Executive Summary

The New Jersey Department of Children and Families, Division of Child Protection and Permanency (CP&P) is committed to its mission to ensure the safety, permanency and well-being of children and to support families who are served by the agency. CP&P makes every effort to reunify each child who enters our care with their birth parent(s) and family. While, reunification is the primary goal, permanency work begins at intake with concurrent planning for each child who enters care. This planning process is part of CP&P’s case practice model, in which we plan around reunification, while at the same time exploring and implementing an alternate permanency plan in case reunification is not an option. Thus, there are some cases where a child is unable to return home, regardless of CP&P’s exhaustive efforts toward reunification. In these instances, children most often have a permanency goal of adoption.

This report represents data from calendar year 2015 and from a cohort of children who entered care in 2012. Children from this cohort who had a primary permanency goal of adoption were followed up to 36 months from the time of entry to their exit from care. The objective of this report is to tell the story of what adoption case practice looks like for children under the care of CP&P and to reflect the division’s efforts to ensure the safety and timely permanency for all children.

Key CP&P Findings

- A majority (88 percent) of our children are in their permanent homes at the time the permanency goal is changed to adoption and the state is awarded guardianship.
- In 2015, 140,988 children were served by CP&P, and of those 129,072 were served in-home.
- There were 4,733 of children removed from their homes in calendar year 2015.
- In 2015, 3,444 children discharged to Reunification/Live with Relatives, and 1,293 discharged to Adoption/Kinship Legal Guardianship.
Key Adoption Findings

- In calendar year 2015, there were 1,063 adoptions finalized.
- 1,043 (98 percent) of the children adopted received a subsidy to help support the child.
- 1,173 children from the 2012 Entry Cohort of 4,704 children had a permanency goal of adoption.
- 57 percent of the children from the 2012 adoption cohort had adoptions that finalized within 36 months.
- Adoptions with relatives/kin are more likely to be completed within 36 months than unrelated resource home adoptions or select home adoptions - 45 percent of children whose adoptions finalized from the 2012 cohort were placed in relative/kin homes.
INTRODUCTION

The New Jersey Department of Children and Families (DCF) is dedicated to ensuring a better today and an even greater tomorrow for every individual the department serves. In partnership with New Jersey’s communities, DCF ensures the safety, well-being, and success of New Jersey’s children and families. As part of DCF’s commitment to accountability and transparency, and in line with the Sustainability and Exit Plan, the department publishes a series of annual reports on topics important to improving and sustaining the child welfare system. This report focuses on the data and practice of ensuring timely permanency through adoption\(^1\) for children in an out-of-home-placement\(^2\).

Explaining the Content

This report first discusses the range of children who touch the child welfare system. It then focuses on children who cannot remain with their families and for whom adoption is the best path to safety, well-being, and permanency. While explaining the adoption process, this report provides data about the adoption process, children served, timeframe to achieve permanency, and common challenges to permanency.

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\(^1\) Adoption is the legal transfer of all parental rights and responsibilities from the birth and/or legal parent to another person who desires to assume those rights and responsibilities see Policy Manual (CPP-III-B-4-400) Case Goals.

\(^2\) In this report we will refer to “out-of-home placement,” which is also commonly referred to as foster care. This includes any situation where a child is removed from his or her home by the Division of Child Protection and Permanency because the child is at imminent risk of harm. This does not refer to cases where parents or caregivers partner with the Children’s System of Care to seek out-of-home treatment for children and youth with behavioral health needs, substance use disorders, or intellectual/developmental disabilities.
About the Data

This report includes the most recent and reliable data available. In some instances, data is as recent as 2015. In other instances, the most recent data is from a cohort of children who entered out-of-home placement in 2012.

The 2015 calendar year data allows us to discuss and provide information about what is currently happening in New Jersey’s child welfare system.

The 2012 cohort data allows us to follow this cohort of children from 2012 through the life of their case and verify their permanency type. The use of entry cohorts will become increasingly important in future reports as a way to measure changes in the experiences of children in an out-of-home placement over time. We then focus further upon those children who had a permanency goal of adoption. To verify individual results and provide a full picture, it is necessary to look at this extended timeframe, as finalizing an adoption is typically a multi-year process.

THE PATH TO PERMANENCY

In-Home Services

To understand adoption in the child welfare system, it is useful to understand how and when children who come to the attention of the child welfare system ultimately require permanency through adoption. In New Jersey, the majority of children served by the child welfare system are able to stay home with their families. The number of children in an out-of-home placement is significantly less than the number of children served by the Division of Child Protection and Permanency (CP&P) in their own homes. CP&P’s primary goal is to provide services to keep families together and children at home. CP&P served 140,988 children and youth in 2015, of which 129,072 (92 percent) were

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3 This cohort is comprised of children who entered an out-of-home placement in 2012. Each child is followed up to 36 months from time of entry to date of discharge in order to examine their placement episode and verify their permanency outcome. In this inaugural report, we started with the 2012 entry cohort, however, we anticipate following those children from this cohort who had not yet achieved permanency in future reports.
served in their own homes. There are instances where children are at imminent risk of harm\(^4\) in their homes. In these cases, CP&P exercises its authority to assume custody of the children. This is a small percentage of cases. Eleven thousand nine hundred and sixteen (8 percent) of the total number of children served were in an out-of-home placement for at least one day in calendar year 2015. Of these, 4,733 entered out-of-home placement and 5,152 exited from an out-of-home placement in 2015. Of those who exited in 2015, 3,444 (67 percent) were reunified\(^5\) or went to live with relatives\(^6\) and 1,293 (25 percent) achieved permanency through Adoption and Kinship Legal Guardianship (KLG)\(^7\).

**Figure 1: Children Served by the Division of Child Protection and Permanency**

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4 See N.J.S.A. 9:6-8.21

5 A form of permanency where the child in placement is returned to his or her principal caregiver(s)’s home in which they were removed.

6 A form of permanency where parental rights and legal custody are generally not disturbed; nonetheless, a child leaves placement to enter the physical custody of a relative other than the one from whom he or she was removed. This individual may be the previously non-custodial parent.

7 A form of permanency where a relative or a family friend is identified as a caregiver who is awarded custody by the court and is willing to assume care of a child due to parental incapacity, with the intent to raise the child to adulthood. In this form of permanency, the parental rights are typically not terminated. See N.J.S.A 3B:12A-1-6 et seq.; N.J.S.A. 30:4C-84.
**Concurrent Planning**

CP&P’s primary goal for children who enter CP&P custody is to work with the family to ensure safe and timely reunification.

While reunification is the primary goal – in fact, the majority of children who enter out-of-home placement are reunified with their families – CP&P concurrently plans alternative permanency options if reunification is unsuccessful. Concurrent planning is a child-focused model and a foundational component of CP&P’s case practice model. Through concurrent planning, we provide services (e.g., counseling, training, rehabilitation) to prepare families for reunification, while simultaneously implementing an alternative permanency plan if reunification is not possible. Concurrent planning emphasizes teaming with and engaging families to identify and address underlying needs and maximize family rehabilitation and reunification. Concurrent planning seeks to move children quickly from the uncertainty of out-of-home placement to the security of a permanent home. Concurrent permanency plans for children in an out-of-home placement are adoption, kinship legal guardian, and living with relatives.

To ensure permanency efforts are continuous and timely for children in out-of-home placement, five and ten month concurrent planning meetings are required for children in CP&P custody. These meetings typically include the parents, caseworker, supervisor, and counselors or therapists. Deputy Attorneys General are also part of the ten month meeting. These meetings provide opportunity for CP&P to engage with children in out-of-home placements and their families to ensure the child’s needs are being addressed. These meetings ensure the child’s overall safety and well-being; engage and build trust with families; and ensure permanency and concurrent planning goals are established early.

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8 The Case Practice Model guides DCFs work with children and families. This is a strength-based, solution-focused, and family-centered approach to help support New Jersey’s most vulnerable families and help them achieve the core values of safety, permanency, and well-being for children. Engagement and building family teams are key tenets of the model. DCF works to build trust and mutually beneficial relationships among children, youth, family members, and DCF staff. The four core conditions of the Case Practice Model are genuineness, respect, empathy, and competence. The model was first implemented in four immersion sites in 2007. All 46 local offices were trained by 2012.

9 Referred to as five and ten month reviews in policy.

10 To learn more about the five and ten month reviews, see POLICY MANUAL CP&P-IV-D-2-100, Definitions, “Enhanced Review Process.” Out of Home Placement-Finalization to Adoption-CPP-IV-C-800
Both planning meetings are integral components of CP&P’s concurrent planning process. The meetings provide opportunities to reassess the needs of the family and our efforts to help them meet their case goals and achieve reunification. The five month concurrent planning meeting evaluates whether the current placement meets the child’s short- and long-term needs. This meeting provides an opportunity to confirm the parent understands what is required for reunification, as well as, reassess the appropriateness and adequacy of services and supports. It is also a means to measure the likelihood of reunification and if the child’s out-of-home placement has potential to become the child’s permanent home. The ten month concurrent planning meeting is crucial to measuring the efficacy of reunification efforts, re-evaluating reunification timelines, and continuing work on concurrent permanency plans. CP&P meets and teams with the family to discuss progress and barriers inhibiting reunification. Five month concurrent planning meetings were completed on-time in an average of 94 percent of qualifying cases in 2015. Ten month concurrent planning meetings were completed on-time in an average of 84 percent of qualifying cases.

**Figure 2:**

<table>
<thead>
<tr>
<th>5 and 10 Month Concurrent Planning Meetings</th>
<th>Calendar Year 2015</th>
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<tbody>
<tr>
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<td>5 Months Reviews</td>
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Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
Most Children and Families are Reunified

Most children and families who experience out of home placement are reunified with their families. Fifty-five percent of children in out-of-home placement in 2012 were reunified with their families within 36 months. Sixteen percent of children who entered care in 2012 were in placement after 36 months. Fourteen percent were adopted, seven percent were discharged to live with relatives, and three percent had a kinship legal guardianship discharge status.  

Figure 3:

![Graph showing status at 36 months](image)

New Jersey Department of Children & Families
2012 Children Entering Foster Care (n=4704)
Status at 36 Months

11 The Other category includes children who reached majority, had their custody and care transferred to another jurisdiction, had an unauthorized exit status, or are deceased.
Likelihood of Reunification is Greatest within the First Twelve Months

Data show reunification is the most common form of permanency during the first year. This suggests if children are to be reunified with their parents, it will likely occur within the first 12 months of placement. Concurrent planning begins showing results by the 24th and 36th month, when a substantial increase in permanency through adoptions are seen. Reunification is the most likely form of permanency in the first year, shifting toward adoption over the subsequent years.

Figure 4:

**Children Entering Foster Care in New Jersey**
Time to Permanency for Children Entering an Out-of-Home Placement in Calendar Year 2012

n=4,704

PERMANANCY THROUGH ADOPTION

Among the children who enter CP&P custody, less than half cannot be reunified with their parents. For these children, our primary effort shifts from reunification to securing a committed family willing to adopt.
Office of Adoption Operations

DCF’s Office of Adoption Operations is an adoption agency licensed by the DCF Office of Youth and Residential Licensing. The Office of Adoption Operations must comply with the same policies and regulations, including the Manual of Requirements for Adoption Agencies, as private adoption agencies.\(^\text{12}\)

The Office of Adoption Operations supports adoption efforts through 46 local offices,\(^\text{13}\) each staffed with trained adoption workers. Local offices report to regional area offices, where a concurrent planning specialist supports their adoption efforts. Six experienced Office of Adoption Operations field support specialists also provide adoption and permanency support and local office oversight. These specialists work closely with local office adoption staff, providing guidance on adoption case practice and troubleshoot challenging cases. They also provide training and consultation for adoption supervisors and workers.

If the primary permanency goal for a child changes from reunification to adoption, the child’s case is transferred and assigned to an adoption worker. Local office adoption workers manage cases where adoption is the primary goal. These workers provide services to birth parents, attend court hearings, and prepare children for adoption. They identify potential adoptive families for children not already living with a committed family, and facilitate the adoption process for families seeking to adopt.

Adoption Staff and Staff Supports

CP&P employed on average 225 active adoption caseworkers in 2015. Each caseworker manages up to 15 children with adoption cases at one time. Ninety-two percent of adoption caseworker workloads met this standard in the calendar year 2015.


\(^{13}\) http://www.nj.gov/dcf/contact/dcpplocal/index.html
New adoption caseworkers receive three-days of adoption training. Sixty-one CP&P workers received new adoption caseworker training in 2015. New adoption caseworkers must be trained within six months of being assigned to a local office adoption unit.

In partnership with the Rutgers School of Social Work, CP&P supports an adoption certificate program to further enhance staff skills and ensure timely and high quality adoptions. The program provides a child welfare track for adoption workers and a clinical track for clinicians. The child welfare track seeks to improve and build upon CP&P staff skills and knowledge regarding issues related to adoptive parents and children. Using attachment-based and family-focused interventions, the clinical track advances the knowledge, practice, and skill of mental health practitioners regarding issues adoptive families often face.

To ensure the adoptions process move swiftly, contracted support staff helps complete child summaries and other required documents. Critical to ensuring adoptive parents and the courts have full information regarding adopted children, child summaries documents each child’s medical, educational, developmental, emotional, physical, and family medical history.

**Adoption Litigation**

All adoptions are litigated and must be approved by the Superior Court. All parties are typically represented by counsel. The Office of the Attorney General represents the state, the Office of the Law Guardian typically represents the child being adopted; and the Office of Parental Representation typically represents the parents.

All adoptions are approved by the Superior Court.

There are several steps in adoption litigation: (1) filing a guardianship complaint that includes the child summary; (2) a hearing to determine the permanency goal; (3) a hearing to terminate parental rights; and (4) a hearing to finalize the adoption.
For a child to become legally free for adoption, the parental rights of the biological parents must be terminated. The Adoption and Safe Families Act requires states to file for termination of parental rights when a child has been in an out-of-home placement for 15 of the last 22 months.

There are a number of legal steps leading up to an adoption, including a permanency hearing by the 12th month of a child’s placement. If CP&P determines a child’s permanency goal should be changed to adoption, CP&P must present that change and supporting evidence to the court.

CP&P then files a Complaint for Guardianship, which seeks to terminate parental rights to, and legal guardianship of, the child. This point in the legal process, which includes case reviews, may include requests for expert evaluations and a trial. This can extend the process.

Biological parents often appeal court decisions terminating their parental rights. The adoption process is halted until the appeal is heard and decided by the court. Appeals can also lengthen the time it takes to recruit a family for children who have not yet been placed with one.

**ADOPTION FINALIZATION**

It is important to remember that of the children who enter out-of-home placement, only a fraction is not reunified with their parents and represent an even smaller fraction of the children who touch the child welfare system each year. While one thousand and sixty-three children were adopted in 2015, each child follows a different path to adoption.

**Adoption Types**

There are three types of adoption: 1) kinship adoption\(^{14}\), 2) unrelated resource home adoption; and 3) select home adoption. Kinship adoption involves identifying a child’s kin willing to be the child’s resource parent and willing and able to adopt the child if reunification is not possible. Unrelated resource home adoption is when a child in out-of-home placement is placed with an unrelated resource parent willing and able to adopt the child if reunification is not possible. Select home adoption is when CP&P has not been able to identify either kin or an unrelated

\(^{14}\) “Kin” is a person with a biological or legal relationship to the child including all relatives. Kin, however, may also more broadly include a person who is connected to a child or the child's parent by an established positive psychological or emotional relationship.
resource parent who is ready and willing to adopt by time parental rights are being terminated. CP&P pursues alternatives paths to permanency for children in select home adoption.

Depending on circumstances, a child may experience a combination of adoption types. Of the 4,704 children in the 2012 entry cohort, 1,173 had a goal of adoption. Of these 45 percent (522) were planned as kinship adoptions, 44 percent (514) were planned as unrelated resource home adoptions, and 11 percent (134) were select home adoptions.\(^\text{15}\)

For 88 percent of children in this cohort, a committed adoptive home was identified by the time parental rights were terminated, providing these children a stable living environment through the foster care and adoption process.

**Figure 5:**

![Pie chart showing adoption types](chart.png)

Of the 1,173 children with an adoption goal from the 2012 entry cohort, 57 percent (666) had their adoptions finalized within 36 months.\(^\text{16}\)

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\(^{15}\) In addition, 0.3% was unknown due to a lack of clarity regarding three cases in the administrative data.

\(^{16}\) While this report only looks at the 36 months following entry into care, the work for the remaining children awaiting adoption has not stopped. As part of CP&P’s commitment improve quality, the next annual report will continue to follow children from this cohort to provide a deeper understanding of how this work continues.
The adoption type impacted timeliness to adoption finalization. Of the 522 planned kinship adoptions, 67 percent (348) were completed within 36 months. This compares to 54 percent (278) of planned resource home adoptions, and 28 percent (37) of select home adoptions. While the number of children with planned kinship home adoptions and resource home adoptions is comparable, children with planned kinship home adoptions were more likely to be adopted within 36 months.

Figure 7:
**A Closer Look: Relative/Kinship Adoption**

By a slight margin, kinship adoption was the most common adoption type among children with a goal of adoption from the 2012 entry cohort. Research indicates placing children with kin can lead to fewer placement changes, lower rates of maltreatment, and lower behavior problems\textsuperscript{17}, all of which align with DCF’s goals. For these reasons, CP&P emphasizes kinship care placement and adoption. Early in the concurrent planning process, caseworkers engage kin caregivers about adopting the child in their care if reunification is not possible. It is noteworthy that kinship adoptions are finalized more expeditiously than other types, allowing these children to realize security permanency sooner.

While placing children with relatives and kin has advantages and often leads to positive outcomes, it is not free of challenges. Unlike resource home adoptions, kin caregivers are generally identified when placement is necessary. Consequently, screening, licensing, and training of kinship caregivers generally occurs simultaneous to the placement.

After DCF screens the kinship caregiver and approves the caregiver’s home, they may be granted presumptive eligibility for the child to live with them while licensing and training requirements are fulfilled. This proves to be an intense time for kin caregivers, children, and CP&P staff. Inappropriate living space, prior child protection history, and background check results can pose barriers to kinship care. Financial barriers, which may involve physical living space, may be addressed with CP&P resources. Child protection history and criminal background check results may be mitigated with support and training, but are sometimes insurmountable, precluding kin from serving as caregivers and adoptive parents.

Introducing a child to a home – even a kinship home – can impact family dynamics and change foundational relationships among relatives and household members. This can complicate the child’s placement and adoption. CP&P recognizes these challenges and works with families to address them.

**A Closer Look: Resource Home Adoption**

By a slight margin, resource home adoption was the second most common adoption type from the 2012 adoption cohort. When a kinship home is not available, CP&P looks to place a child in an unrelated resource home, preferably one willing to adopt the child if reunification is not possible. Unlike kinship caregivers, unrelated resource parents are already screened, licensed, and trained when a placement need arises.

During the concurrent planning process, CP&P determines if a resource parent is willing to adopt the child in their care. Children are more likely to be adopted by the resource parents with whom they lived the longest while in placement. CP&P strives to match a child with the appropriate resource home, but sometimes a child’s first resource home is either unwilling or unable to adopt. When this happens, CP&P will place the child with another resource family.

CP&P’s goal is to provide the child with family permanency and stability. It tries to avoid moving a child to different resource homes, which is traumatizing and disruptive for the child.

While the number of children identified for resource home adoption was marginally fewer than the number identified for relative/kinship adoption, children in resource homes are significantly less likely to have adoptions finalized within 36 months. It may be reasonable to speculate that biological parents may be more comfortable allowing their child to be adopted by kin than an unrelated resource parent.

**A Closer Look: Select Home Adoption**

Of the 1,173 children who had a goal of adoption from the 2012 cohort, 134 (11 percent) were not with families committed to adopting them when parental rights were terminated. These 134 children are assigned a select home adoption goal. Many of these children are older teens, medically fragile, and diagnosed with developmental and intellectual disabilities. For these children, CP&P intensifies it work and employs its Child Specific Recruitment process to find and secure an adoptive family.
CP&P develops a Child Specific Recruitment Plan for a child within 30 days of when the goal for the child becomes adoption. The Office of Adoption Operations’ child specific recruiter works with the adoption case manager to prepare the child for the adoption recruitment process. The child specific recruiter works to build a trusting relationship with the child and gathers the child’s history and identifies past connections. The most recent data reveals that 117 children were eligible for a Child Specific Recruitment Plan in calendar year 2015. Of them, 102 (87 percent) had a Child Specific Recruitment Plan completed within 30 days.

CP&P’s work to identify and recruit potential adoptive families is facilitated by the Office of Adoption Operations’ New Jersey Adoption Exchange Unit. The unit maintains a list of every child in New Jersey legally free for adoption and for whom an adoptive home has not been identified. The Adoption Exchange Unit can access national resources to profile a child not matched with a committed adoptive family in New Jersey. As of July 1, 2016, there were 255 active youth listed on the New Jersey exchange. Fifty-five of them are registered on the National Adoption Exchange.

To help identify and match potential adoptive families with children, the Child Specific Recruitment process advertises, participates in Philadelphia-based WCAU-TV’s “Wednesday’s Child” segment, and hosts in-person meet-and-greet, teaming, and match and profile events.

The select home adoption process is labor intensive and lengthy. These children and youth have complex needs and challenges. Ensuring the child and family’s transitional needs are met can

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18 This generally means that all litigation, including appeals, have been exhausted; though in some circumstances children may be included in the exchange while appeals are ongoing.
take months and includes a visitation process before a child can fully move into a family’s home. Adhering to generally accepted best practice for adoption, at least six months of adoption supervision and observation in the prospective family’s home are required prior to finalization. Clearly, it is difficult to finalize select home adoptions quickly. Of the 134 children from the 2012 entry cohort with a select home adoption goal, 37 had their adoption finalized within 36 months.

Figure 8:

“We have learned that anyone can do this (adopt), all you need is love in your heart and a roof over your head!”

“The biggest hurdle in adopting a child is overcoming your own personal fear and self-doubt.”

- John, adoptive parent
POST ADOPTIVE SERVICES

Once a child is adopted and the adoptive parents gain full parental rights and privileges, CP&P’s oversight of the child ends. However, CP&P does help adoptive families meet their adopted child’s needs. CP&P provides families important post-adoptive services, which helps ensure the adoptive home remains a loving and supportive place for the child.

Many adoptive and kinship families need post-finalization support. Over the past few years DCF has enhanced its outreach to, and connection with, these families.

Subsidies and Medicaid

CP&P provides subsidies to about 98 percent of the children adopted through the department. CP&P provided adoption subsidies for 13,910 adopted children as of December 31, 2015. Subsidies are available for relative/kinship, unrelated foster homes, and select home adoptions. Subsidies are provided for the child’s basic care needs, adoption legal fees, clothing allowances, services for children with disabilities and developmental delays, and child care. Children also retain their Medicaid eligibility.

Families may ask CP&P to reassess their subsidy if a child’s needs expand beyond what was anticipated at the time of adoption. The subsidy continues until a child turns 18 or completes high school or an equivalent program, whichever is later. Exceptions may be made when strict compliance would result in undue hardship or jeopardize the health, safety, or welfare of a adoptive parent or child. Such exceptions are most commonly allowed if the child was 16 or older at the time of adoption. In those circumstances, exceptions may extend the subsidy up to age 21.

Counseling Services

Post-Adoption Counseling Services (PACS) are free post-placement and adoption counseling services for children and their adoptive families. Services are provided by 13 contracted agencies throughout the state. Services are available for all adoptive families, whether adoptions occurred through CP&P or privately. One hundred and thirty-nine children adopted through CP&P, 34 children from private adoptions, and 16 finalized KLG children used PACS in 2015. PACS address unique needs that may arise for an adoptive child and their family. PACS can include family, individual, or group therapy and support services. Services are provided by trained adoption-

19 See 2015 Adoption Map attached to this report.
competent clinicians who address clinical issues such as identity, loss and separation, and birth family identification.

DCF maintains a contract to support the New Jersey Adoption Resource and Clearing House (NJ ARCH). NJ ARCH provides supports and services, such as a call line, an interstate resource directory, and a lending library for adoptive families or anyone who has been part of an adoption. They also provide a comprehensive referral service directory of adoption-competent clinicians.

**DCF ADOPTION INITIATIVES**

**New Jersey Collaborative Adoption Recruitment Education and Support**

The Office of Adoption Operations was awarded a federal grant in October 2014 to support the New Jersey Collaborative Adoption Recruitment Education and Support (NJCARES). NJCARES provided an opportunity for the Office of Adoption Operations to enhance existing policy, practices, and efforts around Child Specific Recruitment. The grant supported the development of an adoptive parent training program to teach adoptive parents how to effectively parent and address the needs and challenges of some of our children.

The grant established a highly individualized recruitment team for 21 legally free youth seeking permanency through the New Jersey Adoption Exchange. Youth selected for the program were encouraged to identify adults with whom they had a relationship. These adults became part of a recruitment team built around each youth.

"Recruitment and teaming will help you get close to a lot of people you care about and can't always reach."

"When you have a recruiter you will always have someone to talk to about anything."

-Elizabeth, 19

**Quality Improvement Center for Adoption and Guardianship Support Preservation**

CP&P was chosen in June 2015, as one of eight sites in the nation to partner with the Quality Improvement Center for Adoption and Guardianship Support and Preservation (QIC-AG) on a five-year project to implement evidence-based interventions. If these interventions are proven

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20 For the purpose of this grant Guardianship is referring to Kinship Legal Guardianship.
effective, they may be used in other child welfare jurisdictions. The interventions seek to achieve long-term permanence in adoptive and guardianship homes for children waiting for adoption and children and families whose adoption or guardianship has been finalized. Through this grant, CP&P is implementing an intervention that will focus on outreach to families with risk factors for post-permanency discontinuity. These selective interventions use proactive outreach to engage families in programs or training before a need is indicated.

**OBSERVATIONS**

**The Impact of Appeals**

As discussed previously, parents who disagree with a trial court decision may appeal to the Appellate Division and the New Jersey Supreme Court. Appeals make a child’s availability for adoption unclear, and work to finalize adoptions and recruit families for select home adoptions stall.

Relevant appeal data is underreported in our child welfare database. Nevertheless available data show appeals slowdown the adoption process. Of adoptions finalized within 36 months from the 2012 cohort, only three percent (23) had an appeal noted in the record.

**Figure 9:**

2012 Children Entering an Out of Home Placement in NJ: The Path to Adoption-Appeals and Finalizations (n=666)

- Appeal: 3%
- No Appeal: 97%

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21 Appeals are underreported in the administrative data. As a result, we must be cautious not to overstate the conclusions in this section, nevertheless the available data sheds some light on adoption finalizations. It is our goal is to improve the quality of appeal data in order to identify and understand trends.
Kinship adoptions have significantly fewer appeals. Recall that the number of children with goals of kinship adoption and resource family adoption are comparable. However, 66 percent (77) of appeals are from resource family adoption cases compared to 16 percent (19) from kinship adoptions cases. Mindful of the limitations of this data, it does appear that for the 2012 adoption cohort, appeals for unrelated resource family adoptions contribute to the previously identified disparity in timeliness between unrelated resource family and kinship adoptions.

Figure 10:

![Chart](image)

**Benefits of Kinship Placements and Early Identification of Committed Families**

CP&P has succeeded in ensuring the overwhelming majority – 88 percent – of children who are to be adopted are already living with families committed to adoption at the time the state is awarded guardianship. This is a significant accomplishment on behalf of children. It minimizes trauma by creating greater stability and predictability and yields more timely permanency. It reflects CP&P’s case practice and focus to identify committed families early in the case planning process.

The chart below shows the time to permanency through adoption by adoption type over time. Because many children and youth with kinship and resource home adoption goals are already
living with their committed families when guardianship is awarded to the state, these adoptions finalize at a higher rate. While resource home and kinship home adoptions occur at comparable rates during the first 24 months, kinship adoptions begin finalizing more quickly over the subsequent 12 months.

Figure 11:

This finding reflects that kin placement improves adoption timeliness. While we have prioritized kinship care as a core of our practice model for years based on research and experience that placing children with kin can lead to fewer placements, low rates of maltreatment, and lower behavior problems, we had not previously recognized the impact on timeliness of adoption finalization. Over subsequent reports we will continue to monitor this to see if this finding holds for future years.

CONCLUSION

This report emphasizes the overall success of teaming and quality case practice done through our concurrent planning process and adoption work. A majority (88 percent) of our children are in their permanent homes at the time the state is awarded guardianship. Additionally, the report highlights the support provided by the Office of Adoption Operations and enhancements to case practice implemented and supported by two federally supported initiatives. It reemphasizes the need for DCF to continue focusing on the identification of kin willing to provide out-of-home care and, if necessary, adopt. Where that is not feasible, DCF must continue to identify and support resource parents willing and able to adopt.

This report identifies needs for improved data collection to better understand adoption delays, particularly related to litigation and appeals, and develop strategies to mitigate such delays.