STAFFING AND OVERSIGHT REVIEW SUBCOMMITTEE

Suzanne Kreie, Chair
Lisa Chapland, Co-Chair

"In compliance with Chapter 231 of the Public Laws of 1975, notice of this meeting was given by way of public posting on the New Jersey Task Force on Child Abuse and Neglect website: DCF | New Jersey Task Force on Child Abuse and Neglect (NJTFCAN)."
**Please note the meeting was recorded for the transcription of minutes.*

SORS meeting minutes
July 14, 2026

Attendance

Members

- Suzanne Kreie, Coordinated Family Care
- Lisa Chapland, Relative Resource Parent
- Marygrace Billek, Public Member
- Clinton Page, Department of Children and Families
- Mary Coogan, Advocates for Children of New Jersey
- Lynette Rente, Office of the Public Defender
- Linda Porcaro, Somerset County Office of Youth Services
- Traci Telemaque, Office of the Public Defender
- Angie Waters, CASA NJ
- Elizabeth Sherwood, Division of Law
- Amanda Melillo, New Jersey Legislature
- Iesha Hammons, Legal Services of New Jersey
- Randi Mandelbaum, Rutgers Law School
- Samantha Muller, Public Member

Guests

- Joseph Ribsam, Commissioner, Department of Children and Families
- Emily Douglas, Montclair State University
- Svetlana Shpiegel, Montclair State University
- Wendy Zeitlin, Montclair State University
- Jamie Buren, Montclair State University
- Mike Hutcheon, Montclair State University
- Brian Hampel, Public Guest

Staff

- Bethany D'Amelio, Department of Children and Families

Approval of Prior Meeting Minutes

The facilitator noted that minutes from two prior meetings were included in the meeting packet because the May meeting minutes had not been available for approval at the previous meeting.

The Subcommittee first reviewed the May 12, 2026 meeting minutes. A motion was made and seconded to approve the minutes. Abstentions were noted. The May 12, 2026 meeting minutes were approved.

The Subcommittee then reviewed the June 9, 2026 meeting minutes. A motion was made and seconded to approve the minutes. Abstentions were noted. The June 9, 2026 meeting minutes were approved.

MSU, MOU update

MSU has reviewed the proposed MOU and unofficially agreed to the parameters. It is not with DCF; once signed by DCF MSU will sign.

September in-person SORS meeting

Will plan to meet in-person for a full-day meeting on September 10, 2026, at Coordinated Family Care in North Brunswick, NJ.

2025 Data Annual Report Update

Pillar 1:

Discussion of Child Protection Intake, Assignment, and Investigation Timeliness

The Subcommittee reviewed measures related to the time from initial intake through assignment and investigation. The discussion addressed the process by which reports accepted by the State Central Registry are assigned to local offices and field staff.

It was explained that when a report is accepted for response, assignment from the hotline to the field occurs immediately through the local office structure. However, the required timeframe for field response depends on how the report is coded. Some reports require an immediate response, while others may be coded for response within different timeframes, such as 24 hours or 72 hours. Members discussed the importance of distinguishing

between immediate assignment to the field and the response timeframe required based on the nature and urgency of the allegation.

A question was raised regarding whether a decline in reports or allegations reflects successful prevention efforts, changes in reporting behavior, or another factor. It was clarified that the specific measure under discussion reflected reports accepted for response and assignment, rather than overall trends in public reporting behavior or prevention effectiveness. Members acknowledged that broader interpretation of declining reports would require additional data and analysis.

The Subcommittee reviewed an expanded set of measures under the safety pillar. These included time from intake to investigation, investigation completion timeliness, whether children remained in their homes or received out-of-home services, and in-home visitation. The review noted that the current report included more measures than prior reporting cycles.

The data reviewed indicated that New Jersey continues to screen in a high percentage of reports accepted for response, with approximately 99 percent of applicable calls screened in. The number of allegations and children involved in such cases has decreased over time, although the total number of children involved remains substantial. The data also showed that assignment and investigation timeliness remain high overall, while investigation completion timeliness has decreased compared with prior years.

Discussion of Investigation Quality and Qualitative Review

Members discussed the difference between timely completion of child protection activity and the quality of that activity. It was noted that timeliness has historically been an area where the agency performs strongly, and quality remains an ongoing focus for review. The Subcommittee discussed the importance of examining whether investigations are not only timely, but also thorough, family-centered, and effective in assessing safety.

The Subcommittee discussed the Comprehensive Quality Improvement, or CoQI, process as a source of qualitative information. It was explained that CoQI reviews use samples of cases and examine questions such as whether the investigation was of sufficient quality, whether the family was engaged, what the outcome was, and whether practice expectations were met. Members noted that these qualitative reviews are important because aggregate measures alone do not fully explain the experience of children and families or the effectiveness of practice.

The Subcommittee also discussed prior qualitative research and review efforts that included narrative information and lived experience. Members observed that qualitative data can provide context that numbers alone cannot provide, including family perceptions, engagement, and the experience of navigating the child protection system. It was also noted that the Subcommittee has a responsibility to assess whether the Department has internal systems in place to review and analyze its own performance.

The Subcommittee acknowledged that CoQI information for the current reporting cycle was not yet available. Members anticipated that once the CoQI materials are completed, they will be incorporated into the report and discussed at a future meeting, likely during an in-person meeting in September.

Pillar 3:

Review of In-Home Services and Visitation

The Subcommittee reviewed measures related to children remaining safely in their homes and receiving in-home services. The data were described as stable over time, with limited variation. Members noted that this stability suggests continued provision of services to children and families in their homes when appropriate.

The Subcommittee also reviewed in-home visitation data. The data showed that approximately 93 percent of children served in the home had at least one visit per month. This reflected an increase from approximately 92 percent in 2024 and 89 percent in 2023. Members noted this as a modest improvement in monthly caseworker visitation for children receiving in-home services.

Key takeaways from the safety discussion included the following:

- Demographic patterns remained relatively stable across the reviewed years.
- Reported allegations declined.
- Timeliness of assignment and investigations remained high.
- Investigation completion timeliness declined compared with prior years.
- Response times continued to compare favorably with national averages.
- In-home visitation showed slight improvement.
- Additional qualitative data will be needed to assess practice quality and family engagement more fully.

Review of Well-Being Measures for Children in Out-of-Home Care

The Subcommittee reviewed eight well-being measures for children and youth in out-of-home care. The discussion focused on healthcare services, medical examinations, mental health screenings, immunization reviews, education-related data, and outcomes for older youth.

The first broad category reviewed was whether children and youth in out-of-home care receive regular healthcare services including a pre-placement medical assessment and comprehensive medical exam within thirty days of placement. This data point has been consistent over the past few years but remains lower than other metrics observed. Members discussed several measures related to children entering or residing in out-of-home care including annual medical exams, and semi-annual dental exams.

Mental Health Screening

A significant portion of the discussion focused on mental health screening. Members asked what a mental health screening consists of, whether it is standardized, who conducts it, and whether the data show only that screenings occurred or also whether children received needed services.

It was explained that children entering out-of-home care are expected to receive a mental health screening by a qualified professional. Such screenings include learning about the child's history, identifying trauma-related concerns, and determining whether there is a mental health need requiring attention. If a need is identified, children may become eligible for ongoing mental health screening or follow-up.

Members expressed concern that screening data alone do not show whether a child actually received services, whether the child was found eligible for services, whether services were timely, or whether services were effective. It was emphasized that current data capture whether screenings or referrals occurred but do not necessarily capture the full service pathway after screening.

Members also discussed whether the screening tool is standardized, what questions are asked, what criteria are used, and whether the screening is conducted by child health unit nurses, the child behavioral health system, or another qualified professional. Agency representatives indicated that additional information would be needed to answer these questions fully, including more detail about where the data are drawn from and how the screening process is documented in agency systems.

Several members emphasized the importance of understanding the distinction between:

- A screening being completed;
- A need being identified;
- A referral being made;
- A child being found eligible for services;
- Services actually being delivered; and
- Services being effective.

The Subcommittee agreed that this distinction is important for public understanding and for meaningful system oversight.

Immunization Record Reviews and Health-Related Follow-Up

The Subcommittee reviewed immunization record review data. The data were described as relatively stable, with more than 90 percent of children receiving immunization record reviews over the last three years. Members noted that there had been small increases and decreases across years, but the overall pattern remained stable and indicated that the overwhelming majority of children were receiving these reviews.

A question was raised about whether records review findings are communicated back to the Division when a child is found to need services, such as updated immunizations or other health-related follow-up. Members asked whether the review process functions only as a retrospective performance measure or whether it also supports real-time identification of needs.

It was explained that the quality review process includes mechanisms to report urgent or safety-related concerns when they are identified. Members also discussed that some reviews are conducted through child health units, including nurses who consult on cases regularly. However, additional detail is needed regarding the specific data source, whether the information is entered in the case management system, and whether timeliness standards affect whether the activity is counted for reporting purposes.

Members underscored the importance of understanding whether health-related findings are acted upon in real time for children currently in care, as opposed to being identified only during later review.

Education Data and Older Youth Outcomes

The Subcommittee discussed education-related measures for children in out-of-home care and older youth transitioning from foster care. It was noted that certain education and employment measures rely on CoQI data, which were not yet available. As a result, those data could not be presented during the meeting. Members anticipated that pending education and employment information would be reviewed at a later meeting once the data are available.

The Subcommittee also discussed outcomes for youth ages 18 to 21 who are aging out of the foster care system. Members reviewed the use of the National Youth in Transition Database as a source of information on older youth outcomes. It was explained that the database establishes cohorts of youth approximately every three years and collects outcome information at ages 17, 19, and 21. The database also includes information about independent living services provided to older youth in care, although the meeting discussion focused primarily on outcomes.

Members noted that older youth outcomes remain an important expansion area for the Subcommittee. The purpose of reviewing these data is to better understand how youth fare as they transition from foster care into adulthood, including areas such as education, employment, housing, and overall stability. Additional Department data collected through quality improvement processes will be reviewed when available.

Public Comment

The meeting included public comment from a member of the public who raised concerns about individual case practice, access to records, complaint processes, case planning, and alleged retaliation. The public commenter described concerns about the transmission of records to a regional diagnostic treatment center when a forensic evaluation is to occur, the need for written case planning and clear discharge criteria understood by family members, and the need for meaningful oversight.

The public commenter also requested a clearer complaint process and described difficulty identifying an independent process for raising concerns. The commenter stated that the case had remained open for an extended period and expressed concern that efforts to raise issues through existing channels had not resulted in resolution. The commenter requested protection from retaliation and access to a process through which concerns could be heard and addressed.

The Subcommittee received the public comment. The issues raised highlighted the importance of transparency, accessible complaint processes, clear communication with families, complete record transmission, and meaningful oversight mechanisms.

This memo aims to maintain transparency and provide the public with an overview of the task force's recent deliberations. The committee values community input and engagement as we collectively strive to enhance the welfare of children and families across New Jersey. This meeting report was prepared, in part, with the use of Artificial Intelligence (AI).

For further information or queries, the public can reach out via the contact channels provided by the Department of Children and Families.