

# STATE OF NEW JERSEY DEPARTMENT OF CHILDREN AND FAMILIES

# **REQUEST FOR QUALIFICATIONS**

# FOR FORENSIC EVALUATION SERVICES BY PSYCHOLOGISTS

Questions Due to DCFASKRFP@dcf.state.nj.us by: January 3, 2012 Responses will be accepted on a rolling basis from January 17, 2013 through February 28, 2013.

Allison Blake, Ph.D., L.S.W. Commissioner

**December 11, 2012** 

# **TABLE OF CONTENTS**

# Section I - General Information

	A. Purpose	Page 3	
	B. Background	Page 3	
	C. Services to be Funded	Page 5	
	D. Funding Information	Page 9	
	E. Applicant Eligibility Requirements	Page 9	
	F. RFP Schedule	Page 10	
	G. Administration	Page 11	
	H. Post Award Requirements	Page 12	
Section II - Application Instructions			
	A. Proposal Requirements	Page 12	
	B. Supporting Documents	Page 13	
	C. Requests for Information and Clarification	Page 14	

# **FUNDING AGENCY**

State of New Jersey
Department of Children and Families
50 East State Street 5th floor
P.O. Box 717
Trenton, New Jersey 08625-0717

# **Section I – General Information**

# A. Purpose:

The Department of Children and Families (DCF) is requesting qualified evaluators that can meet the requirements of the Department of Children and Families as set forth in this Request for Qualifications (RFQ) to provide forensic evaluations and assessments as needed during child welfare investigations or to assist with permanency planning. The evaluators may be individual psychologists with their own practice or as part of a larger practice that submits a response to the RFQ. Each individual practitioner providing services must be approved whether part of a larger entity or not.

DCF MAKES NO REPRESENTATION REGARDING THE VOLUME OF ACTIVITY THAT IS TO BE EXPECTED WITH RESPECT TO THIS RFQ OR ANY RESULTING CONTRACT. A FORMAL CONTRACT WILL BE REQUIRED WHICH IS SUBJECT TO NEGOTIATION.

# B. Background:

DCF is charged with serving and safeguarding the most vulnerable children and families in the State and ensuring that service delivery is directed towards their safety, protection, permanency and well-being. The State of New Jersey's child welfare agency is comprised of the four major divisions:

- Child Protection and Permanency (CP&P) is New Jersey's child protection and child welfare agency within the DCF. CP&P is responsible for investigating allegations of child abuse and neglect and, if necessary, arranging for the child's protection and the family's treatment. Each year, CP&P contracts with many community based agencies throughout the state to provide services to children and families. Such services include case management, family support services (parenting skills, training, counseling, child care, etc.), therapeutic/supervised visitation, substance abuse treatment, domestic violence services, mental health services, foster care, and adoption and kinship legal guardianship.
- Children's System of Care (CSOC) serves children and adolescents with emotional and behavioral health care challenges and their families. CSOC is committed to providing these services based on the needs of the child and family in a family-centered, community-based environment. CSOC believes that the family or caregiver plays a central role in the health and well- being of children.

DCF involves families throughout the planning and treatment process in order to create a service system that values and promotes the advice and recommendations of the family, a system that is friendly to families and one which provides them the tools and support needed to create successful life experiences for their children with emotional and behavioral problems.

- Family and Community Partnerships (FCP) goal is to build a continuum of child abuse prevention and intervention programs that are culturally competent, strengths-based and family-centered, with a strong emphasis on primary child abuse prevention. Services and programs funded through the FCP promote culturally-sensitive, strengths-based, positive outcomes for children, youth and families in the following areas: child cognitive development; child social and emotional development; child physical health development; prevention of child injury, abuse and neglect; parenting behavior, attitudes and knowledge; parents' mental health or risk behaviors; family functioning/resources, including economic self-sufficiency; empowerment and increased safety for domestic violence victims and their children. FCP is committed to provide the resources and technical assistance needed to maintain a robust network of public/private partnerships and programs. Schools and community-based organizations are two prime locations for prevention and intervention services. These two portals are the broadest access to services for families.
- The New Jersey Division on Women (DOW) is a pioneering state agency that advances public discussion of issues critical to the women of New Jersey and provides leadership in the formulation of public policy in the development, coordination and evaluation of programs and services for women. DOW evaluates the effectiveness of program implementation and plans for the development of new programs and services. The Division is also charged with establishing a liaison with state departments and other public and private agencies involved with laws, regulations and program development affecting women in joint efforts to expand opportunities for women. In this capacity, DOW collaborates with other state departments to understand and address the changing needs and concerns of women.

Current priorities of DCF focus on reducing caseloads, developing a trained workforce, managing outcomes by data, recruiting and retaining child welfare workers, and recruiting more safe and loving foster homes for our most vulnerable children.

Individuals and agencies contracting with the DCF must adhere to the core values and relevant principles of DCF which are:

#### **DCF Core Values**

- Safety: Children are, first and foremost, protected from abuse and neglect.
- Permanency: Children do best when they have strong families, preferably their own, and when that is not possible, a stable relative, foster or adoptive family.
   We must strive to ensure that children do not leave our supervision without a permanent and stable family living situation.

- Well-Being: We will offer relevant services to children and families to meet their identified needs and promote children's development, education, physical and mental health.
- Most families have the capability to change with the support of individualized service responses.
- Government cannot do the job alone; real partnerships with people and agencies involved in a child's life – for example, families, pediatricians, teachers, child care providers - are essential to ensure child safety, permanency and well-being, and to build strong families.

# **DCF Case Practice Principles**

- In making determinations about plans and services, we consider the child's safety and health paramount.
- We must provide relevant services with respect for and understanding of children's needs and children's and families' culture.
- No child or family will be denied a needed service or placement because of race, ethnicity, sexual orientation, physical or emotional handicap, religion, or special language needs.
- Where appropriate, families will be provided with the services they need in order to keep their children safe and at home in order to avoid the trauma of removal.
- Understanding the disproportionate representation of children and families of color, we will utilize structured decision-making tools to support sound judgments about child safety, permanency and wellbeing, and as a strategy for counteracting racial and ethnic bias.

#### C. Services to be Funded:

DCF is seeking to approve one or more vendors to provide forensic evaluation and assessment services throughout the State of New Jersey whose qualifications are overall conforming to this RFQ and are most advantageous to the State, price and other factors considered. DCF MAKES NO REPRESENTATION REGARDING THE VOLUME OF ACTIVITY THAT IS TO BE EXPECTED WITH RESPECT TO THIS RFQ OR ANY RESULTING CONTRACT.

Applicants whose proposals are approved will be awarded a DCF contract for services with a contract term date determined by DCF. Bidders shall provide information that demonstrates their ability to meet the specified requirements listed in this RFP.

# 1. Duties and Obligations – Using Agency

DCF shall provide the contractor with a clear purpose for the evaluation as well as specific questions to be answered. DCF shall also provide the contractor with appropriate information and background documents and the required completion date.

# 2. Duties and Obligations – Contractor

The contractor shall provide forensic evaluations and assessments upon request by DCF.

# Forensic Evaluation

For the purpose of this RFQ a forensic evaluation in child welfare proceedings and child protective service matters is an evaluation necessary to determine an issue before the court, to assist the court and/or CP&P in case planning, or to resolve a case. A forensic evaluation may be ordered by the court, or it may be requested by CP&P, or by another party to a proceeding. Although forensic evaluations may contain treatment recommendations, the primary function of the forensic evaluation is to inform the parties and to assist the court in rendering decisions in child welfare cases.

The primary function of an evaluation is to provide a report that contains relevant, professionally sound observations, results and opinions in matters where a child's health and welfare may have been harmed or placed at risk of harm. The specific purposes of the evaluation generally will be determined by the referral questions and/or concerns provided to the evaluator by the referring party or parties. When the child already has been found by the court to be at risk of harm, the evaluation of the parent(s) generally identifies interventions intended to reduce future risk to the child, and often focuses on rehabilitation recommendations designed to protect the child and help the family. An additional purpose of such an evaluation may be to make recommendations for interventions that promote the psychological and physical well-being of the child, and, when appropriate, facilitate the safe reunification of the child with the parent. Consistent with State law, evaluators appreciate the value of expediting family reunification, when possible and safe, while they also understand the value of other permanent plans when reunification is not possible.

This RFQ does not cover evaluations or assessments obtained primarily for mental health treatment purposes, substance abuse, anger management, psycho-sexual evaluation, or domestic violence, although any or all of these issues may be addressed in a forensic evaluation.

For further guidance and definition of forensic evaluations, please see the attached Exhibit B, DCF Guidelines for Expert Evaluations in Child Abuse Neglect Proceedings or find it on DCF's website at <a href="http://www.state.nj.us/dcf/providers/notices/">http://www.state.nj.us/dcf/providers/notices/</a>.

# 3. Quality Assurance

The contractor shall meet the qualifications outlined in the DCF Guidelines for Expert Evaluations in Child Abuse/Neglect Proceedings as well as the requirements described below.

The requirements outlined by the State Board of Psychological Examiners regarding custody/parenting time are reflected in the DCF Guidelines. DCF recognizes that psychologists take care to acquire sufficient knowledge, skill, experience, training, and education prior to completing a child custody evaluation as well as other forensic work that DCF might engage providers in. In addition, an evolving and up-to-date understanding of child and family development, child and family psychopathology, the impact of relationship dissolution on children, and the specialized child custody literature is critical to sustaining competent practice in this area.<sup>1</sup>

Evaluators shall be required to maintain written evidence of attendance no less than biannually of advanced forensic interview training, and must maintain written evidence of participation in classes, workshops, seminars, supervision, instruction, presentation, and/or published professional works focusing on forensic mental health assessment, family law, child custody evaluations, etc.<sup>2</sup>

DCF requires psychologists and other mental health professionals to complete a minimum of 10 hours<sup>3</sup> of continuing education each year covering the topics specified above. It is required that the course work selected by the evaluator will embed principles and/or practices around cultural competence in the curriculum or that evaluators would identify courses that specifically address cultural competence in the area of forensic evaluation and child welfare.

In addition, it is required that psychological evaluators are able to demonstrate:

- Documentation of satisfactory completion of competency-based child abuse forensic interview training that includes child development; and/or
- Documentation of 40 hours of national or state recognized forensic interview training that includes child development.<sup>4</sup>; and/or
- Supervision under a licensed psychologist in accordance with the Board of Psychological Examiners in one or more of the following areas: domestic violence, child abuse and neglect, trauma, or sexual abuse.

DCF may require contracted providers to participate in a DCF orientation at any point in time during the life of the contract.

# 4. Confidentiality Compliance

The contractor shall, at all times, in performance of this contract, ensure that it maintains State supplied documents in a confidential manner.

<sup>&</sup>lt;sup>1</sup> American Psychological Association. *Guidelines for Child Custody Evaluations in Family Law Proceedings* American Psychologist. 2010. 65(9): 863-867.

<sup>&</sup>lt;sup>2</sup> Vieth, V. *The Forensic Interviewer at Trial*.

<sup>&</sup>lt;sup>3</sup> Based on minimum requirements observed in the APA State Provincial Mandatory Continuing Education in Psychology Requirements Survey (2006)

<sup>&</sup>lt;sup>4</sup> National Children's Alliance

Such compliance shall include, but not be limited to, the erasure and deletion of all personal, confidential information that may be contained on all personal computers and their drives prior to disposal, or any other disposition that may be required, of such informational technology equipment in accordance with the requirements set forth by the US Department of Defense (DoD) 5220.22-M Standard.

Such compliance shall further include, but not be limited to, ensuring that the release of forensic evaluations and client records is restricted to those situations identified in DCF Policy P8.01 – 2007 (revised January 1, 2012) and N.J.S.A. 30:4-24.3.

All data supplied by DCF to the contractor are confidential. The contractor is required to use reasonable care to protect the confidentiality of such data. Any use, sale or offering of this data in any form by the contractor, or any individual or entity in the contractor's charge or employ, will be considered a violation of this contract and may result in contract termination and the contractor's suspension or debarment from DCF contracting. In addition, such conduct may be reported to the State Attorney General for possible criminal prosecution.

HIPAA's (Health Insurance Portability and Accountability Act) privacy regulations require protection of individually identifiable health information. The regulations define "Protected Health Information" as information that relates to the:

- past, present, or future physical or mental health or condition of an individual
- provision of health care to an individual
- past, present, or future payment for the provision of health care to an individual

Protection applies to information collected from the individual or received or created by a health care provider, health plan, health care clearinghouse, or employer, and is maintained or transmitted in any form or medium. All providers shall be required to adhere to HIPPA and execute a HIPPA Privacy Agreement which is located at: <a href="http://www.state.nj.us/dcf/providers/contracting/forms/index.html">http://www.state.nj.us/dcf/providers/contracting/forms/index.html</a>

# 5. Fiscal/Billing Requirements

DCF will contract with approved vendors on a fee for service basis. DCF's Child Protection and Permanency (CP&P) has 47 offices throughout New Jersey, with at least one in every county. These offices are known as "Local Offices" and house CP&P caseworkers, who work with children and families in their own homes and with children in out of home placements. Local Offices will initiate referrals via the CP&P form K-100. The vendor will submit the K-100 to the referring office for payment, upon completion of the contracted service.

Each provider that meets the qualifications and requirements set forth in the RFQ shall receive the published rate for providers of this service as set forth in Exhibit A. If the

published rate shall change the amount received by the provider shall change. Upon request by DCF, and in order to provide the State with the ability to judge the applicant's financial capacity and capabilities to undertake and successfully complete the contract, applicants shall have available two years of certified financial statements, including a balance sheet, income statement and statement of cash flow, and all applicable notes for the most recent calendar year or the applicant's most recent fiscal year. If certified financial statements are not available, the applicant shall provide either a reviewed or compiled statement from an independent accountant setting forth the same information required for the certified financial statements, together with a certification from the Chief Executive Officer and the Chief Financial Officer, that the financial statements and other information included in the documents fairly present in all material respects, the financial condition, results of operations and cash flows of the applicant as of, and for the time periods presented in the statements. Note: When a provider functions as part of a professional group, conducting an evaluation as a "team," DCF will reimburse the group, as a single entity, the hourly rate for the service provided.

# **D. Funding Information:**

For the purpose of this initiative, the Department will make available funding for forensic evaluation and assessment services as needed and required and only if funding is available. There is no guarantee that the services of the contracted evaluator will be accessed. Continuation funding is contingent upon the availability of funds in future fiscal years. Continuation of services is not guaranteed.

DCF intends to fund services offered by providers that meet the qualifications and agree to all the terms and conditions provided by the DCF contracting unit. Upon application the contractor shall be contacted by the contracting group and all contract awards shall be subject to contract negotiation.

# **E. Applicant Eligibility Requirements:**

All applicants must:

- 1. Hold current State licenses.
- 2. Have the capability to uphold all administrative and operating standards as outlined in this document.
- 3. Comply with the requirements of N.J.S.A. 10:5-31 et seq. and N.J.A.C. 17:27, the State Affirmative Action policy.
- 4. Have a Data Universal Numbering System (DUNS) number. To acquire a DUNS number, contact the dedicated toll-free DUNS number request line at 1-800-705-5711 or inquire on-line at: http://www.dnb.com.

# F. RFQ Schedule:

December 11, 2012	Notice of Availability of Funds/RFQ
	publication
January 3, 2012	Period for Email Questions sent to
	DCFASKRFP@dcf.state.nj.us
February 28, 2012	Deadline for Receipt of Proposals by
-	12:00PM

All Requests for Qualifications proposals must be received by 12:00 PM on or before February 28, 2012. Proposals received after 12:00 PM on February 28, 2012 will **not** be considered. Applicants should submit **one (1) signed original** and **one CD ROM**, including a signed cover letter of transmittal as indicated below.

Proposals must be delivered either:

# 1) In person to:

Catherine Schafer, Director of Grants Management, Auditing and Records Department of Children and Families 101 South Broad Street, 7<sup>th</sup> Floor Trenton, New Jersey 08625

Please allow time for the elevator and access through the security guard. Applicants submitting proposals in person or by commercial carrier should submit **one (1) signed original** and **one CD ROM** with all documents including a signed cover letter of transmittal.

# 2) Commercial Carrier (hand delivery, federal express or UPS) to:

Catherine Schafer, Director of Grants Management, Auditing and Records Department of Children and Families 101 South Broad Street, 7<sup>th</sup> Floor Trenton, New Jersey 08625

Applicants submitting proposals in person or by commercial carrier shall submit **one (1) signed original** and **one CD ROM** with all documents including a signed cover letter of transmittal.

# 3) Online- <a href="https://ftpw.dhs.state.nj.us">Https://ftpw.dhs.state.nj.us</a>

DCF offers the alternative for our bidders to submit proposals electronically to the web address above. Online training is available at the bidder's conference and on our website at: www.nj.gov/dcf/providers/notices/

We recommend that you do not wait until the date of delivery in case there are technical difficulties during your submission. Only a registered Authorized Organization Representative (AOR) or the designated alternate is eligible to send in a submission. Registration forms are available on our website. Registered AOR forms must be received 5 business days prior to the date the bid is due. You need to register only if you are submitting a proposal online.

#### **G.** Administration:

# 1. Screening for Eligibility, Conformity and Completeness

DCF will screen proposals for eligibility and conformity with the specifications set forth in this RFQ. A preliminary review will be conducted to determine whether the application is eligible for evaluation or immediate rejection.

The following criteria will be considered, where applicable, as part of the preliminary screening process:

- a. The application was received prior to the stated due date;
- b. The application is signed and authorized by the applicant's Chief Executive Officer or equivalent;
- c. The application is complete in its entirety, including all required attachments and appendices; and
- d. The application conforms to the specifications set forth in the RFQ.

Upon completion of the initial screening, proposals meeting the requirements of the RFQ will be distributed to the Proposal Evaluation Committee for its review and recommendations. Failure to meet the criteria outlined above, or the submission of incomplete or non-responsive applications constitutes grounds for immediate rejection of the proposal.

# 2. Proposal Review Process

The Department also reserves the right to reject any and all proposals when circumstances indicate that it is in its best interest to do so.

The Department's best interests in this context include, but are not limited to: State loss of funding for the contract; the inability of the applicant to provide adequate services; the applicant's lack of good standing with the Department, and any indication, including solely an indication of misrepresentation of information and/or non-compliance with any State of New Jersey contracts, policies and procedures, or State and/or Federal laws and regulations.

All applicants will be notified of the Departments intent to contract with the provider.

# H. Post Award Requirements:

Selected applicants will be required to comply with the terms and conditions of the Department of Children and Families' contracting rules and regulations as set forth in the <u>Standard Language Document</u>, the <u>Contract Reimbursement Manual and the Contract Policy and Information Manual</u>. Applicants may review these items via the Internet at <a href="https://www.nj.gov/dcf/providers/contracting/manuals">www.nj.gov/dcf/providers/contracting/manuals</a>

Selected applicants will also be required to comply with all applicable State and Federal laws and statutes, assurances, certifications and regulations regarding funding.

Upon receipt of the award announcement, and where appropriate, selected applicants will be minimally required to submit one (1) copy of the following documents, as applicable:

- Proof of Insurance naming the Department of Children and Families as an additional insured
- Board Resolution Validation
- DCF Standard Language Document and Signature Pages
- Current agency by-laws
- Copy of lease or mortgage (if applicable)
- Certificate of Incorporation
- Conflict of Interest policy
- Affirmative Action policy and certificate
- A copy of all applicable professional licenses
- Current single audit report
- Current IRS Form 990.
- Copy of the agency's annual report to the Secretary of State
- Public Law 2005, Chapter 51, Contractor Certification and Disclosure of Political Contributions (not required for non-profit entities)]

The actual award of funds is contingent upon a successful Contract negotiation. If, during the negotiations, it is found that the selected Applicant is incapable of providing the services or has misrepresented any material fact or its ability to manage the program, the notice of intent to award may be rescinded.

# Section II - Application Instructions

# A. Proposal Requirements:

All applications shall be created in accordance with the following criteria:

The narrative portion of the proposal should be double-spaced with margins of 1 inch on the top and bottom and 1½ inches on the left and right. The font shall be no smaller than 12 points. There is a ten (10) page limitation for the narrative portion of the grant application. The narrative must be organized appropriately and address the key

concepts outlined in the RFQ. Items included in the transmittal cover letter, budget pages, and attachments do not count towards the narrative page limit.

Proposals may be bound or fastened by heavy-duty binder clip. Do not submit proposals in loose-leaf binders, plastic sleeves or folders.

Each proposal must contain the following items organized by heading:

# 1) Applicant Experience

Describe the agency/applicant's philosophy and experience in providing forensic evaluations, the capacity of individuals performing evaluations, and a record of accomplishments in working in collaboration with the Department of Children and Families and/or the Department of Human Services. Provide an indication of the agency/applicant's demonstrated capability to provide services that are consistent with the Department's Guidelines for Expert Evaluations in Child Abuse/Neglect Proceedings.

# 2) Approach

- a) Describe which types of forensic evaluations and/or assessments you can provide.
- b) Provide information on the accessibility of services, including the hours and days that services will be available, and the geographic location(s) where evaluations/assessments will be provided.
- c) Describe your ability to accommodate clients who do not speak English (i.e., any capacity in additional languages).
- d) Provide a description of your procedures to ensure the confidentiality of records.
- e) Describe capacity to meet reasonable time frames established by DCF.
- f) Indicate the number, qualifications and skills of all staff and consultants who will perform the proposed service activities, if applicable.
- Attach, in the Appendices section of the application, an organizational chart for the proposed program operation; job descriptions that include all educational and experiential requirements; salary ranges; and resumes of any existing staff who will perform the proposed services.
- g) Describe the management and supervision methods that will be utilized, if applicable.
- h) Provide information on availability to begin services within the next 30 to 60 days.

# **B. Supporting Documents:**

Applicants must submit an original and one copy of a complete application signed and dated by the Chief Executive Officer or equivalent.

# All applications/proposals submitted in response to this RFQ shall be organized in the following manner:

### **Part I: Qualifications**

- 1. Proposal Cover Sheet\*
- 2. Table of Contents
- 3. Qualifications Narrative
  - (a) Applicant Experience
  - (b) Approach

# Part II: Appendices

- 1. Job descriptions that include all educational and experiential requirements; salary ranges; and resumes. Make sure to list the training required under this RFP.
- 2. Organizational chart for the proposed program operation
- Copy of agency Code of Ethics and/or Conflict of Interest policy, if applicant is a corporation
- 4. Affiliation Agreements, if any
- 5. Statement of Assurances\*
- 6. Certification regarding Debarment\*
- 7. All required Certification and Disclosure Forms in accordance with PL 2005, c.51 ("Chapter 51") and Executive Order 117 (2008), if appropriate\*\*

  Note: non-profit entities are exempt from Chapter 51 disclosure requirements).
- 8. Copy of IRS Determination Letter regarding applicant's charitable contribution or non-profit status (if appropriate) if a non- profit agency
- 9. Copies of all applicable licenses/organization's licensure status/professional licenses (if appropriate)
- 10. All applicants must have a Data Universal Numbering System (DUNS) number. To acquire a DUNS number, contact the dedicated toll-free DUNS number request line at 1-866-705-5711 or inquire on-line at <a href="http://www.dnb.com">http://www.dnb.com</a>
- 11. Include one (1) electronic copy of the proposal on CD-ROM if delivering a paper copy.
  - \* Standard DCF forms are available at www.nj.gov/dcf.
  - \*\* Chapter 51 forms are available on the Department of the Treasury website at http://www.nj.gov/treasury/purchase. Search under Forms (Note: non-profit entities are exempt from Chapter 51 disclosure requirements).

# C. Requests for Information and Clarification

DCF will provide eligible applicants additional and/or clarifying information about this initiative and application procedures through a time-limited electronic Question and Answer Period. Answers will be posted on the website at: http://www.state.nj.us/dcf/providers/notices/

Questions must be submitted in writing via email to: <a href="mailto:DCFASKRFP@dcf.state.nj.us">DCFASKRFP@dcf.state.nj.us</a>.

All inquiries submitted to this email address must identify, in the Subject heading, the specific RFP for which the question/clarification is being sought.

Written questions must be directly tied to the RFP. Questions should be asked in consecutive order, from beginning to end, following the organization of the RFP. Each question should begin by referencing the RFP page number and section number to which it relates.

All other types of inquiries will not be accepted. **Applicants may not contact the Department directly, in person, or by telephone, concerning this RFP.** Inquiries should only be addressed for technical support through <a href="mailto:DCFASKRFP@dcf.state.nj.us">DCFASKRFP@dcf.state.nj.us</a>. Inquiries will not be accepted after the closing date of the Question and Answer Period. Written inquiries will be answered and posted on the DCF website as a written addendum to the RFP.

# **Exhibit A: Relevant Sections from Current Policy and Rates**

# 2103 Psychological/Therapeutic Services 8-9-2004

# 2103.2 Psychological/Therapeutic Services Activities 5-10-2004

# ACTIVITY I: Assessment and Evaluation

Assessment and evaluation activities are intended to determine the nature of a person's or family's problems, the extent and kind of services needed, and to prescribe a course of service delivery or treatment.

# ACTIVITY II: Evaluation for Court

Evaluations for court are in-depth evaluations, undertaken to address one or more legal issues before a court (e.g., termination of parental rights, child custody, findings of abuse or neglect). The role of the evaluator is to provide the court with an objective recommendation. The Office of the Attorney General represents CP&P in the legal matter. DAG approval is required to obtain an evaluation for court. The DAG assigned to the case may request an evaluation in anticipation of - or to determine whether to pursue relief from - court. In addition to completing the evaluation for court, CP&P may call on the provider to testify at court the evaluation observations. as \_ recommendations, diagnosis, prognosis etc. (See Testimony at Court/Expert Witness, Activity V.)

Note: If a court orders an evaluation for treatment purposes (rather than for the purpose of determining a matter in litigation), then the standard "assessment and evaluation" rate would apply (Activity I) rather than the "evaluation for court" rate (Activity II).

# ACTIVITY V: <u>Testimony at Court/Expert Witness</u>

See <u>II C 1500</u>, Professional Witness Fees and Services.

# 2103.3 CP&P Rates for Psychological/Therapeutic Services

#### 1-1-2008

CP&P rates paid for psychological/therapeutic services are broken down as follows:

EVALUATIONS (Activity I) -- paid per person (e.g., child, parent, foster parent) per provider as follows:

- Psychologist - paid \$89.25 per hour (60 minutes), up to 6 hours, to a maximum of \$535.50.

IN-DEPTH EVALUATIONS FOR COURT, TO DETERMINE A LEGAL ISSUE (Activity II) -- paid per evaluation (or for a set of evaluations conducted for one, specified purpose), paid per provider, as follows:

- Psychologist - paid \$106.05 per hour (60 minutes), up to 16 hours, to a maximum of \$1,696.80.

Note: When a provider functions as part of a professional group, conducting an evaluation as a "team," CP&P will reimburse the group, as a single entity, the hourly rate for the service provided (i.e., \$89.25 paid to the group per hour for psychological evaluative services provided by their team, NOT \$89.25 paid per hour to each member of the group individually).

Reimbursable hours include charges for one-on-one interviewing/testing of clients, report writing, testimony preparation, travel time and travel-associated costs, supervised visits, record reviews, consultations with other professionals and family members, etc. Cases that require evaluations which cannot be obtained within the above limitations will require <u>Assistant Director</u>, <u>Program/Adoption Operations</u> approval. If the provider testifies at court based on the evaluation, he is entitled to compensation for his testimony at the Activity V rate as explained below.

The reimbursement guidelines for evaluations for courtrelated purposes, above, apply to evaluations associated with child protective services, termination of parental rights and guardianship litigation brought by CP&P, conducted on behalf of CP&P. The guidelines also apply when the <u>court orders CP&P to pay</u> for evaluations conducted on behalf of:

- a parent (represented by a defense attorney); and/or
- the interests of a child (represented by a Law Guardian).

The Deputy Attorney General is responsible for sharing expert witness reports obtained by CP&P with all parties to the litigation. See II C 1502.1.

Consult the DAG if staff question who should be responsible to pay the fee. The DAG requests that the court consider the parent's ability to pay, and whether there is private health insurance coverage for the child/parent/family, <u>before</u> pursuing reimbursement through CP&P.

TESTIMONY AT COURT/EXPERT WITNESS (Activity V) -- paid per hour of service provided. May include:

- up to one hour travel time;
- time used to prepare for testimony (consultation with CP&P or DAG, etc.); and
- giving live testimony at court.

See <u>II C 1503</u>, Payment, <u>II C 1504</u>, Calculation of Payment, <u>II C 1505</u>, Billing, and <u>II C 1506</u>, Procedures.

# 2103.4 Psychological/Therapeutic Policy References 8-30-99

For related policy, see:

Health Services Manual, <u>II K 1001</u>, "Mental Health Therapeutic/Evaluative Services." (See <u>II K 1001.5</u>, for rates paid for "Appointments Missed Without Cancellation.")

- Foster Care Services, <u>II D 905</u>, "Psychological Care," <u>1006</u>, "Psychiatric and Psychological Services," and <u>1007</u>, "Procedures Related to Psychiatric and Psychological Services."
- Residential Services, <u>II E 203.1</u>, "Mental Health Services.
- Protective Services Manual, <u>II C 1500</u>, "Professional Witness Fees."
- Protective Services Manual, <u>II C 2402</u>, "PRS Litigation Manual."
- Special Approval Request, CP&P Form 16-76 (form and instructions).

# **Exhibit B**

# **New Jersey Department of Children and Families**

**Guidelines for Expert Evaluations in Child Abuse/Neglect Proceedings (Mental Health)** 

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Commissioner Allison Blake, PhD LSW

# **Table of Contents**

I.	Introduction
II.	Definition/Application
III.	General Principles and Guidelines
	The Role and Function of Forensic Evaluation in Child Welfare Matters
	2. General Competencies of Expert Evaluators
	3. Procedural Guidelines: Conducting an Evaluation
IV.	Best Practices for Expert Forensic Evaluations
	1. During an Investigation
	2. During Permanency Planning/Hearings
	During Litigation of Guardianship Complaints

# **I. Introduction**

This is the Department's first comprehensive effort to address the use of expert evaluations in child welfare and child protective services proceedings. These guidelines lay out best practices for forensic evaluations and assessments that may be needed during child welfare investigations, to assist with permanency planning, or during litigation of guardianship complaints.

Child abuse and neglect cases are often complex. Expert consultants are frequently used to assist caseworkers, attorneys, law guardians, judges, and parents in making determinations, case planning, and decision making. The experts' services are often in the form of forensic evaluations of the mental health status and/or capabilities of the parents of dependent children. In addition, an evaluator may assess a child's behavioral functioning or developmental status as well. CP&P and the courts often rely on these evaluations and recommendations for effective case planning and to guide the court's decision making process.

In developing the guidelines that follow, the Department reviewed and analyzed professional guidelines and the work of other states, and convened an interdisciplinary group of experts to form DCF's Advisory Group on Child Abuse and Neglect Mental Health Evaluation and Treatment.

The role of the Advisory Group was to assist in formulating a framework that is flexible enough to accommodate differences in disciplines while providing clear practice guidelines that address the questions to be asked, the information required, the tools necessary to inform the evaluation, the credentials and qualifications of the evaluator, and the essential components of the evaluation itself.

The guidelines that follow are intended to improve the quality of expert forensic evaluations provided for CP&P and the courts, as well as the ability of stakeholders involved in child welfare proceedings and child protective service matters to make better use of them. It is clear that representatives of different disciplines with differing philosophical orientations will have varying approaches to the task of providing a forensic assessment. Each unique discipline will organize their work in a way that reflects their individual expertise. These guidelines are not meant to supplant the professional judgment of evaluators regarding their response to the unique features of each case.

The first sections of this document are general guidelines, followed by more specific recommended practices.

# II. Definition/Application

For the purpose of these guidelines, a forensic evaluation in child welfare proceedings and child protective service matters is an evaluation necessary to assist the court and/or CP&P in case

planning, or to resolve a case. A forensic evaluation may be requested by CP&P, by another party to a proceeding, or the court. Any evaluation that may reasonably be expected to be submitted to the court is termed forensic. Although forensic evaluations may contain treatment recommendations, the primary function of the forensic evaluation is to inform the parties and to assist the court in rendering decisions in child welfare cases.

These guidelines do not cover evaluations or assessments obtained primarily for mental health treatment purposes, substance abuse, anger management, psycho-sexual evaluation, or domestic violence, although any or all of these issues may be addressed in a forensic evaluation.

These guidelines recognize that, in child welfare cases, the emphasis is on the safety, permanency, and well-being of the child.

# III. General Principles and Guidelines<sup>5</sup>

#### 1. The Role and Function of Forensic Evaluations in Child Welfare Matters

The primary function of an evaluation is to provide a report that contains relevant, professionally sound observations, results and opinions in matters where a child's health and welfare may have been harmed or placed at risk of harm. To ensure the reliability of the evaluator's conclusions all opinions that are rendered must be given within a reasonable degree of medical/psychological/clinical certainty. The specific purposes of the evaluation generally will be determined by the referral questions and/or concerns provided to the evaluator by the referring party or parties. When the child already has been found by the court to be at risk of harm, the evaluation of the parent(s) generally identifies interventions intended to reduce future risk to the child, and often focuses on rehabilitation recommendations designed to protect the child and help the family. An additional purpose of such an evaluation may be to make recommendations for interventions that promote the psychological and physical well-being of the child, and, when appropriate, facilitate the safe reunification of the child with the parent. Consistent with State law, evaluators appreciate the value of expediting family reunification, when possible and safe, while they also understand the value of other permanent plans when reunification is not possible.

The evaluation addresses the particular psychological, behavioral, and developmental needs of the child and/or parent(s). Relevant issues may include, but are not limited to, abuse or neglect of the child, safety, parental capabilities, or reunification or other permanency plans. In considering psychological factors affecting the health and welfare of the child, evaluators may focus on caregiver capacities in the context of the psychological and developmental needs of the child. This may involve an assessment of:

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<sup>&</sup>lt;sup>5</sup> Washington State Supreme Court Commission on Children in Foster Care. "Guidelines for Expert Evaluations in Child Welfare Proceedings." Washington, 2007. Available online at, <a href="http://www.courts.wa.gov/committee/pdf/Guidelines%20for%20Expert%20Evaluations%20in%20Child%20Welfare%20Proceedings%20(2007).pdf">http://www.courts.wa.gov/committee/pdf/Guidelines%20for%20Expert%20Evaluations%20in%20Child%20Welfare%20Proceedings%20(2007).pdf</a>

- The adult's capacities for parenting, including those attributes, skills, strengths and abilities most relevant to abuse and/or neglect concerns;
- The psychological functioning, behavioral, and developmental needs of the child, particularly with regard to vulnerabilities and special needs of the child, as well as the quality of the child's attachment to the parent(s) and the possible developmental and emotional effects of separation from the parent(s), siblings, extended family members, and other caregivers;
- The current and potential functional abilities of the parent(s) and, when necessary for resolution of the case, other relatives, to meet the needs of the child; and/or
- The need for and likelihood of success of clinical or other interventions for identified problems, which may include recommendations regarding treatment modalities and objectives, frequency of services, specialized interventions, parent education, and the child's placement.

### 2. General Competencies of Expert Evaluators

**Evaluators should gain and maintain specialized competence.** Expert evaluators in child protection matters are aware that special competencies and knowledge are necessary for the undertaking of such evaluations. Competence in performing expert evaluations of children, adults and families is necessary but not sufficient. Education, training, experience and/or supervision in the areas of forensic practice, child and family development, child and adult psychopathology, the impact of separation on the child, the nature and consequences of different types of child abuse and neglect, and the significance of human differences may help to prepare evaluators to participate competently in expert evaluations in child protection matters.

#### **Evaluators:**

• Use current knowledge of scholarly and professional developments, consistent with generally accepted clinical and scientific practice, in selecting evaluation methods and procedures<sup>6</sup> and are aware of evidence-based practices.

- Strive to become familiar with applicable legal and regulatory standards and procedures, including local State and Federal laws governing child protection issues. These may include laws and regulations addressing child abuse, neglect, and termination of parental rights.
- Describe the scientific basis for their judgments or recommendations, and state
  when their judgments or recommendations may expand on, or not be fully
  supported by, currently accepted clinical and scientific practice.
- Are aware of, and develop their knowledge and special competencies for, evaluation of specific populations including, but not limited to, issues related to literacy, the needs of persons who do not speak English, sensory impairment, psychological disorders, and developmental impairments.

<sup>6</sup> Note: Examples of standard setting organizations include American Psychological Association, the National Association of Family and Conciliation Courts, The American Academy of Child and Adolescent Psychiatry and others.

- Should be fluent in the child's/parent's native language, when possible (have experience using a court appointed interpreter, if language presents a difficulty).
- Have appropriate qualifications to conduct an evaluation and/or to testify at court, including language, cultural competency, and other qualifications specified in CP&P contracts.
- Should be competent in the cultural norms of the child/parent being evaluated.
- Utilize language and culturally correct testing.
- Have expertise in working with relevant clinical populations, including:
  - o Children;
  - o Sex offenders:
  - o Domestic violence victims and batterers;
  - o Persons with developmental disabilities; and,
  - o Persons with psychiatric/neurological/neuropsychiatric diagnosis.
- Have expertise with the instruments employed, including psychological and intellectual tests that will need to be interpreted by a licensed psychologist, who is familiar with the norms and the uses of that test with the relevant population.
- Are experts in the use of appropriate interview techniques.
- Must not serve as an expert evaluator if they are the treating professional.

Evaluators must be aware of personal and societal biases and engage in nondiscriminatory practice. Evaluators engaging in expert evaluations in child protection matters consider how biases regarding age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, culture, and socioeconomic status may interfere with an objective evaluation and recommendations. Evaluators should be aware of the potential for defensiveness on the part of participants, given the circumstances, and must take this into account when conducting the evaluation and upon making recommendations. Evaluators recognize and strive to overcome any such biases. If unable to overcome his or her own biases, the evaluator will either withdraw from the evaluation or seek assistance in completing the evaluation. When interpreting evaluation results, evaluators must be aware that there are diverse cultural and community methods of child rearing, and consider these in the context of the existing local State and Federal laws. Also, evaluators should use, whenever available, tests validated with populations similar to those being evaluated.

**Evaluators avoid multiple relationships to maintain objectivity.** In conducting expert evaluations in child protective matters, evaluators avoid multiple role relationships. Evaluators generally do not conduct forensic evaluations in child protection matters in which they have provided clinical services for the child or the immediate family, or have had other involvement that may compromise their objectivity. Providing clinical services to the child or other participants following an expert evaluation is discouraged. A treating professional can be called to testify, but should NOT recommend a permanency plan.

# 3. Procedural Guidelines: Conducting an Evaluation

Evaluators and referring parties understand that forensic evaluations in child welfare and child protection matters may present a wide variety of legal and/or ethical considerations. Evaluators

and all parties appreciate the need for timeliness in child protection matters (e.g., response to evaluation referral, scheduling appointments, completion of reports).

The purpose of the evaluation should be clear upon referral and should outline the specific questions to be addressed by the evaluation. In all cases, the referring party or parties should clearly state the purpose of the evaluation in writing and pose specific questions to be addressed in the evaluation.

Based on the nature of the referral issues and questions, the scope of the evaluation is determined in the referral or by the court, in consultation with the evaluator. Once the referral questions and scope of the evaluation have been accepted by the evaluator, the expert evaluator chooses appropriate methods with which to address the questions. Evaluators may also identify relevant issues not anticipated in the referral questions that could enlarge the scope of the evaluation; these should be conveyed to the parties as early as possible. For issues outside the scope of the evaluator's competency, the evaluator considers recommending additional services or evaluations.

# Evaluators inform participants about the disclosure of information and the limits of confidentiality.

- When an evaluation is court ordered, it is not privileged and the evaluator informs the individuals of the nature of the evaluation and that the evaluation will be distributed to other parties as provided by court order. Evaluators conducting an evaluation in child protection matters ensure that the participants, including the child (to the extent feasible), are aware of the limits of confidentiality for the evaluation results. If the public agency or court is paying for the evaluation, the evaluator so informs the individual.
- When an evaluation is not court ordered, evaluators performing evaluations in child protection matters should obtain informed consent from all adult participants, and children and youth consistent with their developmental capacity to understand.
- When an evaluation is obtained by a party in an abuse/neglect or termination proceeding without the apparent knowledge or consent of the child welfare agency, guardian ad litem, and/or the court, the evaluator should advise the party being evaluated of the need to obtain and review appropriate and relevant information from the child welfare agency, guardian ad litem, and/or the court.

**Evaluators use multiple methods of data gathering.** Evaluators generally use multiple methods of data gathering, including, but not limited to, clinical interviews, observation, and/or psychological testing that are sufficient to provide appropriate substantiation for their findings. Evaluators should review relevant reports (e.g., information from child protection agencies, social service providers, law enforcement agencies, health care providers, child care providers, schools, and institutions). In evaluating parental capacity to care for a particular child or the quality of the parent-child interaction, evaluators should make reasonable efforts to perform formal observations of the child together with the parent, unless such observation is not necessary to respond to the questions posed in the evaluation or to support the recommendations

and conclusions of the evaluator. Evaluators in some circumstances may rely on formal observations conducted by other neutral and competent professionals. It is recognized that in some circumstances, parent-child observations may not be necessary. Also, in some circumstances, it may not be advisable to require parent-child contact for purposes of the evaluation. For example, in cases where the safety or well-being of the child is clearly in jeopardy or parental contact with the child has been prohibited by the court. In such cases, the evaluator should note explicitly the reason(s) that a parent-child observation was not included. Evaluators may also interview extended family members and other individuals, when appropriate (e.g., caregivers, grandparents, and teachers). However, these should not be considered as substitutes for formal observation.

Evaluators are able to provide clarification and answer questions relating to the evaluation(s) completed. Once an evaluation is completed, the evaluator must be available to speak with CP&P staff such as the assigned caseworker if there are any questions or concerns regarding the evaluation.

# IV. Best Practices for Expert Forensic Evaluations

Forensic evaluations may be needed at any point in time during the lifespan of a child protective services case. The need for a forensic evaluation may emerge during the course of an investigation to assist with developing understanding or seeking clarity around the allegations of child abuse/neglect. More commonly, mental health evaluations may be required to contribute to the decisions by the court of the Division made about placement, reunification, permanency, and visitation. Finally, forensic evaluations are typically required for guardianship (termination of parental rights) litigation.

# 1. During an Investigation

# The Role and Function of Forensic Evaluations during an Investigation

During an investigation, evaluations may be needed to assist CP&P and the Courts in assessing whether abuse and/or neglect occurred. These evaluations are meant to assist in clarifying or gathering additional information for investigative purposes with the lens of an expert. When sufficient evidence or clarity about the case has been achieved through the investigative work of the CP&P caseworker via interviews and collateral review, or teamed efforts with law enforcement or others involved in the investigative process, it is often not necessary to engage the services of an expert for an evaluation during an investigation

Forensic evaluations during the investigatory phase of the case may be warranted as part of the investigative efforts conducted by CP&P (and law enforcement). These situations most often include allegations of sexual abuse and emotional abuse/neglect. In addition, an evaluation during the initial involvement with a child may assist CP&P in determining the impact of an event on a child's psychological functioning.

Evaluations that may be required during the course of an investigation are almost always time sensitive matters. Thus, it is recommended that referrals be made as close to the point in time of the allegation or the occurrence of the alleged incident as possible:

- Evaluators should receive referrals within 10 working days of the report.
- An appointment by the evaluator should be granted within 10 working days of the referral.
- CP&P shall provide available background materials by the time of the evaluation.
- Evaluators should complete their reports and provide them to CP&P within 10 working days following completion of the evaluation.

These guidelines recommend that no more than 45 days pass between the initial referral to a provider for an assessment, to the date the written report, with recommendations, is provided to CP&P for review.

### The Forensic Evaluation Process during an Investigation

In consultation with supervisory staff, and the DAG if litigation is contemplated or a complaint has been filed, CP&P caseworkers should select a provider who has the appropriate credentials to perform the evaluation. In many cases, child protection staff should access their Regional Diagnostic Treatment Center to conduct these evaluations. CP&P requires licensed individuals to conduct evaluations. In most cases, these will be licensed psychologists. When the impact of physiological factors, medical illness, medication, neurological, or psychiatric disorder is complex, an evaluation by a psychiatrist or physician may be necessary. In limited circumstances, an assessment by a LCSW may be appropriate.

The purpose of the evaluation during the investigatory phase of a case must be clear and should outline the specific questions to be addressed by the evaluator. Confirm with the evaluator the purpose of the evaluation. It is particularly important to limit the number of interviews or evaluations a child experiences for both validity reasons and to avoid re-traumatizing a child.

# <u>Investigation Evaluation Referral Questions:</u>

- Is this child's presentation consistent with the allegation?
- To what degree has the child been harmed or traumatized by the event?
- Is this child able to participate in court proceedings?
- Other questions relevant to the specific case.

# Evaluators should use multiple methods of data gathering.

The evaluator should be provided with certain background information, which includes:

- CP&P investigation report (or summary report) that is current/up to date;
- Existing prior psychological and psychiatric evaluations of the child and biological parent(s);

- Available law enforcement records including police reports; criminal charges and convictions; taped interviews, if available; and Promis/Gavel history of offenses;
- Prior CP&P history, including all prior referrals, with a finding for each allegation/investigation; investigative summaries;
- Complaint filed in court; and,
- Known mental health, substance abuse, or domestic violence history.

If a <u>child</u> is to be evaluated, the CP&P caseworker assigned to the case should accompany the child to the evaluation to support the child, to be available to provide any additional information and to hear directly from the evaluator any initial findings or recommendations. Whenever possible so as to best inform the evaluation, the investigative worker should accompany the child. Whenever possible a trusted adult should also accompany the child.

# During the clinical interview, an evaluator:

- Establishes "Ground Rules" between the evaluator and the child.
- Explains to the child, in age appropriate and developmentally appropriate terms, the nature and the scope of the evaluation.
- Establishes the child's developmental and cognitive ability to participate in the evaluation.
- Establishes the child's competency. Does the child know the difference between the truth and a lie, real or pretend?
- Obtains the child's version of the incident.
- Notes the child's affect upon describing the incident.
- Asks questions to gather past history.
- Determines family relationships.
- Determines peer relationships.

# Once the evaluation has been completed, the summary and report should include:

- Reason for the report summary background;
- Nature of the allegation;
- Prior history;
- Documentation including a summary of the interview and direct quotes by the person being interviewed;
- Clinical finding and explanation;
- Any formal diagnosis;
- Clinical determination indicate whether supported/not supported; and,
- Recommendations.

#### 2. During Permanency Planning/Hearings

#### The Role and Function of Forensic Evaluations during Permanency Planning/Hearings

At the time of referral and over the course of a child or adolescent's time under CP&P custody, mental health evaluations may be required to contribute to the decisions made about placement, permanency, and parental rights. During permanency planning and hearings, evaluations are often used for:

- <u>Interim Evaluation</u>: The interim evaluation is meant to guide reasonable efforts for reunification.
- <u>Ten Month Conference</u>: The ten month conference is used to prepare a permanency plan for the child or youth in out-of-home placement. Before moving forward, any previous reports should be reviewed. It would be useful if the evaluator from the interim evaluation was also utilized at this point.
- Periodic Evaluation Evaluation of Imminent Concerns Arising during Placement: An evaluation of imminent concerns is used to assess any risks or challenges that the child may incur during the course of the protective services or guardianship litigation. Examples include:
  - o Disruption of the current placement;
  - o Acute crisis (e.g., psychiatric hospitalization, severe medical illness, runaway, arrest, school disruption); and
  - o Significant change in response to visitation.

# Forensic Evaluation Process during Permanency Planning/Hearings

The purpose of the evaluation should be clear and should outline the specific questions to be addressed by the evaluation. The following referral questions should help to guide forensic evaluations at each of the stages identified for permanency planning/hearings:

# **Interim Evaluations Referral Questions:**

- What services are needed for reunification?
- What impact has the abuse/neglect history had on the child?
- What are the risks that need to be addressed?
- Is the parent fit and able to parent the child?
- What actions are recommended to address the risks?
- What are the strengths that can be built upon?
- What visitation can be safely afforded between parents and their child(ren)?

# Ten Month Conference Referral Questions:

- What progress has been made towards eliminating the harm?
- What still needs to be done?
- Are there any new areas of need?
- If a home other than the child(ren)'s current placement is being considered, is it in the best interest of the child(ren) to move to another placement if proposed by the parents, or to stay permanently where he or she is residing?

- Can this child transition back to the biological parents, without experiencing more harm than good?
  - If bonding and attachment are issues, an evaluation by a psychologist is necessary. A psychiatrist may contribute information within his or her area of expertise.
- Have the correct services been provided so far, and is there a need for a reduction, modification, or expansion of services?

It may be necessary to reevaluate the permanency plan. All of the questions above would apply to any such reevaluations.

# Evaluators should use multiple methods of data gathering.

For these evaluations, the evaluator should be provided with certain background information, which includes:

- Existing prior psychological and psychiatric evaluations of the child and biological parent(s);
- Existing treatment reports for biological parents and child;
- Known mental health, substance abuse, or domestic violence history;
- Visitation reports;
- Complaint for guardianship, if filed;
- CP&P investigation report (or summary report) that is current/up to date;
- Prior CP&P history, including all prior referrals, with a finding for each allegation/investigation; investigative summaries;
- Most recent CP&P court report;
- Important selected contact sheets from the CP&P case record;
- Available law enforcement records including police reports; criminal charges and convictions; taped interviews, if available; and Promis/Gavel history of offenses;
- Additional information the parent wants to share with the evaluator; and,
- Any further available information requested by the evaluator.

All evaluations should include a review of comprehensive, accurate background information; a clinical interview; and the use of an appropriate assessment tool.

The evaluator should have access to all information he or she deems necessary in order to respond to the questions posed.

# <u>Periodic Evaluation – Evaluation of Imminent Concerns Arising during Placement Referral</u> Questions:

- Identify impact of presenting problem.
- What are the recommended services or actions to address the problem?
- Should the permanency plan change?

For <u>Periodic Evaluations of Imminent Concerns Arising during Placement</u>, documented relevant information is needed as well as all available relevant reports, such as:

- Medical reports;
- Police reports;
- School reports;
- Psychiatric reports; and
- Relevant contact sheets.

# 3. During Litigation for Guardianship Complaints

# The Role and Function of Forensic Evaluations during Litigation for Guardianship Complaints

Guardianship evaluations consist of fitness and bonding assessments during trial preparation after a guardianship complaint has been filed. Ideally, both the fitness and bonding assessments are completed by the same psychologist.

The presumption is that fitness and bonding assessments are required for guardianship litigation. It is recognized that in some circumstances, parent-child observations may not be necessary or advisable for purposes of the evaluation. For example, in cases where the safety or well-being of the child is clearly in jeopardy or parental contact with the child has been prohibited by a prior fitness and bonding assessment, parent-child observations may be bypassed. In such cases, the evaluator should note explicitly the reason(s) that a parent-child observation was not included.

A bonding evaluation assesses the relationship between the child(ren) and the proposed caregivers and other household members as appropriate.

# Forensic Evaluation Process during Litigation of Guardianship Complaints

# **Guardianship Evaluation Referral Questions:**

- What progress has been made towards eliminating the harm?
- What still needs to be done?
- Are there any new areas of need?
- If a home other than the child(ren)'s current placement is being considered, is it in the best interest of the child(ren) to move to another placement if proposed by the parents, or to stay permanently where he or she is residing?
- Can this child transition back to the biological parents, without experiencing more harm than good?
  - o If bonding and attachment are issues, a psychological evaluation is necessary. A psychiatrist may contribute information within their area of expertise.
- Assess the child's bond and attachment to the biological parent(s).
- What harm, if any, will result if parental rights are terminated?
  - o Can the resource family parents mitigate the harm?

- Assess the child's bond and attachment to any proposed adoptive resource parent(s).
- Would severe and enduring harm occur if the child is removed from the proposed adoptive resource parents?
  - o Can the biological parents mitigate the harm?

Guardianship evaluations call for specific competencies<sup>7</sup> that are referred to in this section. The evaluator at this stage in most circumstances will be a *licensed psychologist* or a psychiatrist. The licensed professional must be qualified to perform custody/parenting time evaluations and/or termination of parental rights evaluations through education, training, and/or supervision in all of the following categories:

- 1. Child growth and development;
- 2. Psychological testing;
- 3. Parent-child bonding;
- 4. Parenting skills;
- 5. Adult development and psychopathology;
- 6. Family functioning;
- 7. Child and family development;
- 8. Child and family psychopathology;
- 9. The impact of divorce or family dissolution on children; and,
- 10. The impact of age, gender, race, ethnicity, national origin, language, culture, religion, sexual orientation/identity, disability, and socioeconomic status on custody/parenting time evaluations.

When the following topics are involved, the licensed psychologist or psychiatrist shall have specialized education, training, and/or supervision in the specific topic, or the licensee shall refer to a licensed mental health care provider who has that education, experience, training, and/or supervision. The topic areas include:

- 1. Physical, sexual, or psychological abuse of spouse or children;
- 2. Physical and emotional neglect of children;
- 3. Alcohol or substance abuse that impairs the ability to parent;
- 4. Medical/physical/neurological impairment that affects the ability to parent; or
- 5. Other areas beyond the licensee's expertise that are relevant to the custody/parenting time evaluation.

Evaluators may identify relevant issues not anticipated in the referral questions that could enlarge the scope of the evaluation. At this stage, it is important to consider some relevant factors or issues in responding to the bonding and attachment referral questions.

# These factors include:

- 1. Age of the child;
- 2. The developmental stage of the child;

<sup>&</sup>lt;sup>7</sup> N.J.A.C. 13:42-12.2. Available online at, <a href="http://www.njconsumeraffairs.gov/adoption/psychado">http://www.njconsumeraffairs.gov/adoption/psychado</a> 090710.HTM

- 3. Child's history of abuse and/or neglect;
- 4. Child's resiliency;
- 5. Any special needs medical or emotional of the child or biological parents;
- 6. Parenting skills of both sets of parents;
- 7. Length of time in biological parents' care;
- 8. Number of placements;
- 9. Length of time in each placement;
- 10. Previous failed reunification attempts;
- 11. Child's wishes, weighted in accordance with developmental functioning;
- 12. Demonstrated willingness and ability of both biological parents and proposed adoptive resource parents to comply with services;
- 13. Demonstrated willingness and ability of both biological parents and proposed adoptive resource parents to recognize and meet the child's needs, including issues relating to reunification or adoption;
- 14. History of child's interaction with both biological parents and proposed adoptive resource parents;
- 15. Issues that may affect child's behavior during a bonding evaluation; and,
- 16. Sibling bonds/other attachments.

# Evaluators should use multiple methods of data gathering.

Evaluators should be provided with the same background information listed under *Section 2: During Permanency Planning/Hearings*.

All evaluations should include a review of comprehensive, accurate background information; a clinical interview; and the use of an appropriate assessment tool.

The evaluator should have access to all information he or she deems necessary in order to respond to the questions posed.