2018-2020 Statewide Prevention Plan Update – Action Plan

In March 2018, with assistance from Clarus Consulting, the New Jersey Task Force on Child Abuse and Neglect completed the 2018-2020 Statewide Prevention Plan. This plan was created as an update of the 2014-2017 Statewide Prevention Plan and includes a more detailed analysis of how the plan will be implemented. Five-hundred and forty (540) stakeholders, including parents, caregivers, community advocates, providers, and public and private partners were engaged in the planning process. The planning process included an analysis of quantitative and qualitative data acquired from DCF as well as surveys and interviews. DCF and the NJTFCAN Prevention Committee worked with Clarus Consulting to analyze the data and prepare a final report. The report was shared with stakeholders at the statewide meeting in October 2017.

Vision				
Families and communities will thrive with the knowledge, skills, resources, and support they need to keep infants, children and youth safe, healthy and nurtured.				
Strategic Priorities				
Outreach and Engagement	Evidence-Based / Evidence Informed Programs and Best Practice	Infrastructure and Resources	Communication	
Goals				
Conduct outreach and engagement to increase protective factors and decrease risk factors in an effort to reduce adverse childhood experiences for all expectant parents, infants, children, youth and families.	Promote a culture of continuous quality improvement, supported by a continuum of evaluation approaches that measure effectiveness, and take action to prevent specific types of abuse and neglect.	Develop creative and sustainable strategies to increase funding for prevention programs that strengthen families and communities.	Increase awareness of prevention messages and connect families with prevention supports and services	
Objectives				
 A1: Increase coordination across infant, child, youth, and family-serving systems and supports A2: Develop non-traditional partnerships to assist with primary prevention efforts 	 B1: Advocate for Evidence-Based Programs (EBPs) at each level of prevention (primary, secondary, tertiary) B2: If EBP cannot be used, encourage programs at a minimum to collect quality data and follow research based guidelines and standards to evaluate effectiveness B3: Promote workforce access to training, coaching and on-going support to better align services with Prevention Standards 	 C1: Advocate for expansion of Children's Trust Fund (CTF) resources C2: Explore funding opportunities at state and federal level C3: Encourage maximization of resources across agencies C4: Support improved administrative management of agencies 	 D1: Work with system partners to develop key primary prevention messages D2: Develop and implement diverse strategies for communication of prevention messages to families and partners 	

Outreach and Engagement			
GOAL			
Conduct outreach and engagement to increase protective factors and decrease risk factors in an effort to reduce adverse childhood experiences for all expectant parents, infants, children, youth and families. OBJECTIVES & PRELIMINARY ACTION STEPS			
 A1: Increase coordination across infant, child, youth, and family-serving systems and supports A1a: Identify system partners (e.g. Boards of Education, Schools, Higher Education, county welfare, hospitals, child care settings, mental health, legal community, etc.); Use child death review data to identify partnerships needed A1b: Promote data sharing among departments and partners; identify and build on collaborative data sharing efforts already underway A1c: Encourage agencies to collect quality data aligned to state systems of data A1d: Identify and disseminate information about "one-stop" models that reduce silos and connect parents to services A2a: Identify places that naturally attract families and help them better understand stress leading to child abuse as well as make them aware of available resources A2b: Identify and prioritize development of non-traditional partnerships e.g. Pool businesses (for pool safety); corner stores; clergy / faith-based organizations; Red Cross; private sector; libraries; performing arts / community centers; Dept. of Labor / One Stops 			
METRICS			
 Increased data sharing among department and partners Development of non-traditional partnerships Presentations to partners (non-traditional and within state government) using standardized PowerPoint presentation and materials 			

Evidence-Based /			
Evidence Informed Programs and Best Practice			
GOAL			
GOAL			
Promote a culture of continuous quality improvement, supported by a continuum of evaluation approaches that measure effectiveness, and take action to prevent specific types of abuse and neglect.			
OBJECTIVES & PRELIMINARY ACTION STEPS			
B1: Advocate for Evidence-Based Programs (EBPs) at each level of prevention (primary, secondary, tertiary)			
B1a: Adopt standard definitions of EBP			
• Coordinate with Commissioner's EBP Task Force			
B1b: Develop a repository of EBPs by inventorying prevention programs, including identification of level of evidence, geographic location, etc.			
 B1c: Promote the use of implementation science to ensure fidelity and high-quality programming 			
B1d: Support expanded availability of EBPs for expectant parents, infants, children, and youth			
B2: If Evidence-Based Programs cannot be used, encourage programs at a minimum to collect quality data and follow research based guidelines and standards to evaluate effectiveness			
B2a: Develop university partnerships to identify accurate measurement of data / evaluation guidelines			
B3: Promote workforce access to training, coaching and on-going support to better align services with Prevention Standards			
B3a: Widely disseminate Prevention Standards			
B3b: Promote training of Prevention Standards with agencies			
B3c: Investigate process for securing CLE credits for Prevention Training			
METRICS			
 Establish baseline of number EBP at each level of prevention Increase number of programs using EBP: if EBP cannot be used increase the number of programs that collect quality. 			
• Increase number of programs using EBP; if EBP cannot be used, increase the number of programs that collect quality data and follow research-based guidelines and standards to evaluate effectiveness			
 Increase number of people trained in Prevention Standards 			

Infrastructure and Resources
GOAL
Develop creative and sustainable strategies to increase funding for prevention programs that strengthen families and communities. OBJECTIVES & PRELIMINARY ACTION STEPS
 Advocate for expansion of Children's Trust Fund (CTF) resources C1a: Potential strategies include PSAs; research other states; market to tax preparers; online donation instead of mailing donation; license plates; soda & tobacco tax; direct outreach to private sector / large employers C1b: Clearly articulate the value of prevention to generate investment/funding
 2: Explore funding opportunities at state and federal level C2a: Support training for grant writing C2b: Research what national organizations are doing to support C2c: Help providers learn how to locate additional funding for their programs within their community C2d: Partner with agencies to identify funding for data systems and build capacity to implement EBP
 B: Encourage maximization of resources across agencies C3a: Understand what is working; collect more data / information across Departments C3b: Analyze evaluation data and make recommendations to help maximize resources across agencies
 Support improved administrative management of agencies C4a: Clearly articulate why improvement is needed C4b: Encourage agencies to strengthen their strategic planning efforts and, when possible, align their strategic planning with the Statewide Prevention Plan C4c: Encourage sharing of Best Practices among organizations C4d: Explore workforce development assistance through the Department of Labor
METRICS
Percentage increase in CTF
One new funding resource identified and pursued per year

Communication GOAL Increase awareness of prevention messages and connect families with prevention supports and services. **OBJECTIVES & PRELIMINARY** ACTION STEPS D1: Work with system partners to develop key primary prevention messages D1a: Identify system partners (*see A1a*) D1b: Develop key primary prevention messages for dissemination to families and partners Topics such as healthy development, relationship abuse, safe spaces, infant care, post-partum depression, • etc. • Utilize child death review data to target messages Use language that is simple, strengths-based, trauma-informed, welcoming, and non-stigmatizing • D2: Develop and implement diverse strategies for communication of prevention messages to families and partners D2a: Inventory available prevention resources and services and how they are currently publicized D2b: Disseminate prevention messages using diverse communication strategies Inventory social media / technology used by partners; once inventory conducted, develop strategies to • leverage efforts already underway to increase information provided to parents and professionals that intersect with families Identify professional groups and organizations involved with families; provide those groups with • information on supports and services available to families **Develop and disseminate White Papers** • • Develop an on-line resource guide Employ non tech-based strategies • Develop and implement a public awareness campaigns • Consider geography, culture, languages when developing presentation messages • METRICS Development and dissemination of primary prevention messages and information on resources and services Development and dissemination of Best Practices White Paper Presentations to partners and professional organizations using standardized PowerPoint presentation and •

materials