



NEW JERSEY TASK FORCE ON CHILD ABUSE AND NEGLECT

STAFFING AND OVERSIGHT REVIEW SUBCOMMITTEE

14TH ANNUAL REPORT



FOR THE PERIOD OF
JULY 1, 2021 - JUNE 30, 2022

STAFFING OVERSIGHT AND REVIEW SUBCOMMITTEE MEMBERS

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On July 11, 2006, P.L. 2006, Chapter 47 was enabled which established the Department of Children and Families (DCF). This law amended numerous statutes in order to transfer a number of functions from the Department of Human Services to this new department, including the New Jersey Task Force on Child Abuse and Neglect (NJTFCAN or Task Force). The bill also expanded the responsibilities and membership of the Task Force. Further, the law included provisions whereby the Division of Child Protection and Permanency (CP&P), Staffing and Outcome Review Panel established under N.J.S.A. 30:4C-3.1 was dissolved and its roles and functions were assumed by the Task Force through the creation of a Staffing and Oversight Review Subcommittee (SORS) which is currently active under section 9:6-8.759(c).

The charge of the SORS is to review staffing levels of the CP&P in order to develop recommendations regarding staffing levels and the most effective methods of recruiting, hiring, and retaining staff within the CP&P. In addition, the SORS was mandated to review the CP&P's performance in the achievement of management and client outcomes and prepare a report of its findings to the Governor and the Legislature.

SUBCOMMITTEE PROCEEDINGS

The SORS met on the following dates using a virtual platform. The Committee made the decision to meet virtually during the Covid-19 global pandemic and has not yet returned to in-person meetings:

- July 13, 2021;
- September 14, 2021;
- November 1, 2021;
- January 11, 2022;
- March 22, 2022;
- May 10, 2022. - Cancelled

These meetings provided the SORS the opportunity to discuss and assess items associated with their statutorily mandated work.

To view a copy of the meeting minutes please visit <http://www.nj.gov/dcf/providers/boards/njtfcancan>

SUMMARY OF ACTIVITIES AND FOCUS—2021 TO 2022

The charge of the SORS is outlined in the NJTFCAN statute and includes the following:

- Reviewing staffing levels of CP&P;
- Develop recommendations regarding staffing levels;
- Develop recommendations around the most effective methods of recruiting, hiring, and retaining staff within CP&P;
- Reviewing CP&P's performance in the achievement of management and client outcomes;
- Report annually the SORS's findings to the Governor and Legislature.

SORS attended to this charge by creating a strategic workplan outlining six focus area goals to inform the SORS practice to assist DCF in the achievement of the department's priorities.

PRIORITIES OF THE SORS

Summary of work for 2021 - 2022:

SORS convened its body during the past year for a total of five times. In the meetings, the focus was on several areas agreed [upon in the previous work plan.](#)

IMPACT OF COVID-19 ON THE DCP&P WORK AND THE WORKFORCE:

DCP&P along with the rest of the country has moved to a "post-Pandemic" working world. Children and families have returned to school and work, but not without the continued presence of COVID-19 and its impact upon both the families and the staff of the Division. Service provision continued to be nimble in order to meet the needs of both the workforce and the families and youth to whom the Division is responsible. This included a return to both in person services and a continuation of virtual and online check ins. Both staff and families indicated that it has been a good balance and that they continue to have increased contact with each other, particularly when some of the barriers of transportation and childcare are removed.

UPDATE ON THE MOST RECENT FEDERAL COURT HEARING:

The Commissioner and her team during 2022 have built upon the extraordinary work that has been done during the last 11 years to bring the Department and Division out of Federal oversight. To that end during the last scheduled court hearing, the Court signed off on an exit plan and agreement reached by the parties and the monitor. The plan proposes a sunset date of the federal oversight and recommends, among other things, authorizing legislation to incorporate an ongoing monitoring component of the Division underneath the existing SORS structure. The proposed legislation, S2395 (Scutari)/A3707 (Coughlin), would also adjust the makeup of SORS to include additional stakeholders, outlines additional responsibilities and provides SORS with additional authority to undertake some of the tasks outlined in the Federal monitor order.

This proposed legislation, if enacted, would do two things, mandate many of the critical system improvements that have developed through the Federal oversight process and it would essentially expand and authorize the SORS to review, analyze and make recommendations regarding the department's performance in the areas of:

- Case Tracking and Data Collection
- Implementation and sustaining of a Case Practice Model
- Operation of the State Central Registry
- Ensuring the provision of the most appropriate and least restrictive placements for children when out-of-home is necessary
- Providing comprehensive, culturally responsive services to address the needs of children and families
- Providing Medical care to children and youth residing in resource family care
- Maintaining a comprehensive training program for child welfare staff and supervisors
- Making flexible funds available for casework staff to create flexible individualized plans of care for children and families
- Adjusting support rates for resource family care, adoption assistance and independent living
- Strengthening and sustaining appropriate permanency and adoption practices for children and youth
- Ensure the beginning of the process to prepare a child for adoption and seeking a securing an adoption placement as soon as that child's permanency goal becomes adoption

The legislation also appropriates funding to ensure that SORS has the staffing and resources to carry out the responsibilities and would reorganize the membership of the committee to ensure that there is an appropriate representation of critical stakeholders, including:

- The Assistant Commissioner of the Division (ex-officio);
- Commissioner of Children and Families (ex-officio);
- a representative of a State-based child advocacy organization,
- an attorney regularly engaged in the representation of parents;
- at least one attorney regularly engaged in the representation of the indigent;
- one attorney regularly engaged in the representation of children in out of home placement;
- one county human services director;
- one parent who has previously had involvement with the Division;
- one alumni of the State's resource family care system;
- one resource family parent who is currently licensed by the State; and
- one representative of a State-based child abuse prevention focused organization.

The legislation outlines parameters for caseloads, non-compliance and emergent measures to be taken in an event of non-compliance.

SOLUTION BASED CASE PRACTICE MODEL:

As a recap, the Department decided to move forward with an add on to their existing case practice related to child/family teams and determined to layer the Solution Based Case (SBC) practice to enhance their relationships with children and families. SBC is intent upon allowing families to be seen and heard, to allow their voices and experiences to be recognized as the experts in their own lives. This model is about helping families feel empowered so that DCP&P is not focused on service driven interventions to help families with their identified needs, while at the same time making available the resources to families who need them. This model will be layered on top of the case practice model and will allow family teams to organize, prioritize and document the work of the Division and will lead to stronger family connections, stronger family voice

in decision making and strong and meaningful outcomes.

In November DCP&P completed training for all staff related to the SBC which was rolled out in January 2022. The Division determined to initially start with all new cases coming into the agency with an expectation that they would bring the remainder of the case load up in planned steps. This implementation will support families by focusing on assessment and case planning and creates a structure to assist the case workers and supervisors to ask good questions so that they gain context around what a family is struggling with and why. It will also give the families a clearer path and understanding of the Division's expectations of them so that they can meet the agreed upon benchmarks which will hopefully result in a more efficient resolution of the issues resulting in the Division's intervention. Through this process, all staff will be certified in SBC and will have to demonstrate proficiency across the four milestones in SBC. It is anticipated that this will take one to two years for all stakeholders to get acclimated to the new process. Supervisors have been trained to grade the tools that staff are using to develop their skills, and they will use a case consultation method to ensure a feedback loop for the case work staff.

RACE EQUITY, INCLUSION WORK:

The Department made a commitment last year to imbed race equity and inclusion into all of their initiatives. That commitment included a significant investment in training for all of the DCP&P, DCF and partner agencies in diversity, equity and inclusion. They contracted with Dr. Jessica Pryce to facilitate "Courageous Conversations" which included staff throughout the state at different levels, to learn about the historical precedent of racism and child welfare and the disproportionate outcomes for Black and Brown children.

An office of Diversity, Equity and Inclusion has been added to the Department. The Race Equity Steering Committee continues to work on understanding disproportionality in the system and to look at the role that structural and institutional racism has on outcomes for communities of color. In keeping with their intent to look at all their policies and practices related to disproportionality, they are working with Joyce James Consulting to do strategic planning for the implementation of antiracist practices throughout DCF. They are also engaged in a "Groundwater

Analysis" which is a process through which practitioners at all levels can internalize the reality that we live in a racially structured society and that is what causes racial inequity. The executive staff at DCF have all participated in this process and they found it to be eye opening and emotional.

DCF continues to be an active partner in race equity work being done through the NJ Children in Court Improvement Committee, which has sponsored training for stakeholders and is working with county Court Improvement Advisory Committees to identify and implement SMART goals to address the overrepresentation of children of color living in foster care. There has been significant movement in this area in some jurisdictions.

INCREASING KINSHIP PLACEMENTS FOR CHILDREN OF COLOR:

The Division has experienced significant success in their movement to have children placed with Kin or fictive kin when placement is necessary. There were a number of strategies that were put in place to support this effort. This included "Kinship Matters Training" which was developed with Child Focus using the tenants of Joseph Crumbley's curriculum "Engaging Kinship Care", understanding the experience of kinship caregivers and the consideration that needs to be given when working with kinship families. Local Office Managers must approve a child being placed in a home that is not kin through a "Kinship Exception Request" to ensure diligence in searching for kinship options. Each office was responsible to develop objectives and key results (OKR's) to address the dynamics in their office. Local office resource units were also restructured to ensure that the units are strong and have specialized functions with clearly defined roles. As of January 2022, each local office has identified resource support workers who only work with resource homes, caseloads are manageable to allow staff to have more contact with caregivers and there are home-study writers who will work specifically to allow kinship homes to be licensed more quickly.

SORS had the opportunity to review some of the available data related to out-of-home placement, kinship placement and replacement and re-entry into care. Those data points include:

- **ENTRIES INTO CARE**

- Steady decline in number of children entering care
- Aligns with decrease in number of children in placement
- There is little change (approximately 8%) over the previous five years regarding out of home placement of Black/African American children vs. white children.

- **PLACEMENT STABILITY**

- Majority of children have had two or fewer placements (approximately 66%)
- Number of children with 3 or 4 placements is approximately 20%
- Number of children with 5 or more placements is approximately 15%
- More children that are placed with kin have two or fewer placements (more stable)
- Between 2016-2020 for children that were in two or fewer placements, there was a slight increase in stability over all races.
- Placements for white children were more stable than those of Black/African American children (approximately 6% difference) in those that had two or fewer placements and those that had 3 to 4 placements.

- **KINSHIP CARE**

- Between 2013-2021 in terms of initial number of placements there is a significant increase in the number of placements with kin.
- Between 2018-2021, there was a significant decrease in the disparity in the number of Black/African American children vs. white children placed with kin.

- **RE-ENTRY**

- In the past two years, there was a concerning increase in the number of children that re-entered placement. This increase may be as a result of COVID-19, but it will need to be monitored to determine the cause.
- Historically, there has been a significant disparity regarding re-entry of Black/African American children vs. white children. However, recently there has been a decrease in this disparity.

OFFICE OF STAFF HEALTH AND WELLNESS:

Last year, DCF took the bold step to create an Office of Staff Health and Wellness for the purpose of engaging staff in resources and support that fosters overall physical and emotional well-being, strong morale and a culture of inclusivity and empowerment. DCF appointed Nancy Carre-Lee as Executive Director of the Office. Ms. Carre-Lee was previously the Assistant Director of the Division of Child Protection and Permanency and so has unique insight into the needs of DCF staff and with this knowledge in hand and mindful of the impact that COVID-19 had on the workforce at DCF, Ms. Carre-Lee was tasked with the creation of this new office. In a relatively short time frame, Ms. Carre-Lee has implemented a broad range of strategies to alleviate stress and trauma as noted below. They partnered with Alia Innovations, a national non-profit dedicated to child welfare reform, to provide training to staff, beginning with executive management and senior management to ensure top-down consistency and buy-in.

They implemented robust security measures including security advisors, piloted a state-of-the art technology called Safe Signal to safeguard staff in the field. It is an alert messaging system that allows staff to be monitored for safety in real time and has a central monitoring that tracks the location of staff and can alert law enforcement if staff need assistance. They engaged with the University of Kentucky to implement a "Safe Culture" survey, to obtain a landscape of the organization itself to determine if staff feel physically and psychologically safe in the workplace.

From the wellness and training perspective a COVID resource page was developed on the DCF website, so staff have access to all needed information, they provided the Clip All Access pass, which links to 600 training tools that staff can use for personal or professional growth, launched a "real talk" series once a month which is a live broadcast that talks about relevant issues that impact emotional health, and they implemented a series of webinars for staff, a few of which were: Laughing Yoga, the 8 Dimensions of Wellness and Trauma and Vicarious Trauma.

CHILDREN'S SYSTEM OF CARE INTEGRATION:

Assistant Commissioner Mollie Brodsky-Greene presented to the SORS committee about the integration of the Children's System of Care (CSOC) and DCPD services. The

initial work focused primarily on ensuring the collaboration with all the divisions within the Department. The psychiatric and clinical team was moved into the CSOC executive team and this helped to restructure their relationship between DCP and the clinical team. Standing clinical consultations were created for staff and emergencies can now be done in the moment instead of protracted over time.

For Screening and Central Registry they created warm handoffs to PerformCare and started to do advocacy with screening staff at the Crisis Centers so that youth in need were going to the right placement, not just any placement. A service setting was created during the pandemic, a COVID Emergency Shelter and standby emergency homes for youth who needed an alternate setting to recover. An emergency treatment home pilot is currently underway to allow for immediate access to evaluations and psychiatric evaluations to prevent disruptions in placement.

CSOC created an internal substance use disorder work group which is currently focused on training needs, provider needs and universal screening for substance use disorders (SUD). The work also focuses on making sure that youth get access to SUD treatment from the beginning. A number of internal documents were updated, including the Child and Adolescent Needs and Strengths (CANS) tool and the assessment tool. A SUD fellowship program has been developed in collaboration with the Office of Training and Professional Development. It is a year-long learning opportunity for interested staff, which includes didactic and experiential work to offer a lens of understanding into active SUD in child welfare.

Ongoing initiatives include: racial disparity work, creating a mobile treatment unit for youth with intellectual and developmental disability needs (which represent about 6% of youth in DCP&P care) and looking at an Assertive Community Treatment Model for youth.

CHILD AND FAMILY SERVICES PLAN (CFSP):

NJ's 2020-2024 CFSP supports NJ DCF's vision that everyone in New Jersey is Safe, Healthy and Connected:

Safe – absent from harm or maltreatment

Healthy – mentally, developmentally and emotionally well

Connected – bonded, or tied together through biology, familiarity, or community

This concept mirrors the federal Children's Bureau vision for realigning child welfare across the United States by shifting the priority towards strengthening families through primary prevention of child maltreatment. Building on the successes of the previous 2015-2019 CFSP, gathering input from stakeholders as well as a holistic review of current system performance, the NJ DCF 2020-2024 CFSP focuses on the following goals over the next five years:

1. Child maltreatment and child fatalities resulting from maltreatment will be reduced
2. Timely and effective family stabilization and preservation will be achieved
3. NJ DCF staff will be healthy and well positioned to engage and support children, youth and families to be safe and to thrive

Additionally, NJ DCF is focused on ensuring services are available, accessible, acceptable and of the highest quality. To achieve this goal, NJ DCF plans to implement the following strategies:

- Establish a continuum of core service programs, evidence-based program when available
- Establish service excellence standards
- Develop DCF infrastructure for program monitoring and development

2022 ANNUAL PROGRESS AND SERVICES REPORT (APSR):

NJ DCF's 2022 APSR, the second update to their 2020-2024 CFSP, was submitted and approved in November 2021. It highlights the work done by DCF to advance the outlined goals of the 2020-2024 CFSP and their continued assessment, development, and implementation of a comprehensive continuum of services for children and families based on their vision and strategic planning. The report describes their service coordination and collaboration efforts and how NJ DCF is integrating results from their CFSR and other continuous quality improvement activities to ensure high quality service delivery. NJ DCF's 2022 APSR and supporting documents will be available online at: <https://www.nj.gov/dcf/childdata/njfederal/>.

Updates on DCF's progress with the goals outlined in the 2020-2024 CFSP can be found in the 2021 Annual Progress and Services Reports (APSR). The report is available online at DCF | Federal Reporting ([nj.gov](https://www.nj.gov/dcf/federal-reporting/)).

ISSUES FOR FOLLOW- UP IN 2022-2023:

The SORS identified the following priorities for the upcoming year as it relates to the CFSP as well as impact by FFA. These areas are in alignment with the vision of the new DCF Administration and will encompass facets of the shift in the focus to prevention.

1. Request information from DCF regarding recruiting staff, workforce development, and hiring.
2. Request information/data from DCPD regarding re-entry into out-of-home placement.
3. Request an update from DCF regarding Family First Prevention Services and any outcome data.
4. Request a presentation from the DCF Office of Staff Health and Wellness (Safety Survey, Staff Response).
5. Request a report from DCF regarding the Four Branch Meetings regarding takeaways/recommendations/next steps.
6. Request an update from DCPD regarding the impact of Solution-Based Casework.
7. Request information from DCF pertaining to the impact of Telework Pilot on DCF staff.
8. Monitor the ongoing immersion, implementation of Diversity, Equity, and Inclusion practices across the various divisions – CSOC, DCPD, OTPD, etc.
9. Request information on DCF's ongoing efforts related to bias, anti-racism and anti-poverty training.

SORS will explore these issues to determine what oversight will be necessary to ensure that the improvements being achieved now are sustained for years to come to ensure the safety of our most vulnerable children.