June 2017 show that 99 percent of Local Offices met the adoption caseload standard.

Quantitative or Qualitative Measure	27. Individual Worker Adoption Caseloads: 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, 2017:

DCF reported an average of 242 active Adoption workers between January and June 2017. Of the active Adoption workers, an average of 239 (99%) workers had caseloads that met the requirement throughout the monitoring period.

[118] This includes Permanency, Adoption, Impact and Advocacy Center caseload carrying workers.

Among the 121 workers who participated in the phone interviews conducted by Monitor staff for caseload verification, 15 were Adoption workers. One of the 15 (6%) workers interviewed reported exceeding caseload standards at some point during the period of January through June 2017.

Permanency

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

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

Performance as of June 30, 2017:

Performance data for January through June 2017 shows that 100 percent of Local Offices and 100 percent of individual workers[119] continued to maintain the permanency caseload standard during this period.

Among the 121 workers who participated in telephone interviews conducted by Monitor staff for caseload verification, 18 were Permanency workers. One (6%) of the 18 Permanency workers interviewed reported a caseload of 11 children in out-of-home placement, exceeding the caseload standard of no more than 15 families and no more than 10 children in out-of-home placement for the monitoring period January through June 2017.

Institutional Abuse Investigation Unit (IAIU)

Quantitative or Qualitative Measure	3. Individual Worker IAIU Caseloads: 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.

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

Performance as of June 30, 2017:

DCF data show 100 percent of individual workers maintained the IAIU caseload standard for the period of January through June 2017.

Supervisory Ratio

Quantitative or Qualitative Measure	2. Supervisor/Worker Ratio: 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, 2017:

Performance data for January through June 2017 show that 100 percent of CP&P Local Offices had sufficient supervisors to maintain ratios of five workers to one supervisor. The Monitor verified the state's reported information about supervisor/worker ratios by asking all 121 workers who participated in the telephone interviews about the size of their units for the month of June 2017; 117 (97%) workers reported being in units of five or fewer workers with one supervisor.

M. DEPUTY ATTORNEYS GENERAL (DAsG) STAFFING

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

Performance as of June 30, 2017:

As of June 30, 2017, 129 DAsG staff positions assigned to work with DCF were filled. Of those, five DAsG were on full time leave. Thus, there are a total of 124 (96%) available DAsG. DCF reports that in addition to these positions, DAsG outside of the DCF Practice Group have dedicated some of their time to DCF matters. DCF continues to meet the SEP standard for this measure.

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

QUALITATIVE REVIEW

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

Given the sample size and methodology, SEP measures based on the QR scores are reported by the Monitor on an annual basis. The Monitor will report on the data for all QR measures for the period January 1 through December 31, 2017 in the next monitoring report.

CONTINUOUS QUALITY IMPROVEMENT

Between January and June 2017, DCF continued to build out its systems and approach to Continuous Quality Improvement (CQI), including new training opportunities for staff to learn about incorporating CQI into their everyday work and an eight-part advanced CQI training for Office of Quality staff. DCF implemented a new Program Improvement Plan planning document intending to track practice improvement. DCF's monthly ChildStat meetings continue to model for staff the importance of the increased use of quantitative and qualitative data to better understand and improve system performance and outcomes.

O. NEEDS ASSESSMENT

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

DCF, in partnership with the Institute for Families at Rutgers University School of Social Work (IFF), has been engaged in a multi-year Needs Assessment process to identify the strengths and needs of families with children at risk of entering out-of-home placement as well as those already in care. A detailed description of DCF's Needs Assessment process is available in previous Monitor's reports and published by Rutgers in two interim reports.[120] In sum, Phase I involved a review of DCF internal reports and assessments completed by DCF and its partners from CY 2008 to CY 2014. Phase II involved an analysis of its findings and identification of seven areas of need: caregiver mental health, caregiver substance abuse, child mental health, child substance abuse, poverty, housing and domestic violence.[121]

In Phase III of the Needs Assessment process, in order to further understand the needs of children and families involved or at risk of involvement with DCF, researchers at the Rutgers School of Social Work conducted interviews and focus groups with family members, staff and contracted service providers – involving a total of 170 participants – to elicit information about the strengths, needs, gaps and barriers related to DCF's provision of services. Between July and December 2016, Rutgers reviewed transcripts from the focus groups and interviews, and analyzed and coded themes that emerged from this qualitative data. Rutgers also examined the particular needs and issues facing families with multiple needs and/or frequent contact with the child welfare system. Rutgers' report on Phase III of the process was released in May 2017.[122] In that report, Rutgers synthesized findings from the Phase III qualitative data into a set of themes, each of which relate to the identified 10 domains.

General themes include:

- Caregivers need services that help them maintain their recovery over time;
- Caregivers need mental health services that address co-occurring issues;
- Families impacted by domestic violence need a comprehensive service array;

[120] DCF's Needs Assessment: Interim Report 2015 can be found here: http://www.state.nj.us/dcf/childdata/continuous/DCF_Needs_Assessment_Interim-Report.pdf; DCF's Needs Assessment: Interim Report 2016 can be found here: http://nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Interim.Report_3.16.pdf

[121] During Phase III of the Needs Assessment process, Rutgers identified three additional domains: justice system-involved children and caregivers, challenging populations (defined as populations especially challenging to serve across several need domains, including low-income and undocumented families) and multi-need, frequent contact families.

[122] DCF's Needs Assessment 2016 Report #2: Qualitative Findings can be found here: http://www.nj.gov/dcf/childdata/protection/DCF.Needs.Assessment.Quality.Report_4.17.pdf

- Children need consistent, individualized mental health services;
- Children need trauma-informed mental health services;
- Caregivers need stable housing when children are in out-of-home placement;
- Dually-involved children need coordination between the juvenile justice and child welfare systems;
- Multi-need, frequently-encountered caregivers need help coping with complex life situations; and
- DCF staff and contracted service providers need help knitting together fragmented services to address complex family needs.

Between January and June 2017, DCF and IFF continued development of three surveys to assess family needs and services around seven need domains that were identified in the initial phase of the Needs Assessment process, as well as the three domains that emerged in the qualitative phase. The first potential pool of survey participants include approximately 2,000 Intake, Permanency and Resource Development Specialists. The second potential pool of survey participants will include approximately 1,800 resource parents and more than 10,000 biological parents with children at home and in out-of-home care. Rutgers piloted the staff survey during the current monitoring period and it is scheduled to be administered during the next monitoring period. Rutgers University Child Welfare and Well-Being Research Unit will partner with DCF in the analysis of the results.

P. FISCAL YEAR BUDGET

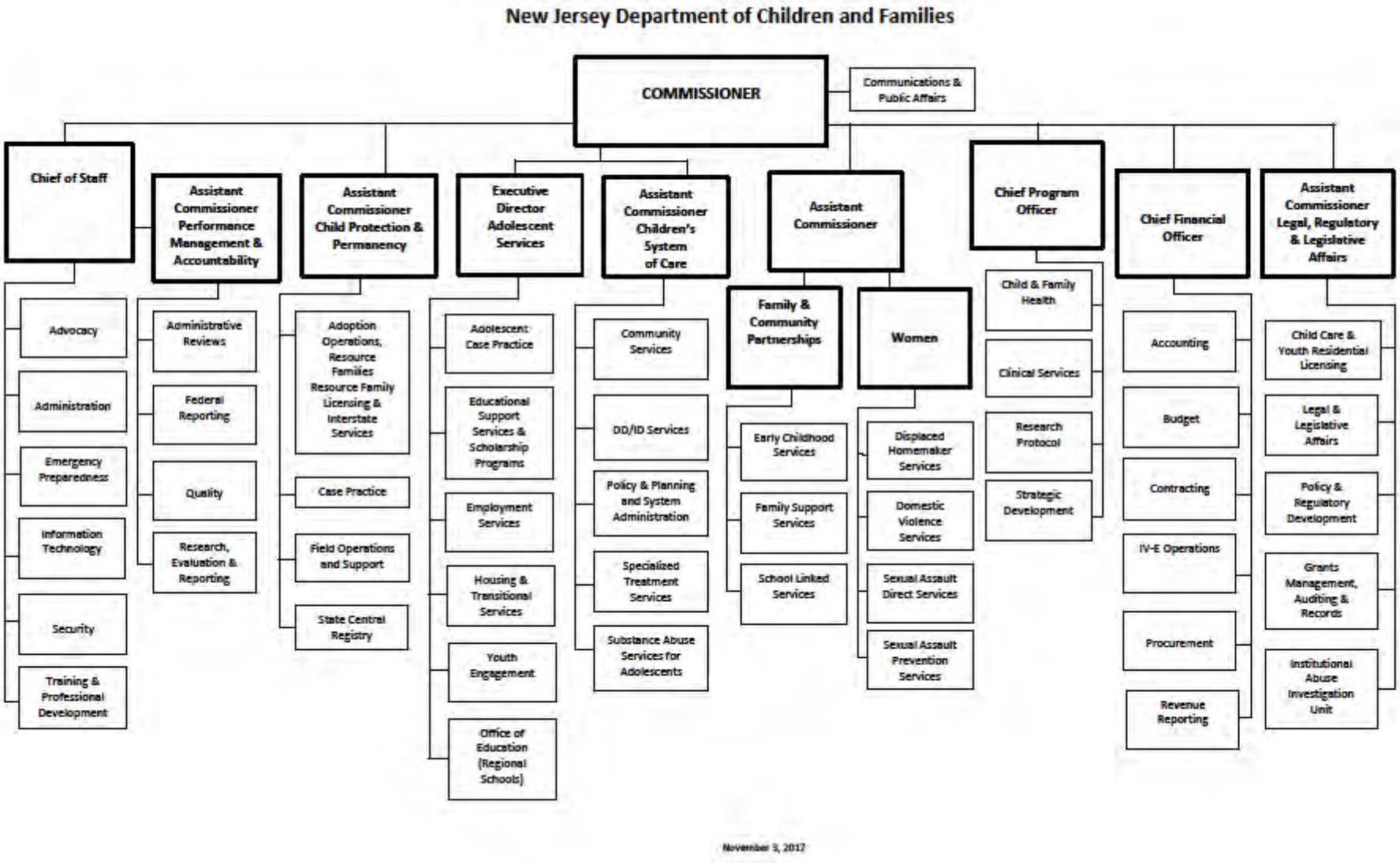
As discussed in the prior monitoring report, the Governor's proposed FY 2018 budget took effect July 1, 2017. The FY 2018 budget for DCF totals $1.211 billion in state funds, an increase of $28 million, or 2 percent, over the FY 2017 adjusted appropriation of $1.183 billion. The budget includes $22.3 million of new State funding for the Children's System of Care (CSOC). The investments in CSOC include $31.9 million for Intensive In-Home Behavioral Assistance and $5.7 million for Care Management Organizations. DCF's funding for programs and services in child protection and the CSOC is based on trend data which reflect current projections and is therefore expected to meet the commitments for programs and services to support children in out-of-home placement as well as in their community, school and at home. DCF's FY 2018 budgeted positions are 6,671; an 11 position increase over FY 2017 reflecting additional staff hired to meet SEP needs. Budgeted salary resources and position allocations will support the positions required in the SEP.

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

APPENDIX: A
Glossary of Acronyms Used in the Monitoring Report

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

APPENDIX: B


New Jersey Department of Children and Families
COMMISSIONER
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Chief of Staff
Advocacy
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Emergency Preparedness
Information Technology
Security
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Assistant Commissioner Performance Management & Accountability
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Assistant Commissioner Child Protection & Permanency
Adoption Operations, Resource Families Resource Family Licensing & Interstate Services
Case Practice
Field Operations and Support
State Central Registry
Executive Director Adolescent Services
Adolescent Case Practice
Educational Support Services & Scholarship Programs
Employment Services
Housing & Transitional Services
Youth Engagement
Office of Education (Regional Schools)
Assistant Commissioner Children's System of Care
Community Services
DD/ID Services
Policy & Planning and System Administration
Specialized Treatment Services
Substance Abuse Services for Adolescents
Assistant Commissioner
Family & Community Partnerships
Early Childhood Services
Family Support Services
School Linked Services
Women
Displaced Homemaker Services
Domestic Violence Services
Sexual Assault Direct Services
Sexual Assault Prevention Services
Chief Program Officer
Child & Family Health
Clinical Services
Research Protocol
Strategic Development
Chief Financial Officer
Accounting
Budget
Contracting
IV-E Operations
Procurement
Revenue Reporting
Assistant Commissioner Legal, Regulatory & Legislative Affairs
Child Care & Youth Residential Licensing
Legal & Legislative Affairs
Policy & Regulatory Development
Grants Management, Auditing & Records
Institutional Abuse Investigation Unit
November 3, 2017