



State of New Jersey

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April 4, 2019

Title: Prevention Services Data Collection
OMB No.: 0970-NEW
Office of Planning, Research and Evaluation
Administration for Children and Families
United States Department of Health and Human Services
330 C Street SW
Washington, DC 20201
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Attn: ACF Reports Clearance Officer:

New Jersey appreciates the opportunity to review and provide comments on the Proposed Information Collection Activity for the Prevention Services Data Collection that was published in the Federal Register on February 4, 2019.

New Jersey has identified several questions and comments regarding the data collection and draft element collection tool.

INFORMATION TECHNOLOGY (IT) AND REPORTING

New Jersey SACWIS/CCWIS system captures some of the identified information which is reported in AFCARS and NCANDS. To avoid duplication of work, New Jersey requests that consideration be given to jurisdictions who will have the ability to utilize AFCARS and NCANDS reporting for data collection as opposed to a separate data collection tool.

For those elements not captured by SACWIS/CCWIS, New Jersey has estimated a moderate change to the system. This estimate could change depending on clarification and guidance received on the proposed areas identified in the questions section.

Estimated System Change Level of Effort: Moderate 6-10 weeks

Analysis and Testing	Development	NJOIT Capacity
4-8 weeks	4-6 weeks	4-6 weeks

Modifications to the SACWIS/CCWIS system will have a ripple effect on other reporting systems regardless of the level of effort change. This may include re-writing of codes and mapping documents for AFCARS, NCANDS and NYTD and revision of New Jersey's SafeMeasures case management reporting system. This case management reporting system is contracted with a third-party vendor and modifications will delay other competing prioritized work in the queue.

In addition, New Jersey anticipates that with any system change or modification, there may be a need to amend policy and/or construct/implement a professional development plan. New Jersey cannot estimate at this time the level of effort to other reporting systems or professional development plan without guidance on the questions below to determine impact of change.

QUESTIONS

New Jersey requests clarity and/or guidance on the FFPSA Draft Element List identified in the collection tool:

- Clarity is requested on all variable drop-down items
- Child Identifier: can/will this be consistent with what is reported in AFCARS/NCANDS/NYTD
- Type of Service: will this only be limited to mental health, substance abuse and parenting or will there be other variables
- Service Start Dates: what will be the mechanism for tracking multiple services received by the same child, for child level data- will this require multiple repeated rows for each service
- Service Start and End Dates: what will be the instruction for services that are delivered in consecutive 12-month spells
- Cost of service: will this need to be an exact dollar amount, or an average cost

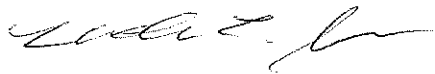
New Jersey also requests clarity/guidance on the following:

- Can jurisdictions use existing case plans as the child identified "Prevention Plan" or will it require a separate document?
- In a child level reporting file, how will jurisdictions capture information regarding evidence-based interventions which are directed at the parent or directed at the entire family system? For example:
 - For a circumstance in which a parent is receiving a parent-based clinical intervention (such as Motivational Interviewing), and the parent has multiple children, how will jurisdictions assign a cost per child for this parent-based service?
 - For a circumstance in which an entire family unit, with multiple children, is receiving a service in which the entire family unit is the "client" – such as FFT or MST:

- How will jurisdictions assign a cost per child for the intervention?
- Will the methodology be the same if one or more of the children is an infant, or not consistently residing in the same residence (i.e., due to split custody, temporary absence from the home due to hospitalization/incarceration/runaway spell), or is intellectually/ developmentally disabled such that s/he cannot directly participate in each session, but may benefit from the service as the family system around him/her changes due to the intervention?
- The Nurse Family Partnership Program eligibility criteria include that the mother be a first time mother in her first trimester of pregnancy, so that the service begins at least 6 months prior to the birth of any child. Therefore, no child is receiving the service for at least the first 6 months of the service delivery period. How will the report format be adjusted to allow for reporting if this service is approved for inclusion in the Clearinghouse?

New Jersey, like other states, is balancing multiple priorities currently identified by the Children's Bureau. While our estimation of burden and level of effort is moderate, we cannot complete a full evaluation at this time without further clarity/guidance. As noted, New Jersey recommends the use of AFCARS and NCANDS reporting elements as a way to minimize the burden of collection of information.

Sincerely,



Katherine L. Stoehr, MPA
Deputy Commissioner of Operations
New Jersey Department of Children and Families