

P.A.C.E. SCORECARD

The development of this scorecard serves to evaluate outcomes to identify trends, facilitate timely interventions and maintain transparency with the community and families we serve.

QUARTER 2: April 1, 2025–June 30, 2025

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 Child Family Service Plan 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

- Safely reduce out of home removals.
- Safely reduce the number of children in foster care.

Prevention Efforts: In the second quarter of 2025, DCYF continued to see a decline in the number of children in out-of-home foster care placements. In June 2025, **1,248** children were placed out of home, a **1.7%** decrease from the previous quarter, which ended in March 2025 with **1,270** children placed out of home.¹

Proactive Family Support to Prevent Child Removal: DCYF remains focused on preventive efforts that strengthen families and avoid child removal. Timely, proactive supports address issues before they escalate.

Social Caseworker II staff in the Support and Response Unit manage inquiries to the DCYF Family Support and Response Line, connecting families with supportive services to prevent maltreatment and reduce the likelihood of children entering the child welfare system. **This quarter**, SRU received **446** calls. Out of the total calls, **91** calls resulted in prevention responses, **298** calls requested information or community referrals and **57** calls required no further action.²

Safety Assessment Through Family Engagement (SAFE practice model): Throughout the quarter, division meetings were held to clarify goals and align on activities in support of our [2025-2030 Strategic Plan](#). These discussions emphasized the importance of our P.A.C.E. framework and its alignment with our SAFE practice model. It is essential we invest in our SAFE practice model and return to foundational practices. While our quantitative data shows positive outcomes, we must ensure these results reflect the experiences of staff, youth and families. Strengthening fidelity to our SAFE practice model is crucial for reaching and maintaining excellence in delivery of all services to children, youth and families in Rhode Island. All staff will participate in training on the model and supervisors will receive targeted support to address fidelity issues. Ongoing training sessions will be scheduled to ensure continuous improvement.

1. Source: July 2025 Strategic Metric Dashboard (point in time)

2. Dates April 2025 –June 2025. Source: July 2025 Strategic Metric Dashboard (point in time)



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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	Qtr. 1	Qtr. 2	Qtr. 3	Qtr. 4
<ul style="list-style-type: none"> 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. 				
<p>Mile Markers</p>				
<p>Maintain quarterly Active Contract Management (ACM) reviews to effectively monitor contracts through qualitative and quantitative analysis.</p>	Total ACMs 4	Total ACMs ¹ : 4		
<p>Achieve Human and Social Services accreditation through the Council on Accreditation (COA) by 2025.</p>	<p>Accreditation achieved on February 14, 2025</p>			
<p>RI Children's Behavioral Health Consent Decree</p> <p>On January 7, 2025, the State of Rhode Island entered into a consent decree with the U.S. Department of Justice (DOJ) in Civil Action No. 24-cv-00531. This agreement was reached after a federal investigation found violations of federal civil rights laws concerning psychiatric hospitalizations of youth from 2017 to 2022.</p> <p>The State achieved multiple milestones related to the RI Children's Behavioral Health Consent Decree. In May 2025, DCYF launched an advisory board composed of DCYF staff, public and private partners, plus several experts with lived experience. Also in May, DCYF received a final monitoring plan, which will guide how the State will be assessed on its progress throughout the duration of the consent decree. And in early July, DCYF, in partnership with BHDDH and the EOHHS Data Ecosystem team, completed a baseline data report that will inform the implementation planning that will be completed over the next several months.</p> <p>DCYF has posted openings for five social service analysts and one supervisor to form a new unit that will provide transition coordination and related support when a child is placed in a psychiatric hospital such as Bradley. DCYF continues to develop these transition specialists' roles, responsibilities and training and anticipates hiring them in the next quarter.</p> <p>The State remains on track with meeting all requirements of the consent decree.</p>				

1. Source: Division of Performance Improvement – ACM Tracking



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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

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

Mile Markers	Qtr. 1	Qtr. 2	Qtr. 3	Qtr. 4
Achieve 39% diversity in the DCYF workforce.	36%	37% ¹		
Increase staff retention to 92%.	96%	92% ²		
By March 2025: Incrementally reduce the number of children in out-of-state placements, from 77 to 60 youth.	69	70 ³		

Staff Training: In the second quarter, DCYF provided **48** new worker courses with **438** participants. Additionally, DCYF facilitated **105** professional development courses with **1,200** participants, totaling **379** training hours.

Over the next 6 months all staff will participate in training on the SAFE Practice model. Supervisors will receive targeted support from their administrators to address SAFE Practice model fidelity. Moving forward, ongoing training sessions will be scheduled for all staff to ensure a consistent opportunity for retraining.

Residential Intervention: DCYF leadership continues to prioritize ongoing efforts to meet and discuss the individual needs of children. There has been a noted increase in children aged 8-12 with acute needs, amplifying the need for targeted efforts to identify family-based placement options and creative child-specific interventions. Leadership facilitates weekly meetings focusing on youth receiving residential intervention, regularly reviewing discharge planning initiatives aimed at transitioning youth to less restrictive levels of care. We remain dedicated to proactive treatment planning and are committed to ongoing collaboration to support successful transitions for our youth.

1. Source: Division of Central Management, Human Resources (point in time)
 2. Source: Division of Central Management, Human Resources (point in time)
 3. Source: July 2025 Strategic Metric Dashboard (point in time)



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2025 Resource Families Recruitment & Retention Plan¹

Mile Markers July 1, 2024-June 30, 2025	FY25 Actuals	Goals	Difference
License 85 new non-relative families yearly	71	85	(14)
Among the total newly licensed families from July 1, 2024, to July 2025, 94% of homes will be retained as of June 30, 2025.	94%	94%	+0%
Of the new non-relative licensed foster homes, 25 will be open to match with youth ages 12 and older.	27	25	+2
Of new non-relative licensed foster homes, at least 50% will be licensed to support sibling placements.	42%	50%	(8pps)
Increase the number of non-kinship foster homes that will be open to match with children/youth who have mental health or physical disability to 98% of total licensed non-relative foster homes.	84%	98%	(14pps)
Increase by 25% the number of non-relative licensed foster homes that will be open to match with children/youth who identify as LGBTQ+.	33%	25%	+8%
Of 85 new non-relative licensed foster homes, at least 30% will identify as BIPOC.	25%	30%	(5pps)
Increase utilization of open slots among DCYF-licensed non-relative families to 70%.	50%	70%	(20pps)

In October 2025, DCYF will publish a reflection on our [2025 Resource Family Recruitment & Retention plan](#), highlighting recruitment and retention efforts. Additionally, an updated 2026 Resource Family Recruitment & Retention plan will be published to the agency website.

1. Sources: DCYF 5-year PACE Scorecard, Binti licensing & placements modules; DCYF 430 report



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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.

<p>Objective</p> <ul style="list-style-type: none"> Increase youth, family and caregiver voice through authentic family engagement. 				
Mile Markers	Qtr. 1	Qtr. 2	Qtr. 3	Qtr. 4
Implement the Child Well-Being Advisory Committee (CWAC), comprising 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 their insights are considered in decision-making processes.	Total Mtgs. 1	Total Mtgs. ¹ 0	Total Mtgs.	Total Mtgs.
Increase frequency of face-to-face visitation between caseworkers and mothers from 68% to 75%.	68%	68% ²		
Increase frequency of face-to-face visitation between caseworkers and fathers from 42% to 50%.	44%	44% ³		
<p>Child Well-Being Advisory Committee: This quarter, the CWAC Racial Justice, Workforce, Continuum of Care and Transition subcommittees met monthly. The full committee will meet in August 2025. The Transition subcommittee submitted one recommendation for formal review on June 5, 2025. The Review Committee asked the Transition Subcommittee for clarification on June 18. After clarification is received, the Review Committee will decide whether to approve the recommendation.</p>				
<p><small>1. Source: Quarterly CWAC meetings: Director's Office 2. Source: July 2025 Strategic Metric Dashboard 3. Source: July 2025 Strategic Metric Dashboard</small></p>				



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Appendix

Mile Markers with yearly metrics. Yearly metrics will be reported on January 30, 2026.

Mile Markers	Annual Metrics January 1, 2025-December 31, 2025
<p>Prevention</p> <ul style="list-style-type: none"> Reduce percent of children while active with Family Community Care Partnerships are removed from their home within 12 months from 8% to 6%. Reduce entry rate of removals from 3.5 per 1,000 children to 3.0 per 1,000 children. Reduce percent of children/families assigned to Family Service Unit receiving in-home supports/services and subsequently removed within 12-month follow-up from 14% to 10%. <p>Child & Family Services Review (CFSR) objective:</p> <ul style="list-style-type: none"> Increase cases rated a Strength on the CFSR well-being outcome, education, from 87% to 92%. Increase cases rated a Strength on the CFSR well-being outcome, medical, from 78% to 83%. Increase cases rated a Strength on the CFSR well-being outcome, mental/behavioral health, from 68% to 73%. 	
<p>Accountability</p> <ul style="list-style-type: none"> Increase the percent 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 RI Census. 	
<p>Collaboration</p> <p>No annual metrics. All metrics are reported quarterly.</p>	
<p>Engagement</p> <ul style="list-style-type: none"> 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. <p>CFSR objective: Increase cases rated a Strength for CFSR well-being outcome, Caseworker Visits with Child, from 78% to 83%.</p>	