



**NEW JERSEY DEPARTMENT OF CHILDREN AND FAMILIES**

# **Quality Standards for DCF Providers**

Presented by the Department of Children and Families

August 29, 2022

# Today's Agenda

- Purpose of Quality Standards
- Journey to the Quality Standards for DCF Providers
- Alignment with Quality Standards for DCF Providers
- Overview of the AAAQ Framework
- Overview of the Quality Standards for DCF Providers
- Next Steps



# Purpose of Quality Standards



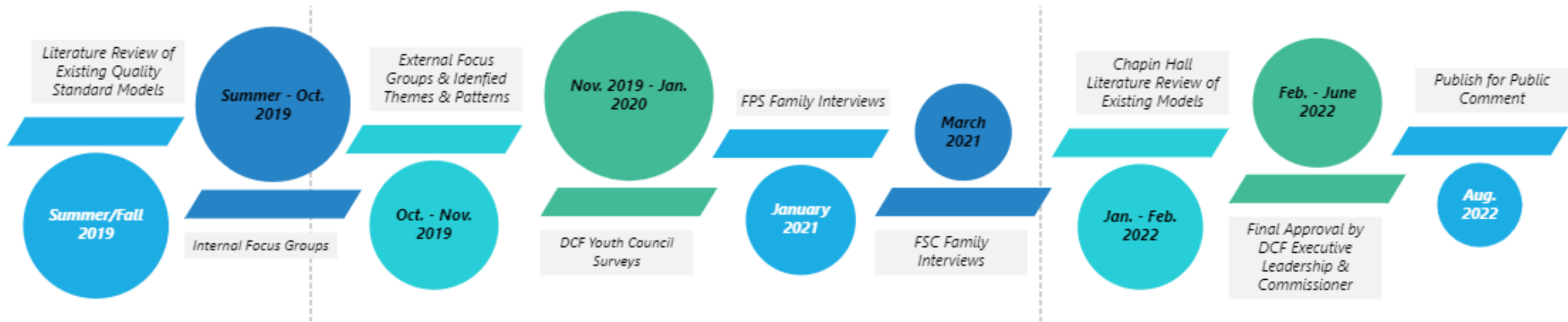
# **The Journey to Quality Standards for DCF Providers**



# Quality Standards for DCF Providers



# Development Timeline for Quality Standards



DCF Values

## Quality Standards

System of Care  
Values &  
Principles

Preventive  
Standards

Standards for  
Domestic  
Violence

# AAAQ Framework

- **Availability** – There is a sufficient quantity of services to meet the need.
- **Accessibility** – Ensures that people can interact with or use the services provided. Comprised of several components such as physical, financial, bureaucratic, social, and information accessibility.
- **Acceptability** – Services respect the culture of individuals, minorities, peoples, and communities and are sensitive to gender and life-cycle requirements.
- **Quality** – Ensures providers possess the necessary skills and training for service provision.





# Quality Standards for DCF Providers



# Availability: Standards 1.1 and 1.2

## Domain 1: Availability

Providers make every effort to ensure that programs operate according to the capacity and length of service described in the contract. Providers strategically coordinate with other service providers or service lines available to the program participant(s), in order to ensure that services are not duplicated.

### Standard 1.1: Adherence to Appropriate Intake and Utilization Criteria

Providers use an established process to gather necessary information to understand program participants' needs and to ensure program participants meet eligibility criteria, if applicable.

### Standard 1.2: Building Relationships Across Service Networks

All Providers delivering DCF purchased services will work toward building collaborative relationships and partnerships across agencies and programs that provide quality services to the same program participants and communities. Providers will apply team approaches to supplemental service delivery and prioritize the holistic needs of program participants and their families.



# Accessibility: Standards 2.1 and 2.2

## Domain 2: Accessibility

Providers ensure programs are delivered in a manner that maximizes participant engagement, and they take proactive steps to remove barriers to accessing services.

### Standard 2.1: Understanding Barriers to Access

Providers will engage in ongoing efforts to understand participant barriers to access for the service provided (e.g., language, transportation, hours of operation, limited office locations, signage, digital accessibility, physical accessibility). Providers will also communicate information about barriers to access with DCF in order to strengthen system collaboration in meeting the needs of New Jersey residents.

### Standard 2.2: Addressing Barriers to Access

Providers will implement strategies to ensure that agency policies, procedures, and service delivery practices promote equitable access and minimize barriers to service, as much as possible. Providers will assess and address any access obstacles, i.e., digital accessibility, transportation, etc.



# Accessibility: Standards 2.3 and 2.4

## Domain 2: Accessibility

Providers ensure programs are delivered in a manner that maximizes participant engagement, and they take proactive steps to remove barriers to accessing services.

### Standard 2.3: Linguistic Accessibility

All providers delivering DCF purchased services will make concerted efforts to understand the linguistic diversity of the program participants they serve. Providers should make reasonable efforts to anticipate and meet the needs of non-English speakers when delivering services, including hiring multilingual staff members that reflect the population(s) of participants.

### Standard 2.4: Bureaucratic/Administrative Accessibility

Providers support program participants in any procedural steps that must be completed before accessing services, such as completing required forms, obtaining legal documents, etc. Providers assess and support participants to mitigate any access obstacles to completion of these processes, and directly support program participants that struggle with literacy and/or numeracy.



# Accessibility: Standard 2.5

## Domain 2: Accessibility

Providers ensure programs are delivered in a manner that maximizes participant engagement, and they take proactive steps to remove barriers to accessing services.

### Standard 2.5: Social Accessibility

Providers remain sensitive to the potential of stigma for program participants enrolled in certain services and take pro-active steps to provide an emotionally and physically safe environment and experience for them. Providers will ensure that staff do not discriminate against program participants that are involved in multiple systems (e.g., criminal justice, child protection, substance use disorder treatment, etc.).



# Accessibility: Standard 2.6

## Domain 2: Accessibility

Providers ensure programs are delivered in a manner that maximizes participant engagement, and they take proactive steps to remove barriers to accessing services.

### Standard 2.6: Information Accessibility

Providers continually seek to understand how potential service recipients can obtain information about services in the manner and at the time that is the best fit for them. Providers actively disseminate information about services and community partnerships to the community in various languages, formats, and modalities, and provide materials in accessible reading levels or alternatives to printed information to reach members of the community with limited literacy.



# Acceptability: Standard 3.1

## Domain 3: Acceptability

The supports provided to the program participants are family centered, holistic, tailored, culturally responsive, and collaborative.

### Standard 3.1: Centering Participants

Providers will ensure delivery of service in a manner such that the perspectives, beliefs, needs, and goals of constituents are what drive the policies, procedures, and practices of the program.



# Acceptability: Standard 3.2

## Domain 3: Acceptability

The supports provided to the program participants are family centered, holistic, tailored, culturally responsive, and collaborative.

### Standard 3.2: Culturally Responsive

Providers will provide culturally responsive services that are driven by an understanding and respect for the individuality of program participants, their families, the communities in which they reside, and in consideration of current events that may adversely impact that community. Providers should work proactively to assess the cultural backgrounds of the community and program participants and develop practices and procedures to welcome and effectively serve participants accordingly. Providers will actively examine cultural assumptions on the part of staff that may negatively impact the effectiveness of services. Providers make every effort to employ staff members that are representative of the community served.





# Acceptability: Standards 3.3 and 3.4

## Domain 3: Acceptability

The supports provided to the program participants are family centered, holistic, tailored, culturally responsive, and collaborative.

### Standard 3.3 Adherence to Relevant Ethical and Professional Standards

Provider staff keep up to date on and adhere to relevant ethical and professional standards.

### Standard 3.4 Respect for Confidentiality

Providers respect program participants' need for confidentiality with regard to receipt of services, and proactively safeguard participants' personal information. If necessary, providers will provide confidential spaces for service delivery.



# Acceptability: Standard 3.5

## Domain 3: Acceptability

The supports provided to the program participants are family centered, holistic, tailored, culturally responsive, and collaborative.

### Standard 3.5 Sensitivity to Gender, Age, Race, Ethnicity and Sexual Identity

Providers routinely examine the gender, age, race, ethnicity, and sexual identity of the target population for their programs. Providers use such understanding to routinely review the extent to which their services are disproportionately reaching only certain racial, ethnic, age, gender, or other groups. Providers proactively take steps to ensure that their programs are welcoming for and effective with program participants regardless of gender, age, race, ethnicity, and sexual identity.



# Quality: Standards 4.1 – 4.3

## Domain 4: Quality

Providers ensure that services adhere to required models, that staff possess the skills necessary to provide excellent service, and that program participants are treated fairly.

### Standard 4.1: Standards

Services are provided with high adherence to service models and requirements as articulated in the contract.

### Standard 4.2 Skills

Staff implementing services have the knowledge, skills, and competencies necessary to adequately deliver the program model as intended.

### Standard 4.3: Participant Experience

Every program participant is treated with dignity, respect, and care during every interaction with the program.



# Next Steps

- Aug. 22, 2022: DCF will publish the Quality Standards for public comment
  - Public comment period will end by Sept. 21, 2022; send comments to [dcf.monitoring@dcf.nj.gov](mailto:dcf.monitoring@dcf.nj.gov)
- Continued crosswalk of Quality Standards and provider contracts to ensure consistency
- In 2023, launch monitoring for Family Preservation Services & Direct DV Services with Quality Standards for DCF Providers embedded



# Questions & Answers



# Thank you!

Kindly send comments and/or questions to  
[DCF.Monitoring@dcf.nj.gov](mailto:DCF.Monitoring@dcf.nj.gov)

