



Service Report Guide

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What is the Purpose of the Service Report?

The purpose of the short questionnaire (Service Report) is to help DCF capture data regarding the level of service delivered by providers operating direct service, cost-reimbursement contracted services. The Service Report will provide DCF with crucial, real-time information as providers continue to adapt program service delivery in response to the COVID-19 pandemic. It will be shared with DCF Leadership to inform our understanding of how the child and family service system is functioning.

Which Programs Require a Service Report?

A report must be completed for each direct service, cost-reimbursement contracted program, with some limited exceptions. All programs requiring a Service Report to be completed will be listed in the “Program Name” drop down for your agency.

Who Completes the Service Report?

Agencies leaders (CEO/Executive Director) received an email in early November 2020, which included a list of each DCF-contracted program for which a Monthly Service Report needs to be completed. At that time, the agency leader was given the opportunity to designate themselves or assign staff to complete the service report for each program. The same person may have been assigned to complete more than one Service Report. Please check with your agency leader to determine who has been assigned to complete a Service Report.

How to Access the Service Report.

Use the following link to complete the Service Report: <https://arcg.is/1ffDSu3>. The link will direct you to an ArcGIS Survey123 report online where you will be able to enter your program information.

When is the Service Report Due?

Providers are expected to complete a Service Report on a monthly basis. The Service Report for the previous month will be sent out on the last Monday of the current month; the due date is the Friday of the same week the report is received, unless either date falls on an observed state holiday.

Please complete the current Service Report by 5 p.m. on Tuesday, April 8th, 2025.



Future Service Reports will be released on the following schedule:

| Service Report Open | Reporting Data For |
|---------------------------------------|---------------------------|
| July 1, 2024 – July 5, 2024 | May 2024 |
| July 29, 2024 – August 2, 2024 | June 2024 |
| August 26, 2024 – August 30, 2024 | July 2024 |
| *September 30, 2024 – October 4, 2024 | August 2024 |
| October 28, 2024 – November 1, 2024 | September 2024 |
| November 25, 2024 – December 2, 2024 | October 2024 |
| December 30, 2024 – January 6, 2025 | November 2024 |
| January 27, 2025 – January 31, 2025 | December 2024 |
| February 24, 2025 – February 28, 2025 | January 2025 |
| April 1, 2025 – April 8, 2025 | February 2025 |
| April 28, 2025 – May 2, 2025 | March 2025 |
| May 27, 2025 – June 2, 2025 | April 2025 |
| June 30, 2025 – July 7, 2025 | May 2025 |
| July 28, 2025 – August 1, 2025 | June 2025 |



NEW JERSEY DEPARTMENT OF CHILDREN AND FAMILIES

How to Complete the Service Report.

Section I: User and Program Information

 NEW JERSEY DEPARTMENT OF
CHILDREN AND FAMILIES

DCF Service Report for Direct Service Providers
February 2025

Purpose:
The purpose of this short questionnaire (Service Report) is to help DCF capture data regarding the level of service delivered by providers operating direct service, cost reimbursement contracted services. The Service Report will provide DCF with crucial, real time information as providers continue to adapt program service delivery in response to the COVID-19 pandemic. It will be shared with DCF Leadership to inform our understanding of how the child and family service system is functioning. This Service Report should be completed monthly. Below, please report data for

Date and Time Display

3/31/2025 13:17

Section I: User and Program Information ▼

First Name

Last Name



NEW JERSEY DEPARTMENT OF
CHILDREN AND FAMILIES

Email Address

Phone Number

Job Title

-Please select- ▾

Agency Name*

Please click inside the box for either the drop-down list or type and select your Agency Name.

 ▾

Program Name*

Please click inside the box for either the drop-down list or type and select your Program Name. If your program does not appear in the drop-down list, your program is not required to complete a Service Report.



NEW JERSEY DEPARTMENT OF CHILDREN AND FAMILIES

County*

Select the counties served by the program for which you are reporting. Select statewide if the program serves all counties. If your program serves multiple counties, please check all that apply. If your program includes multiple counties, please report below the total number for all counties included under the program.

ATLANTIC

BERGEN

BURLINGTON

CAMDEN

CAPE MAY

CUMBERLAND

ESSEX

GLOUCESTER

HUDSON

HUNTERDON

MERCER

MIDDLESEX

MONMOUTH

MORRIS

OCEAN

PASSAIC

SALEM

SOMERSET

SUSSEX

UNION

WARREN

STATEWIDE

OUT OF STATE



Section II: Level of Service Report

Part 1. Your primary unit of service is pre-selected.

Section II: Level of Service Report ▾

Part 1: Individuals or Families Served

NOTE: In order to standardize measurement within service areas, your program was assigned to report on either Individuals or Families based on conversations with DCF Program Leads and Contracting.

1. Does this program primarily serve INDIVIDUALS or FAMILIES?

Individual

2. Was this program operating in February 2019? *

| | |
|--------------------------------------|--------------------------|
| <input checked="" type="radio"/> Yes | <input type="radio"/> No |
|--------------------------------------|--------------------------|

3. Before the pandemic, how many individuals did this program TYPICALLY serve in the month of February? *

4. How many individuals did this program ACTUALLY serve in February 2025? *



Part 2. Operational Capacity

This section will automatically calculate your operational capacity for this month based your responses in questions 3 and 4.

Part 2: Operational Capacity

Program's Operational Capacity: Ratio of ACTUALLY served to TYPICALLY served in the month



Operational Capacity (%)

104

Operational Capacity Category

At Capacity 80%-120%



Section II: Level of Service Report

Part 3. Referrals and Discharges

Section II: Level of Service Report ▾

Part 3: Referrals and Discharges

Please report referrals and discharges for either individuals or families based on your selection in question 1.

5. Did this program receive new REFERRALS in February 2025? *

If this program does not receive referrals, please select "Not Applicable".

Yes

No

Not Applicable

6. How many new REFERRALS did this program receive in February 2025? *

Please enter individuals or families.

123

7. Were individuals or families DISCHARGED from this program in February 2025? *

If this program does not discharge individuals or families, please select "Not Applicable".

Yes

No

Not Applicable

8. How many individuals or families were DISCHARGED from this program in February 2025? *

123



Section II: Level of Service Report

Part 4: Report on any events held this month.

Section II: Level of Service Report ▾

Part 4: Events

9. Did this program hold any EVENTS in February 2025?

For example, Events may include: large zoom calls, outreach activities, etc.

Yes

No

Not Applicable

9A. How many EVENTS did this program hold in February 2025?

123

Part 5: Report on your staffing for this month.

Section II: Level of Service Report ▾

Part 5: Staffing

10. How many STAFF worked for this program in February 2025?

Please include all active staff (i.e., full-time, part-time, per diem) whose time is charged directly to the program budget. Please do not include staff on leave. Leave blank if Unknown.

123



NEW JERSEY DEPARTMENT OF
CHILDREN AND FAMILIES

Submitting Your Report

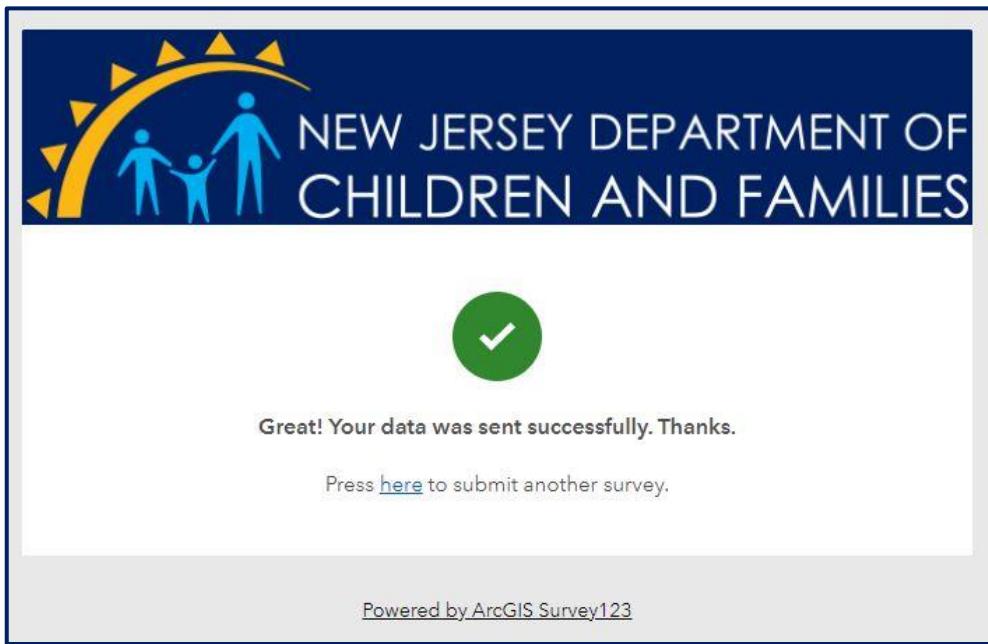
Thank you for completing the February 2025 DCF Service Report,
please click submit.

Please Note: After submitting the Service Report, you will NOT receive a confirmation email.

Submit

Submitting an Additional Report for your Program

To complete another report for a different program, please click on the link pictured below to begin a new report.





Frequently Asked Questions

All questions regarding the Service Report should be submitted to the DCF Helpdesk at njspirithelpdesk@DCF.NJ.GOV. Please include "Service Report" in the subject line of the email to ensure a prompt response. Please refer to the following Frequently Asked Questions **before** submitting a question to the DCF Helpdesk.

General/Technical Questions

1. My survey is not loading when I click on the link.

Please ensure you are using the following link for the Service Report: <https://arcg.is/1ffDSu3>. Also, please ensure you are using **Google Chrome** to access the webpage.

2. Can our program have an extension to complete the Service Report?

No, please complete the Service Report no later than 5 p.m. on Tuesday, April 8th, 2025.

3. Does the person completing the report need to have a user ID and password established?

No, usernames or passwords are **not** required to complete the Service Report at this time. Please ensure the designated reporter uses the following link for the Service Report: <https://arcg.is/1ffDSu3>.

4. Will there be agency- or program-specific links sent to each reporter?

There are no agency- or program-specific links. All agencies and programs will receive the same link to complete the report. The individual completing the report will select their agency and program name as part of the report.

5. Do we need any special software on the computer in order to use the link? (e.g., Citrix for NJ Spirit Ext)

No, special software is **not** needed to complete the report however, **Google Chrome is the preferred browser**.

6. Can we get a copy of the report that we submit? Will we be able to print/save the Service Report?

At this time, the reporting platform does **not** support printing or saving submitted reports.



7. How is this information different than the information I provide to my DCF Program Lead?

This Service Report allows DCF to obtain consistent information across all direct service cost reimbursement programs. This report is contractually required for all direct service cost reimbursement providers. The Service Report does **not** replace any existing reporting required by DCF. You must continue to submit all other reports.

8. What should I do if I accidentally submitted two surveys for my program?

Please provide the following information to the DCF Help Desk at njspirithelpdesk@DCF.NJ.GOV to assist with removing your duplicate submission: Program Name, Agency Name, and person completing the service report.

9. I made a mistake in my submitted Service Report. Can I resubmit?

Please re-submit and provide the following information to the DCF Help Desk at njspirithelpdesk@DCF.NJ.GOV to assist with removing the erroneous data submission: Program Name, Agency Name, person completing the service report and date of previous submission to be removed.

10. Will I get a confirmation email that I have completed the Service Report?

No, a confirmation email will not be sent after a Service Report is submitted. Programs that have not completed the Service Report will be notified by DCF Contracting staff.

Programmatic/LOS Questions

11. Why can't I find my program listed in the drop-down list under "Program Name" in the Service Report?

The programs in the "Program Name" drop-down list meet the criteria for Direct Services Cost Reimbursement Contracts. If you cannot find your program name, it could be due to the following:

- 1) Your program is listed under a different name. Please double check the drop-down list for your program name.
- 2) Your program is not required to complete a Service Report.

12. Who should complete the Service Report from my agency? Can multiple individuals be included? For instance, a director of multiple programs and program managers.

Agencies leaders (CEO/Executive Director) received an email in early November 2020, which included a list of each DCF contracted program for which a Monthly Service Report needs to be completed. At that time, the agency leader was given the opportunity to designate themselves or assign staff to complete the Service Report for each program. The same person may have been assigned to complete more than one program Service Report. Please check with your agency leader to determine who has been assigned to complete a program Service Report.



13. My agency holds contracts for multiple programs of the same type (e.g., Family Success Centers). Can one report be completed for all of the same programs, or do they need to be completed individually?

A separate Service Report will need to be completed for each individual program listed in the "Program Name" drop-down list. For example, if your agency oversees two Family Success Centers, you should complete two separate reports – one for each Family Success Center.

14. My program serves both individuals and families. Why is only one unit selected?

In order to standardize measurement within service areas, your program was assigned to report on either Individuals or Families based on conversations with DCF Program Leads and Contracting. Please contact the DCF Help Desk at njspirithelpdesk@DCF.NJ.GOV if you have additional questions. Please add "Service Report" in the subject line of the email to ensure a prompt response.

15. I would like someone else to complete the Service Report for my program, how can I ensure that happens?

The agency leader (CEO/Executive Director) was given the opportunity to designate themselves, or assign staff, to complete the service report for each program. Only agency leaders (or a designee as long as the agency leader is copied) can notify DCF to change the designated Service Report contact person. An email request must be submitted to DCF no later than the 2nd Friday of each month to Officeof.ContractAdministration@DCF.NJ.GOV. Enter "Service Report Contact" in the Subject Line and include the First Name, Last Name, Email Address, Contract Number and Program Name. These updates will be made for the report that goes out at the end of the month. Any updates that are received after the 2nd Friday of the month will not be incorporated in the same month but will be reflected in the following month.

16. I would like someone else to receive emails and updates about the Service Report.

DCF sends the Service Report link to the agency leader (CEO/Executive Director) and the individual that has been assigned by the agency leader to complete one or more Service Report. The agency leader was given the opportunity to designate themselves, or assign staff, to complete the service report for each program. If an agency wants to update the person designated to complete a Service Report, only the agency leader or a designee as long as the agency leader is copied, can notify DCF to change the designated Service Report contact person. An email request must be submitted to DCF no later than the 2nd Friday of each month to Officeof.ContractAdministration@DCF.NJ.GOV. Enter "Service Report Contact" in the Subject Line and include the First Name, Last Name, Email Address, Contract Number and Program Name. These updates will be made for the report that goes out at the end of the month. Any updates that come in after the 2nd Friday of the month, will not be incorporated in the same month but will be reflected in the following month.



17. Will the report be set up in such a way that we can report on unduplicated clients?

When reporting the number of individuals or families served, please provide unduplicated counts for the month unless otherwise specified for your program in the "Program-Specific Guidance for Completing the Service Report" section of this guide.

18. Will we need to complete our regular monthly report in addition to the Service Report?

Yes. The Service Report does **not** replace any existing reporting required by DCF.

19. My program does not receive referrals. How do I answer that question?

If your program does not receive new referrals, please select "Not Applicable" for this question. Please refer to the "Program-Specific Guidance for Completing the Service Report" section of this guide for more information for select programs.

20. My program does not discharge individuals or families. How do I answer that question?

If your program does not discharge individuals or families, please select "Not Applicable" for that question. Please refer to the "Program-Specific Guidance for Completing the Service Report" section of this guide for more information for select programs.

21. What is considered an event? Do I need to answer that question?

Certain programs conduct events as part of their service delivery. For this question, please select "yes" if events are typically conducted in your program and one or more occurred during the reporting period; select "no" if events are typically conducted but none occurred during the reporting period; and select "not applicable" if events are not conducted as part of this program. An event would be any larger scale activity involving many participants. It can be an in-person or virtual event. A smaller group session would not be considered an event, and individuals or families who participate in group sessions should be counted in the number of individuals or families served.

22. Do I need to report on my programs contracted level of service?

At this time, the Service Report does not require programs to report their contracted level of service. Please continue to report your actual level of service in the appropriate section.



Program-Specific Guidance for Completing the Service Report

Providers should follow the guidance below when completing the report for their specific programs. The guidance will be updated with new programs periodically. Guidance is currently provided for the following programs:

- Abuse Intervention Programs (AIP)
- Displaced Homemaker Services
- Domestic Violence Liaisons (DVL)
- Domestic Violence Services
- Family Success Centers (FSC)
- Home Visitation Programs (HF-TIP, HIPPY, NFP and PAT)
- Peace: A Learned Solution (PALS)
- School-Based Youth Services (SBYS)
- Sexual Violence Direct Services
- Sexual Violence Prevention Services
- Substance Abuse Treatment Services
- Visitation Programs

Abuse Intervention Programs (AIP)

| | |
|--|--|
| Primarily serves (pre-selected unit): | Individuals |
| ACTUAL individuals served: | # of batterers who participated in individual and/or group sessions during the identified month |
| New referrals: | # of new, unduplicated individuals who were referred to the program during the identified month |
| New discharges: | # of individuals who successfully completed the program or left the program for any other reason during the identified month |

Displaced Homemaker Services

| | |
|--|--|
| Primarily serves (pre-selected unit): | Individuals |
| ACTUAL individuals served: | # of duplicated individuals who received one or more of the following services in the identified month: employment-based services, job readiness and career counseling, short-term educational certifications, computer and financial literacy training or workshops in an in-demand field, as determined by the federal Department of Labor |
| New referrals: | Not applicable |
| New discharges: | Not applicable |



Domestic Violence Liaisons (DVL)

| | |
|--|---|
| Primarily serves (pre-selected unit): | Individuals |
| ACTUAL individuals served: | # of non-offending parents who participated in a domestic violence assessment during the identified month |
| New referrals: | # of new, unduplicated individuals referred for a domestic violence assessment, safety planning, domestic violence education, confidential contact, home visits and/or family team meetings during the identified month |
| New discharges: | Not applicable. Individuals are not discharged from this program. |

Domestic Violence Services

| | |
|--|--|
| Primarily serves (pre-selected unit): | Individuals |
| ACTUAL individuals served: | # of duplicated new and ongoing victims served through emergency shelter and support and non-residential support (counseling and advocacy) in the identified month |
| New referrals: | # of calls into the domestic violence hotline (duplicated) |
| New discharges: | # of individuals whose services with the agency end and information and referrals are provided |

Family Success Centers (FSC)

| | |
|--|--|
| Primarily serves (pre-selected unit): | Families |
| ACTUAL families served: | # of unduplicated, registered, AND nonregistered families who participated in either individual or group services in the identified month. A family can be any size. The number of events (large-scale activities) should be reported separately when asked. |
| New referrals: | # of new families (registered or unregistered) who engage in services in the identified month who were not previously registered or previously engaged in services within the last 12 months. |
| New discharges: | Not applicable |



Home Visitation Programs including:

- Healthy Families (HF-TIP)
- Home Instruction for Parents of Preschool Youngster (HIPPY)
- Nurse Family Partnership (NFP)
- Parents as Teachers (PAT)

| | |
|--|--|
| Primarily serves (pre-selected unit): | Families |
| ACTUAL families served: | # of families that had at least one home visit (in-person or virtual) during the identified month. For HF-TIP and NFP, please refer to <u>Column F</u> in your monthly census. For PAT, please use <u>Column G</u> in your monthly census. |
| New referrals: | # of new families referred to the program during the identified month. Please refer to <u>Column E</u> in your monthly census. |
| New discharges: | # of families that exited the program during the identified month. Please refer to <u>Column M</u> in your monthly census. |

Peace: A Learned Solution (PALS)

| | |
|--|---|
| Primarily serves (pre-selected unit): | Individuals |
| ACTUAL individuals served: | # of children who participated in individual and/or group counseling sessions in the identified month |
| New referrals: | # of new, unduplicated children referred to the program in the identified month |
| New discharges: | # of children who successfully completed the program or left the program for any other reason during the identified month |



School-Based Youth Services (SBYS)

| | |
|--|---|
| Primarily serves (pre-selected unit): | Individuals |
| ACTUAL individuals served: | # of unduplicated individuals (students) who participated in either individual or group services. The number of events (assemblies or other large-scale activities) should be reported separately when asked. |
| New referrals: | # of new students who engaged in services in the identified month. This should only include students with no previously signed consent form on file with the program throughout their educational career. |
| New discharges: | # of students who graduate, move away or transfer to another school during the identified month. |

Sexual Violence Direct Services

| | |
|--|---|
| Primarily serves (pre-selected unit): | Individuals |
| ACTUAL individuals served: | # of unduplicated new and ongoing victims served through counseling and accompaniments in the identified month. |
| New referrals: | # of calls into the sexual violence hotline (duplicated) |
| New discharges: | # of individuals whose services with the agency end and information and referrals are provided |

Sexual Violence Prevention Services

| | |
|--|---|
| Primarily serves (pre-selected unit): | Individuals |
| ACTUAL individuals served: | # of unduplicated individuals who received curriculum implementation during the identified month |
| New referrals: | # of new unduplicated individuals receiving curriculum implementation during the identified month |
| New discharges: | # of unduplicated individuals that successfully completed 7-9 sessions (doses) and both a pre-and post-test during the identified month |



Substance Abuse Treatment Services

| | |
|--|--|
| Primarily serves (pre-selected unit): | Individuals |
| ACTUAL individuals served: | # of parents/caregivers who completed a substance use disorder assessment in the identified month |
| New referrals: | # of parents/caregivers referred for a substance use disorder assessment in the identified month |
| New discharges: | # of parents/caregivers who meet agency's discharge criteria which may include: completed assessment, closed referral, entered treatment, did not follow through on treatment recommendations, or for any other reason during the identified month |

Visitation Services

| | |
|--|---|
| Primarily serves (pre-selected unit): | Families |
| ACTUAL families served: | # of families who participated in at least one visit or intake assessment during the identified month |
| New referrals: | # of new, unduplicated families referred to the program during the identified month |
| New discharges: | # of families whose involvement with the program ended during the identified month |