



New Jersey Task Force on Child Abuse and Neglect

PREVENTION COMMITTEE

Natasha Johnson, Chair
Niurca Louis, Vice Chair

November 2, 2017
10:00 A.M. – 12:30 P.M.
Capital Center Building
50 East State Street, 2nd Floor
Commissioner's Large Conference Room
Trenton, NJ 08625

Minutes

In Attendance:

Parnian Beeky
Andrea Breitwieser
Suzanne Conrad
Gerard Costa
Diane Dellanno
Gina Hernandez
Aldina Hovde
Natasha Johnson
Hannah Koru-Heilner
Niurca Louis
Cheryl Mojta
Patty Mojta
Ilene Palena
Charmaine Thomas
Wendi White

NJ Chapter, American Academy of Pediatrics
Department of Human Services
Prof/Voc. Educational Administrator
Montclair State University
Advocates for Children of NJ
PCANJ
NJ Chapter, American Academy of Pediatrics
DHS – Division of Family Development
ACNJ - Intern
Robins' Nest, Inc.
NJ Child Assault Prevention Program
Prevent Child Abuse – New Jersey
DCF – Family and Community Partnerships
DCF – Family and Community Partnerships & Div. on Women
Department of Corrections

By Telephone:

Maureen Braun-Scalera

Rutgers University School of Social Work

Invited Guest:

Kristie McCullough

Clarus Consulting Group

Staff

Daniel Yale
LaTasha Holmes

DCF – Executive Coordinator
DCF – Special Assistant to the Commissioner



Welcome and Introductions

A brief welcome was provided by Natasha Johnson and each attendee offered a brief introduction.

Review and approve May 4, 2017 Minutes

Minutes were approved with no edits.

Old Business

Update Regarding Curriculum Guide

There were no new updates to report. A report will be made at the next meeting.

New Business

Prevention Plan Status and Review

The committee was requested to review the Prevention Plan prior to the next meeting. Any questions or concerns should be directed to Daniel Yale for clarification. The committee discussed the necessity of having agreement on and prioritizing the objectives and final goals of the Prevention Plan. Through review of the plan, some of the goals may be removed due to the realities of issues with implementation.

Focusing on Strategic Priorities – Making Objectives Actionable and Measurable Exercise

The committee was informed that Kristie McCullough from Clarus Consulting Group, who has been the consultant hired to help develop the Prevention Plan, would further be assisting in the facilitation of making the objectives actionable and measurable. During this meeting, Kristie assisted the committee by focusing in on three of the goals: Evidence Based/Evidence Informed Programs and Best Practice, Early Outreach & Engagement, and Partnerships. The goal of the exercise was to review compiled feedback incorporated into the draft of the Prevention Plan in an effort to get a clear, concrete plan that is achievable, measurable, and effective.

Evidence Based/Evidence Informed Programs and Best Practice

The committee discussed how to broaden each level of prevention and define success. The committee will need to identify what programs and partnerships are available and whether they are working as intended. It was discussed that the focus should also be on data collection analysis as well. Firstly, systems partners in prevention will need to determine what will be measured and how to measure it. Data collected should align the state systems and provider community. The committee discussed how it can help influence



other departments to learn the collection of quality data and what kind of data would be beneficial to their needs as opposed to directing these efforts which is not feasible for this committee. The ground work and specifics must be worked out ahead of time because if it becomes too big, then the objectives will have to be scaled down in order to accomplish the tasks.

The committee discussed partnering with DCF Office of Training and Professional Development to offer training on evidence-based practice through its catalog for staff and providers. Web-based training may not be optimal for implementation due to the lack of proper coaching.

In addition, the committee will need to further discuss how it is defining and “selling” evidence-based practice and prevention strategy as well as how to engage more people in the process. Given DCF’s commitment to this work and some of its recent initiatives around evidence-based practice, the committee would like to work with and hear from DCF partners to ensure alignment with definition and prevention strategy.

The committee may be able to begin communication by promoting data sharing between departments. The committee discussed the benefit of inviting a representative from the Department of Health to a meeting to explain what other data collection programs they may already have in place. For example, use of the Health Information Exchange data collection may enable the prevention committee to help individuals and families better. The committee discussed the necessity of having a base line for the amount and type of evidence based programs. The committee will need to define the data, define the success, measure and define the outcome. The committee discussed that the outcome of implementation should not be just for children but for parents as well.

The committee discussed the timeframe and type of partnerships that would best fit the needs of the Prevention Plan goals. The committee will need to identify the departments, agencies and information that is already out there. Then, work to determine what departments are currently working towards and identifying evidence-based programs. It may be necessary to create a workgroup to assist in this process.

Early Outreach and Engagement

The committee discussed using apps and social media to connect families to resources and distribute prevention messages. Developing outreach engagement and strategies at birth or during pregnancy was also discussed. It will be important to determine the effect of stress on families and how prevention programs can be advertised to those who can benefit. The committee needs to make a decision on who the audience is for this objective



as well as the communication objective in the Prevention Plan.

In an effort to service families that wouldn't normally have contact with the system, committee members agreed that identifying trusted family partners such as nurses and pediatricians to be conduits of information and utilizing professional organizations to assist in getting critical information to these professionals who service these families. In most cases, the committee agreed that it isn't necessary to recreate the prevention messages, just get them out to the appropriate entities. The committee discussed communicating and messaging to other agencies. An example of an area of improvement is the Safe Haven program in which committee members felt that those who would benefit from using Safe Haven aren't aware of the program, even though it is advertised on the sides of busses. The committee would like to explore other ways to get the message out with an understanding that the prevention messages and communication of such will need to vary depending on the population to which they are being promoted.

Partnerships

The goal is to create coordination and communication in developing non-traditional resources. The committee will need to inventory examples of what partnerships already exist such as family success centers. The committee discussed identifying local partnerships and practices, identifying partners, holding partner meetings and using data to identify possible partnerships. The committee discussed consideration of partnering with the Administrative Office of the Courts. For example, presenting to judicial college, going to board meetings, etc. New judges and public defenders would benefit from education regarding prevention. Next steps could include developing a web-based training, a Prevention Committee PowerPoint, or development of a white paper on best practice. The committee also discussed the possibility of meeting with leaders of other agencies to make them aware of the prevention plan and its relation to their work.

Kristie captured the information discussed to incorporate it in the final draft of the Prevention Plan.

Meeting Adjourned.

Next Meeting will be held on January 4, 2018.