DCF Needs Assessment

A Report by the Office of Performance Management and Accountability

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New Jersey Department of Children and Families

Needs Assessment

I. Overview and Purpose of the Needs Assessment

As part of the ongoing requirements under the Modified Settlement Agreement (MSA), and as a key component of a learning organization, the NJ Department of Children and Families (DCF) is committed to understanding the needs and service gaps of those it serves. Specifically, the MSA requires that:

"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."

With this in mind, DCF will implement a multi-year needs assessment that focuses on identifying the strengths and needs for children and youth in out of home placement through the Division of Child Protection and Permanency (DCP&P) as well as for children at risk of entering out of home placement. DCF proposes that the focus of the DCF Needs Assessment be narrow in scope in order to have the ability to delve deeply into areas identified through a mixed-methods approach to gathering and assessing information from a variety of sources. This needs assessment will not only provide the data for DCF to understand the needs of children, youth, and families, but will prioritize needs for implementing actionable change to enhance the current service array. Using data to drive the focus of the needs assessment will ensure that the results and recommendations are germane to the geographic area and subpopulations subject to the needs assessment. Appendix A outlines the timeline for the completion of the multi-year DCF Needs Assessment.

II. Approach

Using a mixed-methods approach of both quantitative and qualitative data, DCF will collaborate with stakeholders including youth in care, families, external providers (i.e. court system, service providers, etc.), other key community informants, and internal staff members to create a responsive approach that focuses on the safety, permanency, and well-being of children and youth in out-of-home care and families with children at risk of placement. The goals of this needs assessment are to:

- Identify and prioritize the placement and service needs[1] (as identified by the family-serving professionals) and the service demands (as identified by families themselves) of the target population;

- Identify and evaluate the current service array within DCP&P through contracted and community based resources focusing on the availability, accessibility, utilization, and quality of services;

- Identify gaps in services and placement resources needed to support children in out-of-home placement and their families;

- Partner with external stakeholders to develop targeted, prioritized recommendations based on the findings of the needs assessment;

- Provide recommendations to DCF leadership to enhance and/or develop services to improve the permanency, safety, and well-being of children and youth in out of home placement or at risk of placement and their families.

DCF proposes to form an internal workgroup responsible to carry out the DCF Needs Assessment planning, implementation, recommendation, and follow-up. The internal workgroup will be headed by Assistant Commissioner of Performance Management and Accountability (PMA), and includes additional staff from across the Department, including representation from the Office of Strategic Development, the Office of Quality, the Office of Research, Evaluation and Reporting (RER), the Office of Contracting, as well as staff in key roles across the DCP&P, CSOC and FCP. This group will be comprised of leaders with authority to ensure discussions are productive and decisions are made timely.

In an effort to better collaborate and receive feedback from stakeholders, the creation of an external stakeholder board is imperative. This group will be comprised of a broad range of individuals representing community based agencies, the court system, families, youth, and other key participants from all three regions. This board will be charged with reviewing, interpreting, and validating findings from the DCF Needs Assessment and working with DCF's internal workgroup to formulate recommendations for action. Recommendations will then be incorporated into a final report and utilized by DCF's internal workgroup to strategically plan regional or local service improvements and, when appropriate, statewide enhancements.

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[1] DCF recognizes the importance of the family voice in determining their needs and acknowledges that there may be differences between that family voice and the assessment of family needs from the professionals working with the family. Professional assessments for services are needed to account for underlying needs and the presenting behavior.

While the external stakeholders function as an intermediary that ensures community feedback is incorporated, it is the internal workgroup that is accountable to ensure appropriate and meaningful steps are taken to strengthen the overall system.

Since the DCF Needs Assessment is designed to identify the placement and service needs for children and youth in out of home settings, as well as service demands of at risk families, the process must be positioned to identify local variation among needs. In order to address the array of service needs across the state, DCF will divide the state into three regions (North, Central, and South) focusing on one region each year over a three-year period to ensure each region is assessed every three years. The regions consist of seven counties each and are identified below:

Northern Region: Bergen County, Essex County, Hudson County, Morris County, Passaic County, Sussex County, and Union County

Central Region: Hunterdon County, Mercer County, Middlesex County, Monmouth County, Ocean County, Somerset County, and Warren County

Southern Region: Atlantic County, Burlington County, Cape May County, Camden County, Cumberland County, Gloucester County, and Salem County

The DCF needs assessment will take a systematic and comprehensive approach based on the framework outlined by McKenzie, Neiger, and Thackeray (2012) in *Planning, Implementing, and Evaluating Health Promotion Programs*. DCF's needs assessment will include four phases including I) gather, analyze and summarize existing data available across a variety of quantitative and qualitative data sources; II) collect and analyze new data from stakeholders to identify and prioritize needs across specific subpopulations; III) identify and evaluate current services; and IV) validate needs identified and make recommendations. Each of the four phases in the needs assessment is discussed in more detail below and will be implemented by DCF staff and key partners. By utilizing this robust, mixed-methods approach, DCF can expand its reach and understanding of current service needs, existing services, and gaps.

To ensure accountability and timelines for this process, DCF will generate interim reports at the conclusion of each phase of the needs assessment to be reviewed by both internal and external workgroups in order to inform the next phase of the needs assessment. Analysis of all data will culminate in a final report, informed by the external stakeholder board, that summarizes a prioritized list of needs, gaps in services for the specific region under review, and provide recommendations for action to improve the overall system. The final report will have a broad distribution as it is anticipated to heavily impact service delivery, contracting, budgeting, and programmatic decision-making.

III. Implementation

Phase I: Gather, Analyze and Summarize Existing Data

The first phase of the DCF needs assessment is to review, analyze and summarize all sources of data currently available to DCF through a variety of sources. Using the attached chart (Appendix B), DCF staff will collect an accounting of the variety of different needs assessment-like processes occurring across the department. DCF regularly collects both quantitative and qualitative data for case and performance management purposes. In order to leverage all of the processes underway at DCF, the full scope of the available data must be clear.

For example, Family and Community Partnerships (FCP) has partnered with the NJ Task Force on Child Abuse and Neglect, Prevention Committee to design and implement a new Statewide Prevention Plan. The Prevention Plan was created based on the results of a similar needs assessment process conducted by an outside entity with a focus on intact families who are considered at risk. Similarly, the Office of Adolescent Services (OAS) is also engaged in a needs assessment process for older youth involved[2] with DCP&P and has planned a needs assessment as part of a recently awarded federal planning grant. Another example is the data collected through other continuous quality improvement efforts across the Department such as Qualitative Reviews (QR), targeted record reviews, and other existing surveys that generate reports summarizing findings on a variety of subpopulations and topics. Therefore, DCF proposes that the needs assessment begins with a thorough review of existing reports and publications that assess needs from across the Department.

As a second step, DCF will analyze existing administrative data from New Jersey SPIRIT (NJS), the child welfare case management system, as well as SafeMeasures, a performance management system available to all staff. In addition to the Key Performance Indicators (KPI) tracked through SafeMeasures, DCF tracks data on placement of children and youth in out-of-home care, repeat maltreatment and re-entry into care, permanency outcomes, educational stability, physical and mental health care, services to families, and services to older youth. The DCF data system allows for tracking information at the macro and micro levels with data available by child, family, caseworker, local office, region, and/or state levels.

The administrative data will be used to understand the basic placement and service needs of the entire out-of-home population. This analysis will begin with understanding the demographics and descriptive factors (i.e. age, race, geography, type of abuse, type of placement, placement stability, length of stay) of the out-of-home target population and the regional variation that exists across the State.

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[2] The OAS processes look at youth living independently, living in out of home placements, or family.

The next step will be to look at the data available through the Standard Decision Making (SDM) tools used by caseworkers to assess families. Each family that is investigated for a CPS report has a Safety and a Risk Assessment conducted during the investigation. These assessments can provide information about identified risk factors for families as one indication of potential service needs. Although there are some limitations in using this data to draw conclusions as to the needs of families, it provides additional points of reference when analyzed in aggregate. Additionally, when a case is open for services with DCP&P, the caseworker is required to do a Strengths and Needs Assessment for both the child and the caregiver every six months as part of the planning process. These assessments contain information on physical and mental health, coping skills, substance use, relationships, parenting skills, and financial resources. Again, while this data may have some limitations in its utility, an analysis of the Strengths and Needs data will be the best source of information to take a broad look at all children placed in out-of-home care across the State as well as the needs of intact families at risk.

In addition to the SDM tools, DCF will aggregate data of professional and diagnostic assessments (i.e. psychological or psychiatric assessments) being requested and paid for by DCP&P as a proxy for the type of referral services needed for children and families. This analysis will look at the frequency of services secured to support the needs of a family; such as childcare, transportation, family preservation services, individual and family therapy, homemaker services and others. The focus will rely heavily on services that DCF pays for on a fee-for-service[3] basis to increase the likelihood of quality data. The data when taken in aggregate can provide an accounting of the frequency and types of services children, youth and their families are receiving. This will be incorporated into DCF's larger inventory of contracted services for a complete picture of available resources regardless of payment type and matched with identified needs and service demands in Phase III of the needs assessment.

When results of all these data sources outlined above are combined through the DCF needs assessment, the Department will have a comprehensive, multi-source understanding of the placement and service needs of all children and youth in out of home placement and families whose children may be at risk for entry into out of home placement. Understanding the results of completed and ongoing assessments across the Department will allow DCF to synthesize all that is known about the current needs of children, youth and families served by Department. Additionally, given the timing and similarities of the other needs assessments, this work will maximize understanding to avoid duplication of efforts, and leverage a multitude of resources and expertise to sufficiently assess the needs of both the out-of-home population as well as intact families in order to fully satisfy the MSA requirements.

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[3] Services provided to families on a fee-for-service basis, require casework staff to enter payment information into NJS thereby increasing the likelihood of accurate information because if there is no payment, the family cannot access the service timely.

In turn, understanding what story the exiting data tells, leads to decisions about what populations and topics need further exploration in phase II of the needs assessment. In phase II, DCF will collect additional data to improve our in-depth knowledge of the specific placement and service needs of certain subpopulations. The deliverables due to both internal and external workgroups at the conclusion of Phase I are as follows:

- Meta Analysis of the array of needs assessments within DCF;

- Summary of the analysis of DCF administrative data at the statewide and when available at the county/DCP&P Local Office level;

- Guidance to DCP&P leadership about using the analyses completed to inform decision-making broader than for the DCF Needs Assessment process, and;

- Areas to focus on in primary data collection processes.

Phase II: Collect and Analyze New Data and Prioritize Needs

Primary data collection strategies will be used in the DCF Needs Assessment to delve more deeply into understanding aspects of the findings from Phase I. In order to achieve this, DCF will create structured interview guides and surveys to conduct informational interviews, focus groups, and population based surveys to yield a more in-depth analysis of targeted subpopulations of interest. For example, much is known about the need for additional services for parents with a substance use disorder. However, the administrative data will not be able to answer questions about the level of care needed, the type of substance used by the participant in the program, the quality and accessibility of the service, or whether the service provided meets the current need. This data collection process provides the opportunity to interview DCP&P local office staff about referred services for families, anticipated outcomes, and insight into the decision making process that leads to a referral for services.

DCF will conduct structured informational interviews with external providers, key community informants, and DCP&P leadership located in the region being assessed as needed. Administered by PMA staff, these discussions will provide expert opinions on the needs of the community to assist DCF with better understanding the placement and service needs children and families are encountering. Providers will be chosen based on their presence in the community (i.e. they serve a wide variety of DCP&P families in their region) as well as through discussions with local DCP&P leadership to ensure that key information is received from the most knowledgeable individuals who are deeply engaged in providing children, youth and their families with quality care. Once completed, interview responses will be analyzed in order to identify themes and trends. These responses will inform the development of questions for the population-based survey as well as to inform the structured interview guide for focus group.

DCF will conduct focus groups with approximately four target groups: provider agencies, youth, families, and DCP&P staff. Each group will consist of 6-10 individuals invited through a formal process and meetings will last approximately 45-90 minutes. Utilizing 8-10 targeted open-ended questions, DCF will lead discussions in an opportunity to identify broad and sweeping issues affecting youth in out-of-home placements and families with children at risk of placement and the type of services needed to address these issues. Focus group meetings will take place in an area that is convenient for members in the relevant region to help enable consistent attendance. Once completed, focus group responses will be analyzed in order to identify themes and trends. These responses will also inform the development of questions for the population-based survey.

Surveys are a key component to any needs assessment as they allow us to target a larger population than focus groups and informational interviews. Three parallel surveys will be created to capture the responses of providers, youth/families, and DCP&P staff members. All will be similar but adapted to respondent's roles.

Each survey will focus on understanding the placement and service needs of the target population, as well as the current services available to address those needs. The questions will be constructed based on the information gathered during the informational interviews and focus groups to ask specific questions that focus not only on the service needs, but also on the availability, effectiveness, and accessibility of services in the designated area. Broad areas of services will be defined as opposed to individual service agencies. For example, substance abuse screening, case management services, and therapeutic services may each be part of a broader array of service needs analyzed.

DCF will conduct approximately 25 surveys within each target group (i.e. provider agencies, youth, families, and DCP&P staff) that contain a mixture of open and closed ended questions. This will allow opportunities for individuals to leave more substantial comments. Key questions include: What are the most useful services? How do you use this service? How helpful are these services? The majority of the questions will be close-ended allowing individuals to rate each question to the best of their abilities using a Likert scale. Additional surveys of up to 200 per target group that are entirely closed-ended will be conducted using a similar question format. All surveys will be available both online and in paper format to accommodate families who do not have internet access.

After all data is collected, DCF staff will analyze all data from both existing data sources and newly collected data to identify and prioritize placement and service needs as well as service demands as outlined by the stakeholders. The analysis will focus on understanding the needs among the entire population but also on targeted subpopulations when possible as there will likely be variation in need across various subgroups (e.g. geography, age, placement type, stakeholder type, etc.). The ultimate goal of the analysis is to develop a prioritized list of needs for review. Each identified need will be ranked using the priority ranking process as outlined by

McKenzie et al. This process allows each identified need to be ranked across four different components to generate a priority score. These components are as follows:

A. size of the problem (0 to 10)

B. seriousness of the problem (0 to 20)

C. effectiveness of the possible interventions (0 to 10)

D. feasibility or the ability to conduct an intervention based on economics, resources, and legality (0 or 1)

Basic priority rating (BPR) = [(A + B) * C] / 3 * D

DCF in consultation with the external stakeholder board will assign a priority score to each need identified. These priority ratings will serve as a guide for DCF and its partners to make decisions on where to invest resources. There are likely to be many needs that arise from this process and the priority rating will provide some quantitative metric by which to make decisions based on the volume and seriousness of the need. Ultimately, decisions will be made based on the totality of the needs assessment, but the priority score will inform the decision making.

There will likely be a myriad of needs identified from this needs assessments across a variety of topic areas. With limited available resources, DCF must prioritize the needs of the children and families of the State based on the charge of the Department. A priority score would be given a "0" if the need falls outside DCF's scope of work. This need would still be reported out in the regional and final reports, however, DCF would work with the external stakeholder group to identify appropriate State and community partners that would be better suited to address these needs directly. For example, should community or gang violence be identified as a high priority need from our focus group and survey data collection, that is an important piece of actionable information. However, DCF may do a "warm transfer" of this knowledge to another State agency or community provider to focus on this need as it more squarely fits within their strategic priorities.   A priority score of "0" would never be given based solely on the availability of DCF resources, especially if the need falls within the mission and scope of work of the Department.

At the conclusion of Phase II, the following deliverables will be available to the workgroups for review:

- Results and summary of themes from informational interviews and focus groups

- Summary of findings from population-based survey outlining both general needs and needs of specific subpopulations, and;

- Summary of the highest priority of needs.

Phase III: Identify and Evaluate Current Services

Once needs are defined and prioritized for a region, DCF will identify the existing landscape and utilization levels of contracted and community based resources available to children, youth and families in the region geared toward addressing the highest priority needs identified. DCF will rely on content analysis of Business/Area/Local Office information (i.e. contracts and provider quarterly reports) as well as data available through DCF Central Office supports (i.e. financial downloads). Through this process, DCF will also make a determination if contracted services are offering best practice; evidence based, or evidence informed programs.

DCF will match the service landscape and utilization data against findings from Phase II above on the availability and effectiveness/satisfaction with existing services in the region to assist with identifying gaps or barriers that need to be addressed. This analysis will provide DCF with a better understanding of what programs are available to the target population; which programs are being utilized; how effective/satisfied stakeholders are with programming, and an overall understanding if the identified needs of the target population are being served. The Phase III process and deliverables will inform the recommendation process and/or prioritize recommendations if there are competing priorities.

Phase III deliverables are as follows:

- Inventory of contracted and community based services relevant to the areas of need explored in the DCF needs assessment;

- Summary on the frequency existing services are accessed and/or the levels of service contracted providers are providing.

- Identification of potential gaps in identified needs and existing service array.

Phase IV: Validate Needs Identified and Make Recommendations

After all needs are identified and prioritized, and after the existing service array is examined for gaps, a summary of the findings will be shared with the external stakeholder board. Together, DCF's internal workgroup and the external stakeholder board will validate and prioritize the identified placement and service needs identified by professional stakeholders along with the service demands identified by youth and families to create a blended list of priorities for DCF. These groups together will use the list of prioritized needs to develop recommendations for change. DCF's internal workgroup will be responsible for turning these recommendations into

an actionable plan. This plan will be comprised of practical steps that can be measured and evaluated over time.

Upon completing all data collection, analysis, and stakeholder engagement, a summary will be written by DCF forming an easily understandable report that will highlight key statistics and findings from each area of need as well as emphasize any regional trends. After the completion of the DCF Needs Assessment in the primary region, a preliminary report will be drafted highlighting the trends in service, strengths, and challenges associated with youth in out-of-home placements and families with children at risk of out of home placement. This report will also incorporate recommendations for action for each specific region along with introductory plans to be implemented. The report will be given to DCF leadership providing recommendations on necessary changes to the system and services.

IV. Conclusion

Once the statewide data collection and analysis is completed in the first year of the DCF Needs Assessment, this process will be repeated for the other two regions culminating in the entire state being completed in three years. The deliverables at the end of each phase will serve as interim updates to keep the internal and external workgroups appraised of progress made, decision-making processes and to provide overall accountability for the DCF Needs Assessment.

Preliminary reports such as this will be written for all three regions. Upon completing analysis of the third and final region, a comprehensive report will be drafted focusing on both regional and statewide system issues, recommendations for change, and subsequent tasks to mitigate these challenges. Reports, available by county, will be disseminated broadly on an annual basis, posted on the DCF website as well as shared with community based organizations, staff, and a broad array of stakeholders.