

Family Preservation Services

Program Report | FISCAL YEAR 2022



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Executive Summary

Family Preservation Services

Fiscal Year 2022 Program Report

(July 1, 2021 to June 30, 2022)

Family Preservation Services is an intensive, in-home crisis intervention and family education program primarily used for families with children at imminent risk of abuse, neglect, or out-of-home placement. Other families eligible for FPS include ones preparing to be reunified with their children, and resource parents in need of assistance to stabilize children in their family's care. Referrals to FPS are made by NJ's Division of Child Protection and Permanency (DCP&P) local offices. Families remain under DCP&P supervision while receiving FPS services. The program's goals are to:

- Ensure the safety of children
- Stabilize families
- Improve family functioning
- Prevent unnecessary out-of-home placement and;
- Link families with appropriate community resources.

Families enrolled in FPS receive an array of services to meet their needs including a child and family assessment, skill-based interventions, counseling and related support, linkages to community resources, and limited financial assistance. Services typically are provided in the family's home and families participate voluntarily. FPS staff are available to families 24 hours a day, seven days a week for up to eight weeks. Interventions are intensive, providing each family five to twenty hours of direct face-to-face service per week, depending on the nature and severity of the situation and the family's presenting needs. All services build on family strengths and respond to family circumstances.

At the onset of the COVID-19 emergency, DCF temporarily relaxed usual operating requirements to permit flexibility in the service delivery modality that preserved quality of service for clients while promoting the ability of both clients and service providers to adhere to necessary social distancing practices. In FY21, FPS providers were instructed to resume in-person service delivery unless the family or individual receiving the service declined to accept in-person services. In those instances, remote services could be offered as an alternative.

The New Jersey Department of Children and Families (DCF) funds each county's FPS program. During Fiscal Year (FY) 2022:

- Contract funding for FPS services was nearly \$10 million dollars.
- Over 800 families with more than 1,800 children received FPS services.
- 48% of children who received FPS services were six years of age or younger.
- Among the families that completed the full FPS Program, 96% of children were able to remain safely in their home, avoiding the need for a child protective removal.
- 94% of children who received the full FPS Program were preserved in their home one year after discharge.

Despite the challenges of the COVID-19 emergency, New Jersey's Family Preservation Services succeeded in providing intensive support to families in crisis, so that child protection removals and foster care placements could be safely avoided, to the extent possible, and families could remain together while they work through struggles associated with poverty, behavioral and physical health, and other social and economic challenges.

FAMILY PRESERVATION SERVICES

Fiscal Year 2022 Program Report

(July 1, 2021 to June 30, 2022)

SECTION I: PROGRAM OVERVIEW

The New Jersey Department of Children and Families (DCF) funds Family Preservation Services (FPS) in each of the state's 21 counties. DCF contracts with eight community-based provider agencies, six of which operate programs in multiple counties. During Fiscal Year 2022, funding for FPS services was nearly \$10 million dollars.

THE FPS MODEL

Family Preservation Services (FPS) is an intensive, in-home¹ crisis intervention and family education program, primarily used for families with children at imminent risk of abuse, neglect, or out-of-home placement. Other families eligible for FPS include ones preparing to be reunified with their children and resource parents in need of assistance to stabilize children in their family's care.

FPS services are delivered by specially trained staff that provide a combination of counseling and concrete services to meet each family's needs. As specified in the enacting legislation (N.J.S.A. 30:4C-74), direct service staff carry a caseload of no more than two families at any time, except during the last week prior to discharging a family, at which time staff may begin work with a third family.

Services typically are provided in the family's home and in accordance with the established program model set forth in the New Jersey Family Preservation Services Manual and the enacting statute. Staff are available to families 24 hours a day, seven days a week for up to eight weeks. Program interventions are intensive, providing families no less than five and no more than 20 hours of direct face-to-face service each week depending on the nature and severity of their situation. More specifically:

- Initial visits with the family are conducted within 24 hours of referral, often in collaboration with the DCP&P case manager.
- Initial and final assessments of family functioning are conducted using the NCFAS².
- Goal-directed interventions are developed in consultation with the family and DCP&P to address the reason(s) for the risk determination and to identify services and/or activities.
- Using a behavioral/cognitive approach and building on family strengths, trained staff provide instruction and model skills to improve family functioning in areas including, but not limited to, parenting, stress management, communication, and crisis management.
- Concrete services are provided to families, as needed. Services may include, but are not limited to, emergency financial assistance, food, clothing, and transportation.
- Follow-up family evaluations are completed at three, six and 12-month intervals after discharge for families that received the full intervention (defined as 28 days or more of service).

¹ In response to COVID-19, FPS services have been delivered using a hybrid approach that includes both in-person and telehealth.

² The North Carolina Family Assessment Scale (NCFAS) is an assessment tool designed to examine family functioning in the domains of Environment, Parental Capabilities, Family Interactions, Family Safety, and Child Well-being. It has an A rating (psychometrics well-demonstrated) from the California Evidence-Based Clearinghouse for Child Welfare: <https://www.cebc4cw.org/assessment-tool/north-carolina-family-assessment-scale/>

SECTION II: SERVICE STATISTICS

This section provides aggregate data on program utilization rates and service delivery at each county-based site between July 1, 2021 to June 30, 2022.

REFERRALS

DCP&P is the sole referral source to FPS programs. Families are eligible for FPS when there is a presenting crisis that places at least one child at risk of abuse or neglect or a child protective removal, or when a child is returning home from out-of-home placement. Additional eligibility criteria include: the family is participating in an open DCP&P services case; the child can remain safely at home with intensive services; the family has agreed to participate; and other less intensive services will not sufficiently reduce the risk of removal or are unavailable.

FPS programs occasionally receive referrals that do not meet program criteria and must “turn back” or return cases to the referring DCP&P office. This determination is made within 72 hours of receiving the referral. FPS program standards note that cases may be returned to DCP&P when:

- The risk of placement is not imminent, and the child can benefit from less intensive services,
- The family declines FPS services,
- There is a lack of available program slots,
- Caregiver substance use or mental illness exists to such a great extent that it impedes a family’s ability to engage in services and learn skills,
- There are safety concerns for FPS staff or;
- The child entered foster care prior to the FPS intervention or during the 72-hour intake period.

Table 1 provides a statewide summary of FPS referrals and the rate at which referrals were returned without service completion during Fiscal Year 2022.

**TABLE 1: NUMBER OF FPS REFERRALS & RATE OF RETURN
WITHOUT SERVICE, BY COUNTY**

COUNTY	TOTAL FAMILIES REFERRED	% OF TOTAL RETURNED TO DCP&P WITHOUT SERVICE
Atlantic	50	22.0%
Bergen	64	18.8%
Burlington	78	16.7%
Camden	56	8.9%
Cape May	55	27.3%
Cumberland	51	29.4%
Essex	64	28.1%
Gloucester	37	10.8%
Hudson	63	25.4%
Hunterdon	19	15.8%
Mercer	43	14.0%
Middlesex	57	24.6%
Monmouth	62	16.1%
Morris	23	13.0%
Ocean	96	11.5%
Passaic	51	3.9%
Salem	31	19.4%
Somerset	14	7.1%
Sussex	27	14.8%
Union	31	6.5%
Warren	33	12.1%
Statewide Totals	1,005	17.4%

Of the 1,005 cases referred to FPS during FY 2022, 17% (n=175) were returned to the referring local office to provide a more acceptable service to the family. As in prior years, the primary reason for returning a case was because the family declined to participate in services (80%).

TABLE 2: REASONS FOR RETURN WITHOUT SERVICE (N=175)

REASON FOR TURN BACK	NO. OF FAMILIES	PERCENTAGE
Family Declined FPS services or is unavailable	140	80%
Other	15	8.6%
Child placed prior to FPS intervention or during 72 hr. assessment period	9	5.1%
Safety concerns for FPS staff	5	2.9%
Substance abuse or mental illness exists to such a great extent that it impedes a family's ability to engage and learn skills	4	2.3%
Child not at risk of placement	1	0.6%
No Slots available at the time	1	0.6%
Totals	175	100%

Table 3 lists the number of families and children who received FPS services during the reporting period.

TABLE 3: NUMBER OF FPS SERVICE PARTICIPANTS

COUNTY	FAMILIES	CHILDREN
Atlantic	39	69
Bergen	52	107
Burlington	65	167
Camden	51	107
Cape May	40	97
Cumberland	36	74
Essex	46	110
Gloucester	33	70
Hudson	47	100
Hunterdon	16	37
Mercer	37	92
Middlesex	43	88
Monmouth	52	103
Morris	20	45
Ocean	85	215
Passaic	49	130
Salem	25	46
Somerset	13	25
Sussex	23	50
Union	29	72
Warren	29	60
Statewide Totals	830	1,864

CHILD PROTECTIVE SERVICES CONCERNS AND DETERMINATIONS

Table 4 lists the primary source of risk at referral that led to DCP&P involvement and the family's eventual referral to FPS. Of the 830 families that entered FPS programs, the most frequently cited source of risk was child neglect (70.6%).

TABLE 4: SOURCE OF RISK

SOURCE OF RISK	NO. OF FAMILIES	PERCENTAGE
Neglect	586	70.6%
Physical Abuse	164	19.8%
Emotional Abuse	44	5.3%
Sexual Abuse	35	4.2%
Other	1	0.1%
Totals	830	100%

Table 5 displays the age categories of the 1,864 children served in the fiscal year.

TABLE 5: AGE OF CHILDREN SERVED

	0-6 Years	7-12 Years	13-18 Years	Total
Number	894	570	400	1,864
Percentage	48%	31%	21%	100%

Families involved with DCP&P experience many challenges (acute, chronic, or cumulative) that impact their ability to ensure child safety and provide a stable home environment. Table 6 lists the stress factors identified among the 830 families that participated in FPS programs. While families can have multiple stress factors, the top three factors contributing to a family's stress include parent's mental health (58%), housing-related (46%) and financial (45%).

TABLE 6: FAMILY STRESS FACTORS

FAMILY STRESS FACTORS	TOTALS	PERCENTAGE OF FAMILIES
Mental health (parent)	483	58%
Housing-related	379	46%
Financial	373	45%
Mental/behavioral health (child)	311	37%
Domestic violence history	280	34%
Substance use (parent)	273	33%
Physical health (parent)	79	10%
Disability (parent)	63	8%
Physical health (child)	56	7%
Delinquency	54	7%
Disability (child)	50	6%
Substance use (child)	27	3%
Anger/Conflict Resolution	3	<1%
Communication Skills	2	<1%
Behavior management	1	<1%
Safety Strategies	1	<1%
Stress Management	1	<1%

Each child under DCP&P supervision has a case goal that drives the delivery of FPS services in their target home. Table 7 provides an overview of DCP&P case/service goals for the 1,864 children whose families participated in FPS.

TABLE 7: DCP&P CASE/SERVICE GOALS

Case/Service Goal	Children	Percentage
Stabilize in Home	1,659	89%
Reunification	182	10%
Stabilize in Placement	23	1%
Totals	1,864	100%

SERVICE INTERVENTIONS

A referral becomes an intervention when the family and FPS staff agree that FPS services are appropriate. While the method and focus of FPS service interventions vary from family-to-family, the service categories listed below provide a broad picture of the assistance FPS staff provided to families (see Table 8). While families can receive multiple services, the primary focus of FPS services in Fiscal Year 2022 was providing parenting skills (43%) and stress management/coping (38%) services.

TABLE 8: TYPES OF FPS SERVICES PROVIDED

SERVICES	UNITS PROVIDED	PERCENTAGE OF FAMILIES
Parenting skills	428	43%
Stress management / Coping	382	38%
Daily routines / time management	240	24%
Access resources	222	22%
Concrete services*	201	20%
Household management	184	18%
Communication skills	183	18%
Support mental health treatment	167	17%
Behavior management	150	15%
Anger/Conflict resolution	122	12%
None (Interrupted Intervention)	104	10%
Budget / Finance management	103	10%
Safety Strategies	99	10%
Support substance use treatment	96	10%
Support health / medical care	62	6%
Employment assistance	31	3%

*Concrete Services may include emergency financial assistance, food, clothing, transportation, and housing assistance

FPS does not provide services for substance use, mental health, or medical needs; however, staff do work with families to reinforce and complement the specialized care and treatment plans from a family systems perspective and link families to services, as appropriate.

FPS program staff are required to record time spent on each case and to categorize hours into Direct and Indirect Service Hours. Direct Service Hours include face-to-face contact between the FPS worker and the family. Indirect Service Hours include all other time spent on behalf of the family including, but not limited to, documentation, advocacy, collateral contacts, case consultation, supervision, and travel. During the COVID-19 pandemic, DCF permitted FPS providers to deliver the model using remote technologies when in-person services were declined. As a result, DCF expanded data collection to also include telehealth service hours provided to families.

Table 9 lists the duration and frequency of FPS services provided to participating families.

TABLE 9: DURATION AND FREQUENCY OF SERVICES PROVIDED TO FAMILIES

COUNTY	NO. FAMILIES SERVED	LENGTH OF PARTICIPATION IN SERVICES (Avg. Number of Weeks)	DIRECT SERVICE HOURS PER FAMILY (Avg. per Week)	INDIRECT SERVICE HOURS PER FAMILY (Avg. per Week)	TELEHEALTH SERVICE HOURS PER FAMILY (Avg. per Week)	TOTAL SERVICE HOURS PER FAMILY (Avg. per Week)
Atlantic	39	5.5	4.4	8.7	0.3	13.4
Bergen	52	5.0	4.7	6.9	0.5	12.1
Burlington	65	3.9	4.3	3.2	1.1	8.7
Camden	51	4.6	8.5	7.7	0.8	17.0
Cape May	40	5.5	3.0	10.8	1.3	15.1
Cumberland	36	4.2	4.1	5.3	1.2	10.6
Essex	46	5.1	3.3	6.8	1.4	11.5
Gloucester	33	4.6	7.2	10.9	0.7	18.8
Hudson	47	5.4	4.6	14.3	0.7	19.6
Hunterdon	16	4.6	5.7	10.4	0.3	16.4
Mercer	37	6.0	4.3	7.0	0.2	11.5
Middlesex	43	5.8	5.6	9.3	0.3	15.1
Monmouth	52	5.1	3.9	9.9	0.5	14.4
Morris	20	4.3	4.0	5.1	0.2	9.3
Ocean	85	5.2	3.2	8.0	1.2	12.4
Passaic	49	5.0	6.4	5.1	0.3	11.8
Salem	25	5.1	2.7	8.5	1.3	12.5
Somerset	13	5.3	4.0	9.6	1.3	14.9
Sussex	23	4.6	4.1	7.7	0.3	12.2
Union	29	5.6	5.0	11.0	0.7	16.7
Warren	29	5.1	5.8	12.6	0.5	18.8
STATEWIDE TOTAL	830	5.0	4.7	8.4	0.8	13.8

FPS programs provide limited financial assistance to help families overcome barriers to family success and to reinforce the therapeutic process. Assistance may be used to:

- Address concrete needs that jeopardize the family's stability,
- Strengthen and promote family relationships and;
- Reward progress or goal attainment.

Not every family FPS serves receives financial assistance. Disbursements are made at the discretion of the program based on the family's needs. Allowable expenses may include essential household items, engagement activities, skill-building aids (e.g., books, videos, games), and low-cost "reinforcement" for reward achievement. Table 10 provides an overview of the financial assistance families have received.

TABLE 10: FINANCIAL ASSISTANCE PROVIDED TO FAMILIES

FINANCIAL ASSISTANCE	
Total No. of Families Served by FPS	830
Percentage of Families Who Received Financial Assistance	46%
Total Amount of Financial Assistance Distributed	\$32,568.02
Average Amount Per Family	\$84.59

The FPS model has clear standards regarding a family's termination or discharge from the program. FPS is a short-term intervention - discharge planning begins early with the goal of linking families to other community-based services and supports.

FPS is a voluntary program and families can withdraw at any time however, every effort is made to maintain their engagement. When families choose to discontinue their participation, FPS informs the DCP&P case manager, provides linkages to other relevant services and closes the case.

Termination can occur when families destabilize and safety concerns become too great for children to remain at home. FPS remains actively involved with families that experience a short-term, out-of-home placement lasting seven days or less. During this time, FPS works to facilitate the child's safe and timely return, when possible. FPS must close the case when a placement exceeds seven days.

When FPS cases are closed and services terminated, interventions are classified as either:

- Full Intervention: FPS services last a minimum of 28 days or all case goals are achieved
- Interrupted Intervention: FPS services end prior to 28 days as a result of the family discontinuing FPS services or another reason beyond the control of FPS

Table 11 shows the intervention status of closed FPS cases by county.

TABLE 11: INTERVENTION STATUS (CLOSED CASES)

COUNTY	TOTAL FAMILY INTERVENTIONS	% FULL INTERVENTION	% INTERRUPTED INTERVENTION
Atlantic	39	77%	23%
Bergen	52	96%	4%
Burlington	65	80%	20%
Camden	51	82%	18%
Cape May	40	85%	15%
Cumberland	36	78%	22%
Essex	46	83%	17%
Gloucester	33	79%	21%
Hudson	47	89%	11%
Hunterdon	16	81%	19%
Mercer	37	86%	14%
Middlesex	43	65%	35%
Monmouth	52	77%	23%
Morris	20	70%	30%
Ocean	85	84%	16%
Passaic	49	84%	16%
Salem	25	72%	28%
Somerset	13	85%	15%
Sussex	23	87%	13%
Union	29	93%	7%
Warren	29	83%	17%
STATEWIDE TOTAL	830	82%	18%

Treatment goals are formed within 10 days of the initial FPS assessment. Goals are set through a collaborative process that includes the family, the referring DCP&P worker, and FPS staff. Goals are developed to address the reasons for the risk determination that precipitated the referral and the information obtained during the assessment. Treatment goals are specific to each family, clearly delineated and achievable within the duration of the FPS intervention. Table 12 provides a summary of the extent to which participating families attained their respective treatment goals at discharge. Seventy-seven percent (77%) of participating families achieved or significantly achieved their treatment goals.

TABLE 12: STATUS OF TREATMENT GOALS AT DISCHARGE

Individualized Treatment Goals	Total*	Percentage
Achieved	371	44.7%
Significantly Achieved	271	32.7%
Partially Achieved	50	6.0%
Minimally Achieved	138	16.6%
TOTAL	830	100%

*Includes 149 interrupted interventions which, by definition, include families that did not complete the program or achieve all of their respective treatment goals.

FPS programs track the whereabouts of all children from the time a case is accepted through discharge. Table 13 details the placement disposition at discharge of every child who received services in FY 2022 and whose case was closed by FPS during the reporting period.

TABLE 13: LOCATION OF CHILDREN SERVED AT DISCHARGE

Housing Location at Discharge	Total	Percentage
In Home	1,694	91%
Foster care	76	4.1%
With relative	41	2.2%
Shelter	23	1.2%
Other family-like setting	7	0.4%
Incarcerated / detention	6	0.3%
Unknown	4	0.2%
Group home	3	0.2%
Other	3	0.2%
Ran away	3	0.2%
In-state residential	2	0.1%
Totals	1,862	100%

*“Unknown” signifies the program was unable to provide the child’s location at discharge. The majority of “unknown” locations are among children whose families did not complete the full FPS intervention.

Table 14 provides a broad overview of the levels, programmatic delivery, and impact of FPS services statewide.

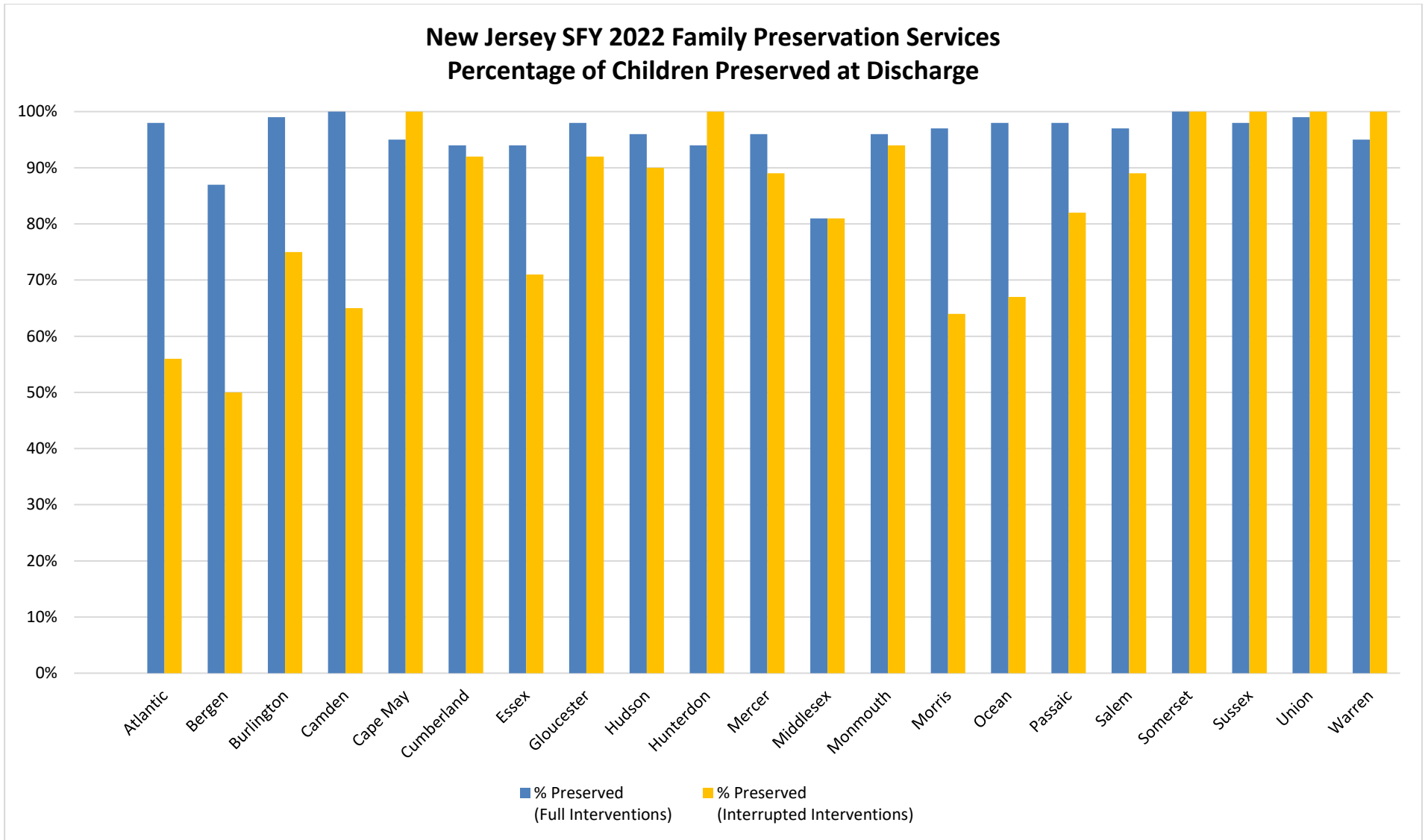
TABLE 14: SUMMARY OF FPS SERVICE INTERVENTIONS

COUNTY	Clients Served		FPS Services Provided				Child's Status at Discharge*			% PRESERVED Full Interventions	% PRESERVED Interrupted Interventions
	FAMILIES	CHILDREN	LENGTH OF PARTICIPATION IN SERVICES (Avg. Number of Weeks)	DIRECT SERVICE HOURS (Avg. per Week)	FULL INTERVENTION	INTERRUPTED INTERVENTION	PRESERVED	PLACED	OTHER		
Atlantic	39	69	5.5	4.4	30	9	61	4	4	98%	56%
Bergen	52	107	5.0	4.7	50	2	92	1	14	87%	50%
Burlington	65	167	3.9	4.3	52	13	157	1	9	99%	75%
Camden	51	107	4.6	8.5	42	9	99	0	6	100%	65%
Cape May	40	97	5.5	3.0	34	6	92	0	5	95%	100%
Cumberland	36	74	4.2	4.1	28	8	69	0	5	94%	92%
Essex	46	110	5.1	3.3	38	8	97	1	10	94%	71%
Gloucester	33	70	4.6	7.2	26	7	68	1	1	98%	92%
Hudson	47	100	5.4	4.6	42	5	95	1	4	96%	90%
Hunterdon	16	37	4.6	5.7	13	3	35	0	2	94%	100%
Mercer	37	92	6.0	4.3	32	5	88	0	4	96%	89%
Middlesex	43	88	5.8	5.6	28	15	71	4	13	81%	81%
Monmouth	52	103	5.1	3.9	40	12	95	6	2	96%	94%
Morris	20	45	4.3	4.0	14	6	40	1	4	97%	64%
Ocean	85	215	5.2	3.2	71	14	201	7	7	98%	67%
Passaic	49	130	5.0	6.4	41	8	124	0	6	98%	82%
Salem	25	46	5.1	2.7	18	7	43	1	2	97%	89%
Somerset	13	25	5.3	4.0	11	2	25	0	0	100%	100%
Sussex	23	50	4.6	4.1	20	3	49	0	1	98%	100%
Union	29	72	5.6	5.0	27	2	71	0	1	99%	100%
Warren	29	60	5.1	5.8	24	5	58	0	2	95%	100%
TOTAL	830	1,864	5.0	4.7	681	149	1,730	28	102	96%	81%

*Child's Status at Discharge: "Preserved" means the child remained in the target home; "Placed" means the child was in a DCP&P out-of-home placement setting; "Other" means the child voluntarily relocated or was residing in an alternative living arrangement not related to child protective services.

% Preserved (Full Interventions) is based on families who successfully completed the FPS program.

% Preserved (Interrupted Interventions) is based on families who did not successfully complete the FPS Program.



SECTION III: FOLLOW-UP DATA**CASE FOLLOW-UP (FY 2021)**

For families that received the full FPS intervention, follow up evaluations are completed by FPS provider agencies at three, six, and 12-month intervals, after they are discharged from the program. The proportion of children that remain with their families one year after receiving services is tied to the overarching goal of preventing placement and is considered an indicator of success for FPS programs.

Table 15 displays information regarding 12-month follow up results for children who received the full FPS intervention between July 1, 2020 to June 30, 2021 and whose families were reached for follow-up.

TABLE 15: 12-MONTH FOLLOW-UP RESULTS FOR CHILDREN SERVED IN FY 2021*

County	No. Children Eligible for Follow-Up	% Contacts Made	Preserved	Placed	Other**	% Preserved
Atlantic	104	100%	99	5	0	95%
Bergen	83	100%	77	6	0	93%
Burlington	96	100%	87	4	5	91%
Camden	134	100%	124	1	9	93%
Cape May	73	100%	69	1	3	95%
Cumberland	93	100%	93	0	0	100%
Essex	85	100%	80	5	0	94%
Gloucester	75	100%	68	1	6	91%
Hudson	34	100%	27	7	0	79%
Hunterdon	12	100%	12	0	0	100%
Mercer	56	100%	56	0	0	100%
Middlesex	62	100%	62	0	0	100%
Monmouth	69	100%	64	3	2	93%
Morris	29	100%	29	0	0	100%
Ocean	136	100%	126	8	2	93%
Passaic	123	100%	114	7	2	93%
Salem	36	100%	31	5	0	86%
Somerset	13	100%	13	0	0	100%
Sussex	34	100%	34	0	0	100%
Union	31	100%	31	0	0	100%
Warren	10	100%	10	0	0	100%
STATEWIDE TOTAL	1,388	100%	1,306	53	29	94%

*Table 15 is based on families for whom follow up data was available.

**"Other" means the child voluntarily relocated or was residing in an alternative living arrangement not related to child protective services.

Specific information regarding the status and housing location of children served one-year post-discharge is shown in Tables 16 and 17.

TABLE 16: STATUS OF CHILDREN SERVED IN FY 2021, 12 MONTHS POST-DISCHARGE*

Follow-Up Status	Total	Percentage
Preserved: Remains in home	1,215	87.5%
Preserved: Reunified with family	84	6.1%
Placed by DCP&P safety reasons (CP&P obtained custody)	45	3.2%
Other Placement Non-Safety Reasons (CP&P does not have custody)	17	1.2%
Voluntary move or relocation	9	0.6%
Preserved: Stabilized in foster home	7	0.5%
Remains in Placement (Reunification Service Goal Only)	6	0.4%
Other	3	0.2%
Brief placement & reunified w/in period	2	0.1%
TOTAL	1,388	100%

*Table 16 is based on families for whom follow up data was available.

TABLE 17: LIVING SITUATION OF CHILDREN SERVED IN FY 2021, 12-MONTHS POST-DISCHARGE*

Living Situation at 12-Month Follow-Up	Total	Percentage
In Home	1,292	93.2%
Foster care	44	3.2%
With relative	42	3.0%
Other family-like setting	5	0.4%
Group home	1	0.1%
Incarcerated / detention	1	0.1%
Living independently	1	0.1%
TOTAL	1,386	100%

*Table 17 is based on families for whom follow up data was available.

SECTION IV. CONCLUSION

In Fiscal Year 2022, New Jersey invested nearly \$10 million in contract funding for FPS services, reaching over 800 families with more than 1,800 children. Ninety-six percent (96%) of the children in families that completed full interventions remained safely in their homes at the end of the intervention; 94% of children that received the full intervention were still preserved in their home one year after discharge. New Jersey's Family Preservation Services succeeded in providing intensive support to families in crisis, so that child protection removals and foster care placements could be safely avoided, to the extent possible, and families could remain together while they work through struggles associated with poverty, behavioral and physical health, and other social and economic challenges.