



STATE OF RHODE ISLAND

Department of Children, Youth & Families

# SETTING P.A.C.E. FOR RHODE ISLAND CHILDREN AND FAMILIES

2025-2030 STRATEGIC PLAN



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# EXECUTIVE SUMMARY



The Rhode Island Department of Children, Youth & Families (**DCYF**) has served as the primary agency for child welfare, children's behavioral health, and juvenile justice since its establishment in 1980, guided by Rhode Island General Law § 42-72-5. Our mission is clear: mobilize resources to create an integrated statewide program that ensures children and families can reach their full potential.

As of today, **DCYF** serves over 2,300 children and families, empowered by a dedicated workforce of 600+ employees who operate across five main practice divisions: **Child Protective Services, Division of Family Services, Community Services & Behavioral Health, Licensing & Resource Families**, and **Division of Youth Development**. These practice areas are supported by our Central Management team, which oversees critical support functions, including budget management, human resources, legal services, and performance improvement.

To craft the 2025-2030 Strategic Plan, **DCYF** embarked on a comprehensive 10-month Listening & Learning initiative, engaging with staff, youth, families, and community partners. Through this effort, we gained insights into strengths and areas for improvement, allowing us to respond meaningfully to the voices of our community. This collaborative approach drives our commitment to reimagining the system of care with a focus on emphasizing prevention, expanding family-centered placements, safely reducing the use of congregate settings, and promoting stability for children and families through high-quality, responsive services.

The Strategic Plan is anchored in four core pillars—**PREVENTION, ACCOUNTABILITY, COLLABORATION, and ENGAGEMENT (P.A.C.E.)**—essential for achieving lasting outcomes for Rhode Island's children and families:

**PREVENTION:** Focusing on proactive measures to strengthen families, prevent out-of-home placements, and address underlying challenges before crises occur.

**ACCOUNTABILITY:** Building transparency, data-driven practices, and a culture of continuous improvement to ensure **DCYF** upholds the highest standards of service.

**COLLABORATION:** Enhancing partnerships across agencies, providers, and the community to support a unified approach to child and family well-being.

**ENGAGEMENT:** Actively involving families, youth, and community members in service planning and decision-making to foster trust and shared responsibility.

These pillars form the foundation of our approach to addressing current priorities from **DCYF**, the Governor's Office, and the Executive Office of Health and Human Services (EOHHS), aligning **DCYF**'s goals with the State of Rhode Island's vision for 2030.<sup>1</sup> By embracing the **P.A.C.E.** framework, **DCYF** aims to reshape how services are delivered, fostering a system that prioritizes **prevention, inclusivity, and positive outcomes for children and families**.

As we look to the future, **DCYF** invites all community members, stakeholders, and partners to join us in "Setting the **P.A.C.E.**" Together, we are committed to investing in Rhode Island's children, youth, and families—building a supportive, resilient, and vibrant community where every child can thrive.

<sup>1</sup> See Appendix A for Vision 2030 Key Interagency Goals.





## MISSION

Build a system of care where every child grows up in a safe and loving family environment that supports the development of strong, resilient families throughout the state of Rhode Island.

## VISION

The Rhode Island Department of Children, Youth & Families leads excellence in service delivery by strengthening **PREVENTION**, ensuring **ACCOUNTABILITY**, and respecting the dignity and diversity of every individual and family.

Through **COLLABORATION**, we effectively **ENGAGE** with families and communities, working together to ensure the safety and well-being of the children and youth we serve.

## OUR GUIDING PRINCIPLES

1. Family, community, and government share responsibility for the safety, protection, and well-being of children, emphasizing prevention over intervention through an integrated continuum of care that reflects a partnership between all parties and is culturally relevant.
2. When a natural family cannot care for a child or youth, it is our responsibility to ensure timely placement in a safe, stable, and nurturing environment.
3. Staff, families, resource caregivers, and service providers are partners in providing timely and appropriate high-quality care.
4. Partnership requires open, honest, and respectful communication fostering an awareness of the quality of services and clear and agreed-upon responsibilities.
5. Staff is held accountable to a professional code of conduct.
6. As an invaluable resource, staff is entitled to a safe, supportive work environment that fosters professional development.
7. Quality improvement is an ongoing process that utilizes external and internal performance standards.

# OUR CENTRAL LEADERSHIP

Governor Dan McKee appointed Ashley Deckert, MSW, MA as Director of the Rhode Island Department of Children, Youth, & Families, and she was confirmed to that position on May 18, 2023. With over 16 years of child welfare experience, Ms. Deckert provides leadership instrumental in guiding **DCYF**.

**DCYF** is responsible for child protection, well-being, behavioral health services, preventive measures for at-risk children and youth, and clinical support for families. **DCYF** works with families in need and those involved with the juvenile justice system who require community supervision. This comprehensive framework enhances **DCYF**'s ability to collaborate with other state departments, community organizations, and families, allowing for ongoing improvement of strategies.

Rhode Island, with a population of approximately 1 million (2020 Census), operates a centralized child welfare system available 24/7. **DCYF** is designed to provide comprehensive support and services to children and families while maintaining safety and well-being throughout the state.

## ORGANIZATIONAL STRUCTURE<sup>2</sup>

1. Child Protective Services (CPS)
2. Division of Family Services (DFS) which includes the Support and Response Unit (SRU), the Family Services Unit (FSU), and the Voluntary Extension of Care Program (VEC)
3. Community Services and Behavioral Health (CSBH)
4. Licensing and Resource Families (LRF)
5. Division of Youth Development (DYD)

**DCYF**'s Central Management includes several divisions and units that support our service operations:

- Office of the Director
- Contracts and Compliance
- Human Resources
- Legal Services
- Management and Budget
- Management Information Systems
- Workforce Development

The Office of the Director includes:

- Communications and Strategic Planning
- Policy and Legislative Affairs
- Facilities Management
- Division of Performance Improvement (DPI) which includes Research, Data Analytics and Evaluation, Case Review System, and Council on Accreditation compliance

<sup>2</sup> See Appendix B for DCYF Divisions & Units descriptions.

# CHARTING A COURSE

**The national movement to minimize the over-reliance on congregate care.**

In recent years, a national trend has emerged focusing on reducing reliance on congregate care and promoting family-based settings. **DCYF's** priorities align with this best practice and reflect our commitment to investing in a comprehensive continuum of care for children, youth, and families.

## CHILD & FAMILY SERVICE PLAN

To obtain federal funding under Title IV-B, a state or tribal agency must present a Child and Family Services Plan (CFSP) along with Annual Progress and Services Reports (APSRs).<sup>3</sup> The CFSP serves as a strategic blueprint detailing the initiatives and activities the state will implement over the next five years. Its aim is to effectively manage and integrate programs and services that enhance the safety, permanency, and well-being of children and families. **DCYF's** 2024-2029 CFSP was submitted to the Administration for Children and Families (ACF) in June 2024. To maintain consistency in benchmarks the goals of the CFSP are included in this strategic plan.

**“Our focus should be on every child being with a family. I’m more convinced of that now than ever. That doesn’t mean children need families: that means every single child needs a family.”**

*David Sanders  
Vice President, System Improvement,  
Casey Family Programs in  
“Ending Group Placements  
Principles,” Casey.org*

## DIRECTOR’S LISTENING & LEARNING INITIATIVE

Director Deckert concluded the “Listening & Learning” initiative on October 19, 2024. This initiative was designed to gather diverse perspectives by engaging with various groups to ensure that the voices of staff, community members, and families are represented. The Listening & Learning team conducted 78 meetings, both virtually and in person, and engaged with over 600 individuals. This series of structured, in-depth discussions has provided opportunities for staff, children, young adults, families, and both formal and informal community partners to engage in meaningful conversations about our challenges, strengths, outcomes, mission, and goals.

Through Listening & Learning, we identified four prevalent themes: **collaboration, communication, inclusion, and workforce.**

- Enhancing cohesiveness among **DCYF** workforce significantly improves outcomes for children, youth, and families.
- Strengthening communication and collaboration initiatives are essential for improving child well-being.
- Genuinely involving youth in their case planning is vital, and the inclusion of family, youth, and provider perspectives is critical.
- Cultivating a supportive Department culture with a well-trained workforce that is respectful and empathetic is crucial for team cohesion, casework integrity, and trust-building with youth and families.

<sup>3</sup> Title IV-B Guide, Administration for Children and Families

Director's Listening & Learning initiative recommendations:

- Increase access to therapeutic placement resources for children and youth.
- Ensure the availability of language-appropriate resources for all families.
- Implement timely referrals and reduce waitlists for therapeutic services.
- Provide trauma-focused resources for families and training for staff.
- Maintain consistent adherence to processes and policies across divisions.
- Simplify workflows and processes within each division to enhance efficiency.

## OUR PRIORITIES

In 2024, through collaboration with **DCYF** staff, community partners, families, and youth, we developed a series of priorities to advance our system.

**WELL-BEING:** Our objective is to establish a proactive child and family well-being system that prioritizes the voices of youth and families, enhances preventative support, and improves overall outcomes.

**RACIAL JUSTICE:** We are dedicated to promoting racial equity by identifying and eliminating systemic racism within our child and family well-being system.

**TRANSITION:** We focus on supporting foster youth in their successful transition to adulthood, paying particular attention to LGBTQIA+ youth, those aging out of care, and other marginalized groups.

**WORKFORCE:** We aspire to engage our workforce by fostering a well-resourced, well-trained, and supportive organizational culture.

**CONTINUUM OF CARE:** We are committed to building a robust continuum of care that ensures improved access to a diverse range of therapeutic supports and services.

**DCYF's** strategic plan leverages 2024 priorities identified from **DCYF**, the Governor's Rhode Island 2030 Plan, EOHHS, and Listening & Learning.





# OUR COMMITMENT

We are dedicated to implementing innovative programs, providing personalized services, and creating inclusive environments that encourage engagement at all levels. We believe that real transformation requires a culture that embraces flexible solutions tailored to the needs of those we serve.

Our leadership is committed to promoting growth and innovation by stepping outside our comfort zones. We hold ourselves accountable for our processes and principles to ensure they align with our mission and vision.

We value **PREVENTION**, **ACCOUNTABILITY**, **COLLABORATION**, and **ENGAGEMENT**. Together, we aim to empower a community where everyone feels heard and valued, creating a safe environment for diverse perspectives.

We understand that our journey is ongoing, and we pledge to continuously improve our practices based on feedback and learning. By working together, we can create a system of care that addresses the needs of children, youth, and families while building trust and promoting healing.

By emphasizing our foundational pillars of **PREVENTION**, **ACCOUNTABILITY**, **COLLABORATION**, and **ENGAGEMENT**, we intend to:

- Safely decrease the number of out-of-home removals.
- Expand family-based placements, including kinship care, non-relative foster care, and therapeutic foster care.
- Reduce reliance on in- and out-of-state congregate care.
- Provide excellence in service delivery by investing in the children, youth, and families of Rhode Island.







# OUR OPPORTUNITIES

In strategic planning, it is crucial to consider both risks and opportunities. **DCYF** has identified specific opportunities and risks to evaluate as we move forward:

## **BUILDING STRONG RELATIONSHIPS**

Remain in frequent communication with legal experts, advocates, legislators, and state partners to establish a clear understanding of **DCYF**'s vision and strategic initiatives.

## **MONITORING**

Implement a proactive and transparent monitoring approach to our continuum of care that addresses safety and supports resource allocation and adapts to system needs as they arise.

## **CHILD WELL-BEING ADVISORY COMMITTEE (CWAC)**

Encourage engagement in strategic planning and implementation by involving staff, community partners, youth, and families to promote ownership and commitment.

## **DATA AND TRACKING**

Development of a scorecard to valuate outcomes quarterly to identify trends, facilitate timely interventions, and maintain transparency with the community and families we serve.

# IDENTIFIED RISKS

## **VISION BUY-IN**

Implementing strategic plans involves navigating challenges, such as building staff buy-in and fostering support from community partners and families, which are essential for the plan's success.

## **LEGAL RISKS**

Decisions about child well-being are complex and multifaceted, requiring careful consideration of various factors. A thoughtful, collaborative, and planful approach helps balance the best interests of children and families while minimizing potential legal challenges.

## **BUDGET CONSIDERATIONS**

Shifting budget conditions and opportunities for maximizing revenue make resource allocation and planning difficult, emphasizing the need for flexible strategies to adapt to financial changes.

## **STAFFING CHANGES**

Frequent staffing changes among providers and **DCYF** can disrupt continuity and stability, leading to less favorable outcomes for children and families.

# THE RHODE AHEAD

The Department is committed to collaborating with the Executive Office of Health and Human Services to transform its **DCYF** system of care by maintaining a strong focus on prioritizing prevention, expanding family-centered placements, and reducing reliance on congregate care through high-quality services.

To achieve success, the Department has created **P.A.C.E.**—a framework to align our goals and ongoing **DCYF** priorities. These four essential pillars will form the basis of our five-year strategic plan.

## PREVENTION

Enhance the well-being of children and families by **safely decreasing out-of-home removals** and **reducing the number of children and youth in foster care** through investments in **prevention** services and the development of a strong continuum of care designed to meet the unique needs of families, allowing them to thrive.

## ACCOUNTABILITY

**Provide excellence in service delivery** by establishing **accountability** across all levels of our system, with a focus on ensuring the safety of children, using a racial justice lens to advance race equity and **improve permanency outcomes** in our child and family well-being system.

## COLLABORATION

**Collaborate** with community partners to address the needs of children and families in Rhode Island. Through **collaboration** and a **supportive workforce culture that is both well-resourced and well-trained**, we can proactively **expand family-based placements** and **decrease reliance on congregate care**.

## ENGAGEMENT

**Engage** with youth, families, and caregivers to **authentically center their voices** throughout the continuum of care and help youth successfully transition from our system, with special attention to marginalized youth.



# SETTING THE P.A.C.E.

To uphold **our commitment to excellence in service delivery**, we assert that **PREVENTION**, **ACCOUNTABILITY**, **COLLABORATION**, and **ENGAGEMENT** are fundamental pillars necessary for achieving positive outcomes for children and families. By integrating these principles into our short-term and long-term goals, we can effectively address immediate needs while ensuring sustainable improvements through the CFSP process and ongoing evaluation of our strategic plan.

## PREVENTION

Enhance the well-being of children and families by **safely decreasing out-of-home removals** and **reducing the number of children and youth in foster care** through investments in **prevention** services and the development of a strong continuum of care designed to meet the unique needs of families, allowing them to thrive.

### OBJECTIVES

1. Safely reduce out of home removals.
  - 1.1. Safely reduce the number of children in foster care.<sup>4</sup>

### SUCCESS MILE MARKERS

- Decrease the percentage of children who begin, and while active with the FCCP, are removed from their home within 12 months.
- Reduce the annual number of removals of children between July 1, 2025 and June 30, 2029.
- Reduce the percentage of children who are removed within 12 months of the family being assigned to the Family Services Unit (FSU).
- Decrease the percentage of children experiencing maltreatment re-occurrence within 12 months of the initial maltreatment.
- Decrease the number of unique child victims of maltreatment in foster care.

### MEASURED ACTIVITIES

Actions to be measured for evaluating progress toward success mile markers:

- Implementation and Training
- Screening and Assessment
- Workforce Development
- Fidelity and Consistency
- Awareness and Collaboration



<sup>4</sup> CFSP Goal 1  
Outcomes by June 30, 2029.  
See Appendix C for Prevention performance indicators and detailed metrics.





# SETTING THE P.A.C.E.

## PREVENTION (continued)

### OBJECTIVES

2. Improve the educational, behavioral health and physical well-being outcomes for children.<sup>5</sup>

### SUCCESS MILE MARKERS

- Increase the percentage of cases rated as “Strength” for CFSR educational, medical, and behavioral health well-being outcomes.

### MEASURED ACTIVITIES

Actions to be measured for evaluating progress toward success mile markers:

- Investigations and Supervision
- Children's Behavioral Health Services and Foster Care
- Youth Transition

<sup>5</sup> CFSP Goal 2  
Outcomes by June 30, 2029.  
See Appendix C for Prevention performance indicators and detailed metrics.

# SETTING THE P.A.C.E.

## ACCOUNTABILITY

**Provide excellence in service delivery** by establishing **accountability** across all levels of our system, with a focus on ensuring the safety of children, using a racial justice lens to advance race equity and **improve permanency outcomes** in our child and family well-being system.

### OBJECTIVES

- 3. Improve permanency for all children with emphasis on the entry cohort.<sup>6</sup>
- 3.1. Deliver excellent services by investing in the children, youth and families of Rhode Island.

### SUCCESS MILE MARKERS

- Increase the percentage of children who achieve permanency within 12 months of entry.
- Reduce racial and ethnic disparities in the percent of children removed from home year-over-year compared to the RI Census.
- Maintain the practice of Contract Management reviews to ensure contracts are effectively monitored for compliance with specified deliverables.
- Achieve Human and Social Services accreditation through the Council on Accreditation (COA) by 2025.

### MEASURED ACTIVITIES

Actions to be measured for evaluating progress toward success mile markers:

- Permanency and Stability
- Training and Partnerships
- Documentation and Contract Management



<sup>6</sup> CFSP Goal 3  
Outcomes by June 30, 2029.  
See Appendix C for Accountability performance indicators  
and detailed metrics.

# SETTING THE P.A.C.E.

## COLLABORATION

**Collaborate** with community partners to address the needs of children and families in Rhode Island. Through **collaboration** and a **supportive workforce culture that is both well-resourced and well-trained**, we can proactively **expand family-based placements** and **decrease reliance on congregate care**.

### OBJECTIVES

4. Engage workforce by building a well-resourced, well-trained, and supportive organization culture.<sup>7</sup>
- 4.1. Expand family-based placements, including kinship care, non-relative foster care, and therapeutic foster care.
- 4.2. Reduce the use of congregate care and out-of-state placements.

### SUCCESS MILE MARKERS

#### By March 1, 2025:

- Incrementally reduce the number of children in out-of-state placements.

#### By June 30, 2029:

- Achieve diversity in the workforce.
- Increase staff training and retention.
- License new non-relative resource families.
- Increase the percentage of resource families retained and open slots utilized.
- Increase the percentage of resource family attendance at retention events and activities, attendance at virtual or in-person training, and training hours completed.

#### By December 30, 2030:

- Safely reduce the number of children placed in congregate care facilities.
- Increase the percentage of children and youth moving out of a group home within six months of entering.

### MEASURED ACTIVITIES

Actions to be measured for evaluating progress toward success mile markers:

- Staff Training and Engagement
- Technology and Information Management
- Recruitment and Retention
- Youth Transitions and Congregate Care Reduction

<sup>7</sup> CFSP Goal 4

Outcomes by June 30, 2029, unless otherwise noted.

See Appendix C for Collaboration performance indicators and detailed metrics.







# SETTING THE P.A.C.E.

## ENGAGEMENT

**Engage** with youth, families, and caregivers to **authentically center their voices** throughout the continuum of care and help youth successfully transition from our system, with special attention to marginalized youth.

### OBJECTIVES

5. Increase youth, family, and caregiver voice through authentic family engagement.<sup>8</sup>

### SUCCESS MILE MARKERS

- Collect regular feedback from the Child Well-Being Advisory Committee, comprised of youth, families, foster families, **DCYF** staff, and community providers, and implement accountability measures to ensure that their insights are considered in decision-making processes.
- Increase face-to-face visitation between caseworkers and fathers.
- Maintain face-to-face visitation between caseworkers and children.
- Increase the percentage of resource families retained and open slots utilized.
- Reduce racial and ethnic disparities in monthly visits with mothers.
- Reduce racial and ethnic disparities in monthly visits with fathers.

### MEASURED ACTIVITIES

Actions to be measured for evaluating progress toward success mile markers:

- S.A.F.E. Model and Fidelity
- Family Engagement
- Training and Development
- Data Collection and Feedback

<sup>8</sup> CFSP Goal 5

Outcomes by June 30, 2029.

See Appendix C for Engagement performance indicators and detailed metrics.

# KEEPING THE COURSE

## QUARTERLY PLAN MONITORING AND EVALUATION

To effectively execute our strategic plan, we will conduct regular evaluations of our initiatives. The Strategic Planning and Performance Improvement, Research, and Data Analytics (DPI) teams will hold quarterly meetings with each **DCYF** Division to assess our progress, which also serve as a critical opportunity to discuss the key strategies identified by the Divisions and adjust our approach as needed to meet our goals.

## PROVIDER FEEDBACK

We gather feedback from providers through surveys and reviews conducted by DPI. We evaluate our partnerships with community providers through active contract management, ongoing communication, and quarterly meetings with our Child Well-Being Advisory Committee to ensure alignment with **DCYF** priorities and shared objectives.

We will provide regular updates to Division staff and maintain proactive contract and Division management while consistently communicating with providers, youth, and families to collect feedback and ensure their perspectives are considered. Each month, we share our Department's Strategic Metric Dashboard with providers to showcase our strengths and identify challenges.

## PULSE

**DCYF** participates in quarterly Performance, Utilization, Leadership, Support, and Execution (PULSE) meetings facilitated by EOHHS. This framework aims to establish project-specific goals and success measures in partnership with each EOHHS department for review by the Secretary. PULSE oversees and bolsters the performance of its agencies and interagency initiatives through data-driven decision-making, leadership involvement, and collaboration. While the specific goals for each PULSE may differ, they generally emphasize the development of a more proactive health and human services system by improving performance planning, aligning with strategic priorities, facilitating project and resource management, and maintain interagency collaboration.





# SUMMARY

This strategic plan delineates our pathway toward realizing our vision and accomplishing our mission, grounded in the pillars of **PREVENTION**, **ACCOUNTABILITY**, **COLLABORATION**, and **ENGAGEMENT**.

By putting into action the strategies and initiatives outlined in this plan, we will reshape our system of care. United in our efforts, we can drive meaningful progress, assess our success, and ensure that **DCYF** not only achieves its objectives but also adapts effectively to an ever-changing child well-being system. Set **P.A.C.E.** with **DCYF** in providing excellence in service delivery by investing in the children, youth & families of Rhode Island.



# ACKNOWLEDGMENTS

Effective strategic planning necessitates collaboration, enabling us to harness diverse perspectives, provide innovative solutions, and create a well-rounded approach to meet the needs of those we serve. Together, we are committed to driving transformational change that puts well-being at the forefront for our systems. Our strategic partnerships are essential for embracing best practice, challenging the status quo, and achieving enduring positive outcomes for children, youth and families.

We would like to acknowledge our partners:

- Youth, Families, and Young Adults
- **DCYF** Staff
- Union Leadership
- Casey Family Programs
- Children's Bureau - An Office of the Administration for Children & Families
- Office of the Child Advocate
- Rhode Island KIDS COUNT
- Rhode Island Family Court
- Rhode Island General Assembly
- Rhode Island Coalition for Children, Youth, and Families
- Rhode Island Child Well-Being Advisory Committee
- Rhode Island Birth Parent Advisory Committee
- Rhode Island Foster Family Advisory Committee
- Rhode Island Kinship Advisory Committee
- Rhode Island Youth Advisory Committee (SPEAK)
- Formal and Informal Community Partners



# APPENDIX A

## VISION FOR 2030 INTERAGENCY GOALS

To achieve the Governor's Vision for 2030 and drive forward health and human services priorities, we have set forth the following roadmap crucial to transforming DCYF as a comprehensive system of care. Shaded areas indicates alignment with interagency objectives for the Executive Office of Health and Human Services and the Governor's Rhode Island 2030 Vision.

**PREVENTION:** Enhance the well-being of children and families by **safely decreasing out-of-home removals** and **reducing the number of children and youth in foster care** through investments in **prevention** services and the development of a strong continuum of care designed to meet the unique needs of families, allowing them to thrive.

Strategic Goal	EOHHS	1	2	3	4	5	Governor's RI 2030	1	2	3	4	5	6	7	8	9	10
Safely reduce out of home removals																	
Safely reduce the number of children in foster care																	

**ACCOUNTABILITY:** Provide **excellence in service delivery** by establishing **accountability** across all levels of our system, with a focus on ensuring the safety of children, using a racial justice lens to advance race equity and **improve permanency outcomes** in our child and family well-being system.

Strategic Goal	EOHHS	1	2	3	4	5	Governor's RI 2030	1	2	3	4	5	6	7	8	9	10
Improve permanency for all children with emphasis on the entry cohort																	
Deliver excellent services by investing in the children, youth , and families of Rhode Island																	

**COLLABORATION:** **Collaborate** with community partners to address the needs of children and families in Rhode Island. Through **collaboration** and a **supportive workforce culture that is both well-resourced and well-trained**, we can proactively **expand family-based placements** and **decrease reliance on congregate care**.

Strategic Goal	EOHHS	1	2	3	4	5	Governor's RI 2030	1	2	3	4	5	6	7	8	9	10
Engage workforce by building a well-resourced, well-trained, and supportive organization culture																	
Expand family-based placements, including kinship care, non-relative foster care, and therapeutic foster care.																	
Reduce the use of group care and out-of-state placements																	

**ENGAGEMENT:** **Engage** with youth, families, and caregivers to **authentically center their voices** throughout the continuum of care, and help youth successfully transition from our system, with special attention to marginalized youth.

Strategic Goal	EOHHS	1	2	3	4	5	Governor's RI 2030	1	2	3	4	5	6	7	8	9	10
Increase youth, family, and caregiver voice through authentic family engagement																	

Rhode Island 2030 Plan can be viewed at <https://www.ri2030.com/files/public/RI2030-Version2022-final-optimized.pdf>

# APPENDIX B

## DCYF DIVISIONS AND UNITS

### CHILD PROTECTIVE SERVICES (CPS)

CPS is responsible for receiving, screening, and investigating reports of child abuse and neglect. This Division ensures that each child and youth is protected from harm through the timely investigation of reports of child abuse and neglect as it receives, screens, and responds to reports of suspected child maltreatment. CPS operates 24 hours per day, 7 days per week, 365 days per year, and is staffed with child protective investigators and supervisors. The Division also refers families for community-based treatment and preventive services as needed in situations where there is no identified present danger or safety threat.

### DIVISION OF FAMILY SERVICES (DFS)

DFS includes three units: The Support and Response Unit (SRU), the Family Services Unit (FSU), and the Voluntary Extension of Care Program (VEC).

**SRU** assists families seeking help with navigating community services through assessments where appropriate, community service referrals, and transfers from CPS to FSU and CSBH, with or without legal involvement when ongoing case management is required. SRU performs screening, assessment, and referral functions for child welfare matters involving families not active with DCYF. A child welfare call regarding an active DCYF case is directed to the assigned primary social caseworker in FSU. Most families who engage with SRU are directed back to the community for services.

**FSU** becomes involved with families after a CPS investigation has been conducted and a determination is made that services are needed to address abuse, neglect, or dependency within the family. The role of the unit is to engage with and assist families in accessing services and support needed to ensure the safety and well-being of children. Social caseworkers provide case management for families who are caring for their children in their home as well as families whose children have been placed in out-of-home care. If it is determined that a child cannot return safely to their family, FSU staff will pursue alternative permanency options, such as adoption or guardianship. Many of the families receiving case management from FSU are involved with the Rhode Island Family Court on related abuse or neglect petitions. The unit also supports families of youth involved with the Rhode Island Family Court on juvenile justice matters.

**VEC** is a dedicated unit within DFS to support older youth in achieving permanency, stable housing, job training, and/or educational goals.

### COMMUNITY SERVICES AND BEHAVIORAL HEALTH (CSBH)

CSBH is responsible for developing a continuum of care for children's behavioral health services to support children within their family settings. CSBH reviews cases to ensure access to services and proper matching of services to the needs of children and families. The Division also monitors the quality of the Department's service array. Combining this work with **DCYF's** statutory responsibility as the children's behavioral health authority, this division serves as the bridge between **DCYF** and other state agencies, providers, and advocates for children's behavioral health initiatives.



## DCYF DIVISIONS AND UNITS (continued)

### LICENSING AND RESOURCE FAMILIES (LRF)

LRF is responsible for the statewide recruitment, development/training, licensing, matching/placement, support, and additional permanency services for all resource families. Resource families include relative and non-relative kinship caregivers, traditional foster families, therapeutic foster families, and pre-adoptive families. LRF also licenses and monitors group homes, residential programs, and private foster care agencies.

### DIVISION OF YOUTH DEVELOPMENT (DYD)

Includes the Thomas C. Slater Rhode Island Training School (RITS), the state's only secure juvenile facility, and oversees juvenile probation offices throughout the state. DYD provides programming to any youth who has been found to be either delinquent or wayward by the Rhode Island Family Court. The goal of the Division is to promote the rehabilitation of youth through a continuum of flexible, innovative, and effective programs. The Division strives to promote positive outcomes for youth and to reduce recidivism within the juvenile and criminal justice systems.

**RITS** is a secure juvenile justice program for youth who are detained and/or sentenced to the facility by order of the Rhode Island Family Court. The RITS provides youth rehabilitation through a comprehensive continuum of services provided in partnership with families, the community, and **DCYF**. Supervision, security, education, behavioral health, physical health, and transition services are provided to all youth at the RITS in an individualized, culturally and gender-sensitive manner.

The **OFFICE OF JUVENILE PROBATION** provides supervision in the community for youth who have been adjudicated wayward or delinquent by the Rhode Island Family Court and are sentenced to a term of probation or who are sentenced to the RITS but can serve their sentence in a residential treatment program (temporary community placement). Probation Officers monitor the youth's progress and assist in coordinating needed services. Juvenile Probation seeks to promote positive youth outcomes such as educational attainment, meaningful employment, and stable housing.

# APPENDIX C

## SETTING THE P.A.C.E. - MILE MARKERS

### PREVENTION

Enhance the well-being of children and families by **safely decreasing out-of-home removals** and **reducing the number of children and youth in foster care** through investments in **prevention** services and the development of a strong continuum of care designed to meet the unique needs of families, allowing them to thrive.

OBJECTIVE	
1. Safely reduce out of home removals.	
1.1. Safely reduce the number of children in foster care. <sup>4</sup>	
MILE MARKERS	Reduce percent of children who begin, and while active with the FCCP, are removed from their home within 12 months from 8% to 6%. <sup>9</sup>
	Reduce entry rate of removals from 3.5 per 1,000 children to 3.0 per 1,000 children. <sup>10</sup>
	Reduce percent of children/families assigned to FSU, receiving in-home supports/ services and subsequently removed within 12 month follow-up from 14% to 10%. <sup>11</sup>
	Reduce percent of children experiencing maltreatment recurrence from 9.8% to 8.0%. <sup>12</sup>
	Reduce the rate of children experiencing maltreatment in foster care from 14.87 victimizations per 100,000 days in care to 13.4 victimizations per 100,000 days in care. <sup>13</sup>

OBJECTIVE	
2. Improve the educational, behavioral health and physical well-being outcomes for children. <sup>4</sup>	
MILE MARKERS	Increase cases rated a Strength on the CFSR well-being outcome 2, Item 16 (education) from 87% to 92%. <sup>14</sup>
	Increase cases rated a Strength on the CFSR well-being outcome 3, Item 17 (medical) from 78% to 83%. <sup>15</sup>
	Increase cases rated a Strength on the CFSR well-being outcome 3, Item 18 (mental/behavioral health) from 68% to 73%. <sup>16</sup>

<sup>4</sup>CFSP Goal 1

<sup>5</sup>CFSP goal 2

<sup>9</sup>Baseline: CY23, data source: RIFIS.

<sup>10</sup>Baseline: FFY23, data source: Permanency Analytic Report.

<sup>11</sup>Baseline: SFY22, data source: Homebased Services Report.

<sup>12</sup>Baseline: FFY22, data source: Safety Analytic Report.

<sup>13</sup>Baseline: FFY23, data source: Safety Analytic Report.

<sup>14</sup>CFSR Child & Family Wellbeing required outcome 2: Children receive appropriate services to meet their educational needs. Item 16: Educational needs of the child. Baseline: November 2022 – October 2023, data source: CFSR case reviews.

<sup>15</sup>CFSR Child & Family Wellbeing required outcome 3: Children receive adequate services to meet their physical and mental health needs. Item 17: Physical health of the child. Baseline: November 2022 – October 2023, data source: CFSR case reviews.

<sup>16</sup>CFSR Child & Family Wellbeing required outcome 3: Children receive adequate services to meet their physical and mental health needs. Item 18: Mental/ behavioral health of the child. Baseline: November 2022 – October 2023, data source: CFSR case reviews.

Outcomes by June 30, 2029.

# SETTING THE P.A.C.E. - MILE MARKERS

## ACCOUNTABILITY

**Provide excellence in service delivery** by establishing **accountability** across all levels of our system, with a focus on ensuring the safety of children, using a racial justice lens to advance race equity and **improve permanency outcomes** in our child and family well-being system.

OBJECTIVE	
3. Improve permanency for all children with emphasis on the entry cohort. <sup>6</sup>	
3.1. Deliver excellent services by investing in the children, youth, and families of Rhode Island.	
MILE MARKERS	Increase the percent of children who achieve permanency within 12 months of entry. <sup>17</sup>
	Reduce racial and ethnic disparities in the percent of children removed from home year over year compared to RI Census.
	Maintain Contract Management reviews to ensure that 90% of contracts are effectively monitored for compliance with specific deliverables.
	Achieve Human and Social Services accreditation through the Council on Accreditation (COA) by 2025.

<sup>6</sup> CFSP Goal 3  
<sup>17</sup> Baseline: 22A22B, data source: RI Data Profile.  
Outcomes by June 30, 2029, unless otherwise noted.



# SETTING THE P.A.C.E. - MILE MARKERS

## COLLABORATION

**Collaborate** with community partners to address the needs of children and families in Rhode Island. Through **collaboration** and a **supportive workforce culture that is both well-resourced and well-trained**, we can proactively **expand family-based placements** and **decrease reliance on congregate care**.

### OBJECTIVE

4. Engage workforce by building a well-resourced, well-trained, and supportive organization culture.<sup>7</sup>
  - 4.1. Expand family-based placements, including kinship care, non-relative foster care, and therapeutic foster care.
  - 4.2. Reduce the use of congregate care and out-of-state placements.

### MILE MARKERS (by objective)

#### BY MARCH 1, 2025

Incrementally reduce the number of children in out-of-state placements, with goal of no more than 60 youth in out-of-state placements.

#### BY JUNE 30, 2029

Achieve 39% diversity in the DCYF workforce.

Increase staff training to 65%.

Increase staff retention to 92%.

License a minimum of 85 new non-relative resource families.<sup>18</sup>

- Among the total newly licensed families from July 1, 2024, to July 2025, 94% of homes will be retained as of June 30, 2025.
- Increase utilization of open slots among DCYF-licensed non-relative families to 70%.

Increase licensed family participation in retention events and in-service training by the following measures:

- 18% increase in total training hours completed.
- 25% increase in family attendance at virtual or in-person training sessions.
- 15% increase in family attendance at retention events and activities.

#### BY DECEMBER 30, 2030

Safely reduce the number of children placed in congregate care facilities by 50% compared to figures from December 30, 2024.

Increase the percentage of children/youth moving out of a group home within six months of entering from 10% to 25%.

<sup>7</sup> CFSP Goal 4

<sup>18</sup> 2025 Resource Family Recruitment & Retention Goals

Outcomes by June 20, 2025, unless otherwise noted.

SETTING THE P.A.C.E. - MILE MARKERS

ENGAGEMENT

**Engage** with youth, families, and caregivers to **authentically center their voices** throughout the continuum of care, and help youth successfully transition from our system, with special attention to marginalized youth.

OBJECTIVE	
5. Increase youth, family, and caregiver voice through authentic family engagement. <sup>8</sup>	
	Implement the Child Well-Being Advisory Committee, comprised of youth, families, foster families, staff, and community providers who will provide regular feedback on their experiences with DCYF, with accountability measures in place to ensure that their insights are considered in decision-making processes.
	Increase frequency of face-to-face visitation between caseworkers and mothers from 68% to 75%.
	Increase frequency of face-to-face visitation between caseworkers and fathers from 42% to 50%.
	Increase cases rated a Strength for CFSR well-being outcome 1, Item 14 (Caseworker Visits with Child) from 78% to 83%.
	Reduce racial and ethnic disparities in monthly visits with mothers, year over year.
	Reduce racial and ethnic disparities in monthly visits with fathers, year over year.

<sup>8</sup> CFSP Goal 5  
Outcomes by June 30, 2029, unless otherwise noted.



STATE OF RHODE ISLAND

**Department of Children, Youth & Families**

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